Advanced Evaluation of IECMHC: How the Toolbox can Support Well-Established Implementers

Narrator: You are listening to a podcast from the Center of Excellence for Infant and Early Childhood Mental Health Consultation. Established by the Substance Abuse and Mental Health Services Administration, SAMHSA, in 2015, the Center of Excellence is a combined effort of SAMHSA, the Health Resources and Services Administration, HRSA, and the Administration for Children and Families, ACF.

The Center of Excellence's mission is to support states, tribes, and communities in using Infant and Early Childhood Mental Health Consultation, or IECMHC, as a tool for promoting mental health and school readiness.

Cairone: I'm Karen Cairone, Technical Assistance Manager with the Center of Excellence. Today we're talking with Elizabeth Bicio, Director of Early Childhood Consultation Partnership, ECCP, and Early Childhood Programs at Advanced Behavioral Health, Inc. Liz is one of the center's Expert Work Group members made up of a group of leaders in early childhood systems, IECMHC research, and IECMHC implementation whom are responsible for the creation of our Toolbox. During this podcast Liz will be talking about the Research and Evaluation section of the Toolbox and how it might be used for more advanced implementation of IECMHC. This can include revisiting evaluation plans and the logic model, investigating progress made on short, intermediate and long term outcomes, refining the data collection and analysis process and reporting findings to stakeholders. Thank you for joining today. Liz, can you provide a brief overview of the work in Connecticut?

Bicio: Thank you for having me. What I'd like to do is I'm going to start with what the goal of our program was in Connecticut because starting with the goal is really going to help us understand the types of data and questions and even types of evaluations that someone might proceed with or consider with their mental health consultation program or model. So the goal of Early Childhood Consultation Partnership, or ECCP, was really to take a look at reducing the likelihood that a child was going to be suspended or expelled from their early care education setting. So a couple of things that we looked at with this was really considering how are we looking at building the capacity of the adult caregivers, the families and teachers, and also the systems that surround a child? The scope and

reach of the ECCP program also helped us define what we were going to do again in terms of our data collection and our evaluation. So at the very beginning the ECCP program was designed to have a statewide capacity and was also designed to have universal access, which means that any child birth through five and their caregivers in the State of Connecticut, could have access to this program.

As a general overview of the ECCP we have a program that has three different levels of care or consultation. We have a child level where we engage the child and family and the teachers, as well as we are in the home and the classroom. We also have a whole classroom level, so that's about a four-month service that looks at all the children, all the teachers in that classroom and providing some consultation. And then we have a larger center-based piece that looks at the classrooms and the children in the early care and education setting and taking a look at that overall environment and how we support the emotional relational behavioral wellness of the children.

Cairone: Can you let us know how long you've been at this work in Connecticut?

Bicio: Sure. Our ECCP program is 15 years old, so we were – actually I was hired to develop and implement the program in 2002.

Cairone: Wow, so this has been a long time and really steeped in the work. Can you describe your efforts related to data collection, reporting and evaluation?

Bicio: Where I would start with that actually is that when our – when the RFP came out initially for a mental health consultation program in Connecticut from our Department of Children and Families they indicated that part of the funding would go to support the development of an information system. So our State of Connecticut Department of Children and Families really were innovative – this is 15 years ago now – in saying that look, this data and information system is going to be a critical component for this statewide program so we really got the impetus from them. The company that I work for, we co-design information systems along with service models so, it was really a nice marriage of the two. So what would happen with that is, in terms of the data collection, we went around talking to a number of various stakeholders, understood what their needs were and their data needs were, we worked hard to define the data so that we had a common language and also look at what the impacts were. And we then worked that into what we call the ECCP information system, which is a system that guides the consultant through the model of our ECCP program and the fidelity to it. It also gives us a number of different levels of reporting, so we can have consultant and

consultee level reports, we can have subcontractor level reports, stakeholder reports, and also policy reporting from it. These were very important because what it did was it really communicated what are the impacts in a way that your stakeholders could hear, and also allowed us to work in the program for continuous quality improvement.

In terms of the evaluation, in addition to that, an evaluation was also funded by the state, so again they invested up front in the information system design and structure, and also in the evaluation. And so through the years we've had – initially we've had what you call a qualitative evaluation or process, which says "Are they doing what they said that they're doing?" And basically how much. And then there's more of the – you have a quantitative evaluation or – which we'll talk about a little bit later which is more of our research type evaluations, which are much more intensive.

Cairone: Excellent, so many efforts. It sounds like this is really helping to sustain and enhance the work of the ECCP.

