

# ADCANP Performance Measurement and Evaluation Training

August 1-2, 2016

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# Welcome

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Dr. Francesca Adler-Baeder

- Ami Landers, Project Manager
- Rachel Odomes, Research Assistant
- Graduate Research Assistants

# Partnership

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- CTF and Auburn University have a collaborative history
- We are your partner
- We deliver “news you can use”



# Trust

The Alabama  
Department of  
Child Abuse  
Prevention

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The Children's  
Trust Fund

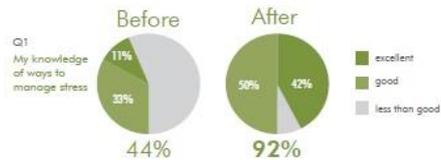
2007-2008  
Evaluation Report



### Parent Education and Home Visiting Knowledge of and Use of Support Services



### Parent Education and Home Visiting Stress Management

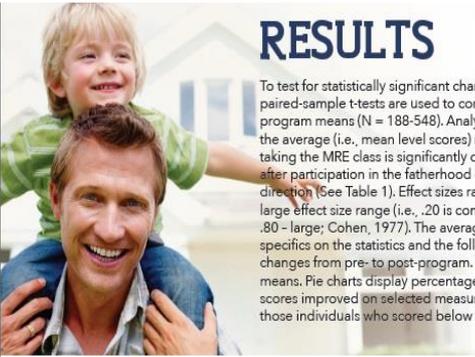


# Pathways to Responsible Fatherhood

REPORT



OCTOBER 2014 - APRIL 2015



# RESULTS

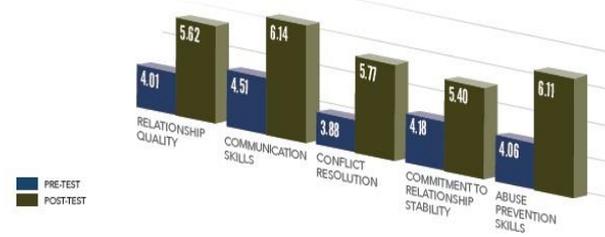
To test for statistically significant changes from pre-test to post-test, paired-sample t-tests are used to compare pre-program and post-program means (N = 188-548). Analyses revealed that in multiple areas, the average (i.e., mean level scores) reported by participants before taking the MRE class is significantly different than their reported scores after participation in the fatherhood class; changes are in the desired direction (See Table 1). Effect sizes range from .89 to 1.44, and are in the large effect size range (i.e., .20 is considered small, .50 - moderate, and .80 - large; Cohen, 1977). The average effect size is 1.11. Table provides specifics on the statistics and the following charts provide a visual of the changes from pre- to post-program. Bar graphs display changes in group means. Pie charts display percentages of individuals whose post-program scores improved on selected measures. Calculations are based on only those individuals who scored below the maximum at pre-test.

**Table 1.** Paired Sample T-test for mean change over time.

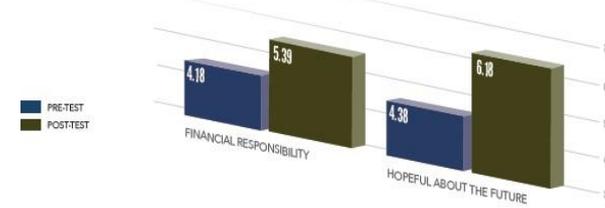
	Pre-Test M	SD	Post-Test M	SD	df	t	Cohen's d
<b>Relational Skills</b>							
Relationship Quality	4.01	1.55	5.62	1.47	206	-15.73***	1.09
Communication	4.51	1.45	6.14	.90	246	-18.47***	1.17
Conflict Resolution	3.88	1.41	5.77	.94	256	-21.49***	1.34
Commitment to Relationship Stability	4.18	1.47	5.40	1.54	231	-13.57***	.89
Abuse Prevention Skills	4.06	1.46	6.11	.97	187	-17.12***	1.25
<b>Individual Strengths</b>							
Financial Responsibility	4.18	1.23	5.39	.94	414	-19.06***	.94
Hopeful About Future	4.38	1.40	6.18	.94	547	-28.74***	1.22
<b>Parenting</b>							
Cooperation with Child Support Personnel	3.62	1.46	5.13	1.80	360	-16.93***	.89
Positive Parenting Behavior	4.84	1.33	6.20	1.01	485	-24.15***	1.09
Commitment to Pay Full Child Support	3.51	1.54	5.11	1.92	325	-16.90***	.94
Commitment to Fatherhood	4.88	1.21	6.62	.76	376	-28.12***	1.44

a. Mean level scores differed in the expected, desired direction and were statistically significant; \*\*\* p < .001. Cohen's d reported in absolute values.

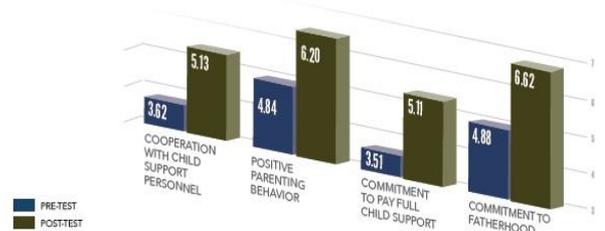
## Relational Outcomes for Participants



## Individual Outcomes for Participants



## Parenting Outcomes for Participants



# What stays the same this year?

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- Program implementation
- Support and technical assistance
- Regular reporting of program participation
- Universal reporting forms online

# What is different?

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- No PRF!
- Streamlined TDSS
- SMART Report form (quarterly)
  - Q1: July-Sept (due Oct 5)
  - Q2: Oct-Dec (due Jan 5)
  - Q3: Jan-Mar (due Apr 5)
  - Q4: Apr-Jun (due July 5)

# Reporting Forms

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## Participant Tracking Forms

- PRF (Participant Record Form)
- TDSS (Target Data Spread Sheet)
- MCL (Master Code List)- this list contains all participants in all programs
- SMART Report form (quarterly)

# Target Data Spread Sheet

Stored in your program's Dropbox

- Two target numbers
  - Enrollment
  - Surveys – 80%
- Monthly updates
  - Newly enrolled
  - Completed datasets
  - By the 5th

2017 ADCANP/CTF TDSS - Target Data Spread Sheet				
PROGRAM NAME: Aid To Inmate Mothers (AIM)				
REPORTING MONTH	# of NEWLY Served Participants		TARGET # (per CTF)	# of Paired Surveys (Intake + Post) (GOAL: 80% of Target #)
	Surveyed Participants	Presentation Report Participants		
August				
September				
October				
November				
December				
January				
February				
March				
April				
May				
June				
July				
<b>TOTAL:</b>	0	0		0

\*\*\*If no new participants were served, PLEASE mark column with a "0" for that month.

# Smart Report

## S.M.A.R.T. REPORT NUMBERS

“Served” is defined as anyone you provided services to through your CTF funded program. We ask that you return this chart to us by the deadline provided in the e-mail. This report *only* pertains to participants that “walked through your door” during the time frame specified in the chart. This number is *program* specific, not agency specific.

S.M.A.R.T. Report- QTR 3 (April 1 - June 30)	
AU Program Code:	
Program Name:	
# of families served:	
# of children served:	



# Adult Intake

  
 35422

Participant ID

Enrolled Date (month/day/year):  /  /

Completed Date (month/day/year):  /  /

## 10 Questions About You

**Instructions:**  
Please mark your answer to the following questions about yourself. Your answers will be kept confidential. If you have any questions, please notify the program staff. **USE DARK (BLUE/BLACK) PENCIL / INK**

1. What is your sex?  Female  Male
  
2. What is your age in years?
  
3. What is your current relationship status?  
 Single, never married  Committed relationship (not married)  Married  
 Separated  Divorced  Widowed
  
4. Are you of Hispanic, Latino or Spanish ethnicity?  Yes  No
  
5. What is your race? You may mark more than one.  
 American Indian or Alaska Native  Asian  Black or African American  
 Native Hawaiian / Pacific Islander  White  Other - list below
  
6. What is the highest level of education you have attained?  
 Did not finish high school  High school diploma / GED  Trade school / technical certificate  
 Associate's degree  Bachelor's degree  Master's degree / advanced degree
  
7. What is your current employment / job status?  
 I work full time  I work part time  I am retired  
 I am a student  I am disabled  I am unemployed
  
8. What is your current yearly income?  
 Less than \$10,000  \$10,000 - \$19,000  \$20,000 - \$29,000  
 \$30,000 - \$39,000  \$40,000 - \$49,000  \$50,000 - \$59,000  
 \$60,000 - \$69,000  \$70,000 - \$79,000  More than \$80,000

  
 35422

9. Are you currently incarcerated (in jail)?  Yes  No
  
10. How many children do you have? Mark all that apply.
 

Your biological child(ren) How Many? <input type="text"/> <input type="text"/>	Your foster child(ren) How Many? <input type="text"/> <input type="text"/>
Your step-child(ren) How Many? <input type="text"/> <input type="text"/>	Your adopted child(ren) How Many? <input type="text"/> <input type="text"/>
Your grandchild(ren) How Many? <input type="text"/> <input type="text"/>	
  
- How many of these children have special needs?  

What is / are the special need(s)?