Bicio: Yeah, absolutely. So in fact, it wasn't long – I mean, so let me just back up. Our first funding was really – we had funding from October through June of that one year, and we're asked to design, implement, train staff and have a program with data by the end of June. And what that data allowed for us to do along with the process evaluation was to convince our stakeholders to continue funding us. So there was a lot at stake earlier on, but as you can imagine the real importance of these pieces, the saying "How are we spending our dollars, is this impactful, is it cost effective?" Those are very important considerations. Additionally, the data and quality assurance piece that again the evaluations had supported our expansion of our program, so without ECCP or us advocating to expand our consultant capacity by doubling it, folks had approached us saying that this is really an effective program and we want to put more money into this, so again, that really just speaks volumes to the importance of the type of again quality assurance evaluation efforts, impacts and the importance of it.

The other piece is that the evaluations and research on our model has actually supported the research base for Infant and Early Childhood Mental Health Consultation across the nation, and that really helps us drive this field forward, further defining it, defining the impacts, the importance of this and the reach that this can have.

Cairone: You've done so much work here, I want to talk a little bit now about how the Research and

Evaluation section of the Center of Excellence Toolbox might have been helpful to you, had you known about this, and had these resources accessible to you way back in the beginning, 15 years, 13, 10 years ago when you were just at the beginning of setting this up. So can you share a little bit about how it would have been helpful as you were developing the model?

Bicio: So basically the Toolbox gives us the opportunity now to take a look at all of the relevant and current research that's been going on or happening or is happening around the Infant and Early Childhood Mental Health Consultation, and what the research does is it really speaks to "What is our direction? How do we help define our models, our work a little bit better? And what are some of the impacts we can hope to have from this?" It would have been helpful in beginning to orient me towards the different types of evaluations, why and when these would likely occur, the types of evaluations and the quality or the level of assurance of the outcomes or impacts that each might yield. These have to do with the strength of evidence and the effectiveness of the program. So in other words, the toolbox would have been helpful for me, in helping to decide what kind of evaluation would be the best evaluation for our program or model, and what would be the best type of evaluation in the development of our programs. So, what would be a starting up evaluation to have, and what would be once your program is very solidified, what would be a better evaluation to have to continue to understand your impact? To know, for example, when you first start up in your program you're not going to have a vigorous research evaluation because you're not well established yet, so what you're going to do is you're going to have an evaluation that's more of the process type evaluation.

Cairone: So for those well established in IECMHC, how might they use the Toolbox to further enhance their model?

Bicio: I think what folks could really do is to go back and revisit the logic model area and also the theory of change. And I say that because I think that the Toolbox is a good reminder for folks that a logic model can and should be revised, depending on where their program is in their development. For example, logic model for starting a new program remodel looks very different than one where the program's been established for some time. Lessons learned can be incorporated into the model revision for those programs that were established, and the model can be used to keep the program alive, so to speak.

So how do we continue to make adaptations in your model, that's what that would answer to, to

meet the changing needs of your consultees, or of your participant group? Well-established programs can also reconsider how they might want to use or communicate about their theory of change. A clear theory of change, for example, can be used to communicate about your program, why it works, why is it important, to different stakeholders. So you can change your message up a little bit in terms of if you're talking to your funders, if you're talking to policymakers, if you're talking to participants such as teachers. So it really talks about what is happening in order for the goals to be met.

Cairone: That's really helpful for someone like yourself who's been in this field for a long time and has been doing this for so long, to know that there are people listening who may have been in this for a long time as well and they just want to know how they might go into the Toolbox and what they might find that could really make their practices even better. So that's very helpful.

So, before we wrap up today, are there any other things that you want to share with listeners about the Toolbox?

Bicio: I'm particularly impressed with the equity informed component of the Research and Evaluation portion of the Toolbox. I believe it's important because it takes a look at data in a way that's transparent and in a way that there's a co-ownership of the data. For example, when we're asking questions of consultees or clients or consultants, an important thing the Toolbox suggests for us to consider is, are we letting them know why we're asking this information, how it will be helpful? Are we are setting the stage so that they are a partner with us in this important information, in terms of how they move forward, but also how we move forward at larger levels.

Cairone: So I just want to say thank you, our listeners will really benefit from the information that you've shared today, and I just want to thank you for participating and being here today with us, Liz.

Bicio: Yeah. No, you're welcome, this has been a great opportunity and also what I would like to kind of do a bit of a call-out to the audience to say that there are so many different and important resources in this part of the Toolbox and I would set aside a bit of time to really just go through and take a look at each of the resources. I think that you're going to find them very helpful.

Narrator: Thank you for listening to the podcast. For more on Infant and Early Childhood Mental Health Consultation, including the Center of Excellence Toolbox, which is a collection of over sixty original resources put together by the Center with experts in the field, please visit us at our website, www.samhsa.gov/iecmhc. That's www.samhsa.gov/iecmhc.

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