<input type="radio"/> ADD/ADHD <input type="radio"/> Aphasia/Dysphasia <input type="radio"/> Apraxia/Dyspraxia <input type="radio"/> Auditory Processing <input type="radio"/> Autism/Aspergers <input type="radio"/> Cystic Fibrosis <input type="radio"/> Cerebral Palsy <input type="radio"/> Developmental Delays <input type="radio"/> Down Syndrome <input type="radio"/> Dyslexia <input type="radio"/> Emotional/Behavior Disorders	<input type="radio"/> Fetal Alcohol Syndrome <input type="radio"/> Fragile "X" <input type="radio"/> Hearing Impaired <input type="radio"/> Learning Disabilities <input type="radio"/> Intellectual Disability <input type="radio"/> Neurological Disabilities <input type="radio"/> Seizure Disorder <input type="radio"/> Support Groups <input type="radio"/> Visual Impairment <input type="radio"/> Other - list below <input style="width: 100px; height: 15px;" type="text"/>
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# Post Tests are Retrospective

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- Participants' opinions of how much the program has changed their skills / attitudes
  - First response → think of pre-program skills / attitudes
  - Second response → think about current skills / attitudes

# Home Visitation Post-Test

31213

ID#

Date (month/day/year):

Quarter submitted: 1 2 3 4




**Prevent Child Abuse  
Alabama**

## Home Visitation / Parent Education Programs

1. My knowledge of community resources where I can receive help is...
 

BEFORE THIS PROGRAM, I would have said...

TODAY, my answer is...

Poor	Fair	Good	Excellent
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
2. My commitment to using available social services that apply to me is...
 

BEFORE THIS PROGRAM, I would have said...

TODAY, my answer is...

Poor	Fair	Good	Excellent
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
3. My knowledge of children's development at different ages is...
 

BEFORE THIS PROGRAM, I would have said...

TODAY, my answer is...

Poor	Fair	Good	Excellent
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
4. My knowledge of what parenting responses are best to use when my child is not behaving is...
 

BEFORE THIS PROGRAM, I would have said...

TODAY, my answer is...

Poor	Fair	Good	Excellent
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
5. My knowledge of ways to manage stress is...
 

BEFORE THIS PROGRAM, I would have said...

TODAY, my answer is...

Poor	Fair	Good	Excellent
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
6. My knowledge of ways to manage anger is...
 

BEFORE THIS PROGRAM, I would have said...

TODAY, my answer is...

Poor	Fair	Good	Excellent
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

# Survey Guidelines

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- No staples
- Clean copy
- All 1-sided or all 2-sided
- No names

# Data Cover Sheet

<b><u>ADCANP</u></b> <b>Performance Measurement</b> <b>Data Coversheet</b>	  <b>Prevent Child Abuse</b> Alabama	
AGENCY NAME: <u>Alta Pointe Health Systems, Inc.</u>		
PROGRAM NAME: <u>Reaching and Encouraging Active Parenting</u>		
CONTRACT #: <u>CTFE 2017-101</u>		
CLASS ID # (5 digits): <u>106-01</u>		
AU PROGRAM CODE: <u>106</u>		
CLASS DATES: <u>8/1/16-12/1/16</u>		
<u>13</u> Number of Intakes		
<u>13</u> Number of Post-Program surveys		
<u>13</u> Number of PAIRED surveys (Intake + Post Program Survey)		
<b><u>Additional Comments:</u></b>		
Auburn University ADCANP/CTF Evaluation Performance Measurement Team	ADCANP Eval Team ctfeval@auburn.edu	AU USE ONLY: Scanned By: _____ Verified By: _____

# Submitting your data

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## Guidelines –

- Submit data to Auburn within 5 days of completing the class
- You will be notified when we receive each data packet
- **\*\*Please hold on to the intakes until you have collected the post-tests from your participants.\*\***

# ABC Family Service Center just finished a parenting class. The outside of the package should look like:

ABC Family Services Center  
123 Main Street  
Anywhere, AL 36066

Envelope 1 of 2  
AU Code/Grant #: 105-CFTF-  
2017 -205 Alfred Saliba  
Family Services Center  
Class ID # 10501

ADCANP/CTF Evaluation Team  
Rachel Odomes  
381 Mell Street  
Suite 111  
Auburn University, Auburn, AL 36849

Should the data not fit into one envelope,  
make two. Be sure to label both correctly.

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ABC Family Services Center  
123 Main Street  
Anywhere, AL 36066

Envelope 2 of 2  
AU Code/Grant #: 105-CFTF-  
2017 -205 Alfred Saliba  
Family Services Center  
Class ID # 10501

ADCANP/CTF Evaluation Team  
Rachel Odomes  
381 Mell Street  
Suite 111  
Auburn University, Auburn, AL 36849

# Questions:

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- Can I change the wording or format of the intake or surveys?

# Questions:

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- A participant ID number can be used more than once:

True or False?

# Questions:

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- When should I start entering my numbers into the TDSS for my monthly report?

# Questions:

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- My program lasts an entire year, do I send the intakes right away and then the post-tests at the end of the year?

# Q & A

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- What is clear?
- What is confusing?

# Help Hotline

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Ami Landers: [alanders@auburn.edu](mailto:alanders@auburn.edu)

Rachel Odomes: [odomes@auburn.edu](mailto:odomes@auburn.edu)

CTF Evaluation: [ctfeval@auburn.edu](mailto:ctfeval@auburn.edu)

Phone #'s: (334) 844- / (334) 201-4543

# Closing Remarks

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Thank you for your attention!

