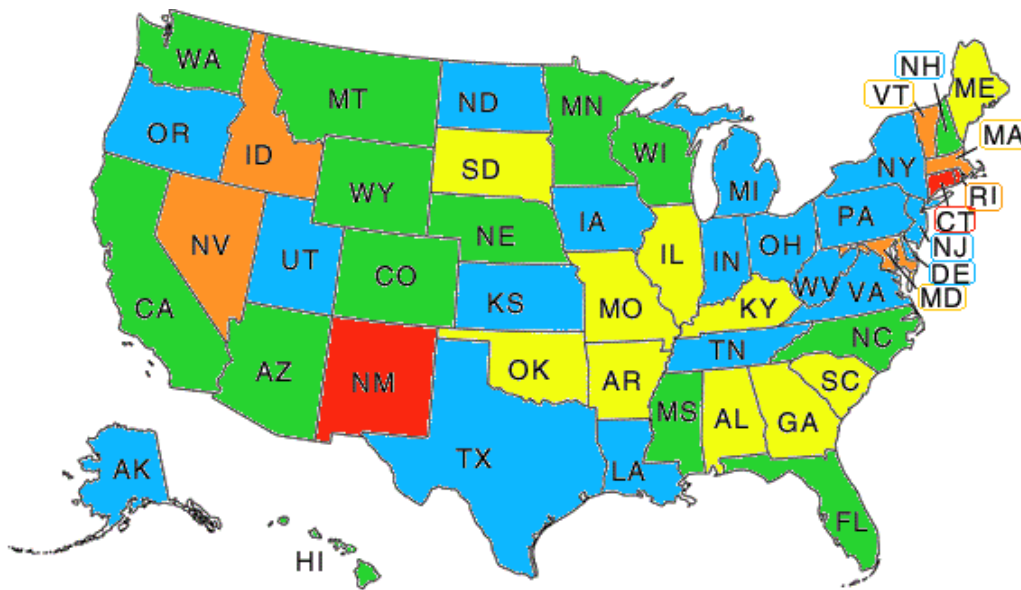


2015 Annual National Report for the Outcome Measurement System (OMS)



When the First CAC in Each State Joined OMS:
Blue - 2012 (+ TX since 2009)
Green - 2013
Yellow - 2014
Orange - January to June 2015
Red - July to December 2015

The purpose of the Outcome Measurement System (OMS) is to help Children's Advocacy Centers (CACs) evaluate their programs in order to increase the quality of services provided to children and families and to improve the collaborative efforts of the multidisciplinary team (MDT) members. OMS is available in all 50 states – see the map above for the date when the first center in each state began participating in the program. In the July to December 2015 collection period, two international locations (one center in Canada and one center in Australia) also joined the program.

The items on each survey were designed to measure issues of most importance to achieving two primary outcomes:

1. The CAC facilitates healing for children and caregivers.
2. The MDT approach results in more collaborative and efficient case investigations.

Two caregiver surveys are utilized to measure the first outcome and one MDT survey is utilized to measure the second outcome. Caregivers are asked to complete an initial survey at the end of their first visit to the CAC and then, after a period of time (approximately two months) receiving services from the CAC, caregivers are asked to complete a follow-up survey to provide feedback on their experiences during that time. MDT members complete surveys at least once a year, with many completing the surveys once every six months or quarterly, depending on the needs of each center.

In 2015, approximately **580** Children's Advocacy Centers participated in OMS (up from 475 the previous year). These centers submitted a total of **34,006** Initial Caregiver Surveys, **7,587** Caregiver Follow-Up Surveys and **11,472** Multidisciplinary Team (MDT) surveys.

Summarized Results from Caregiver & MDT Surveys

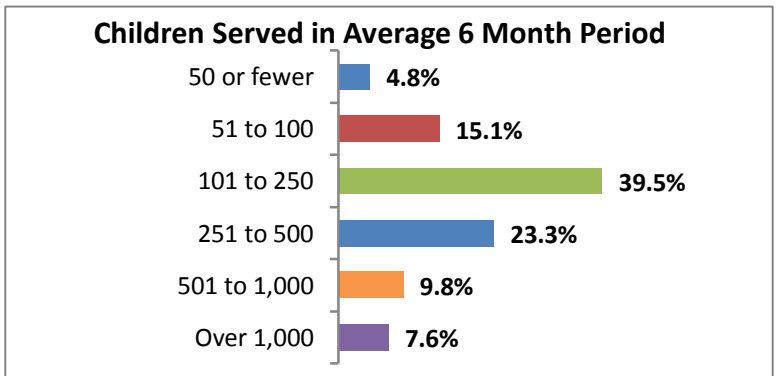
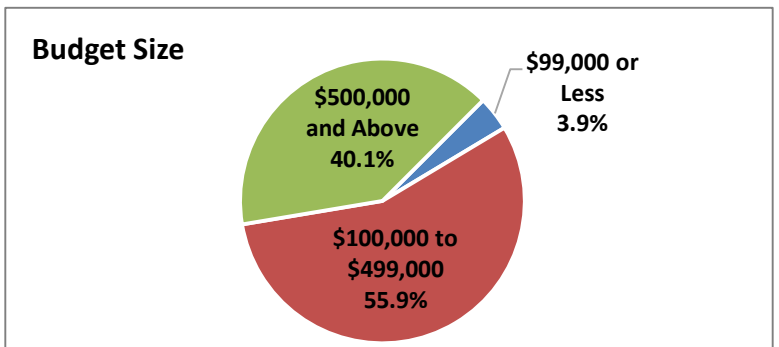
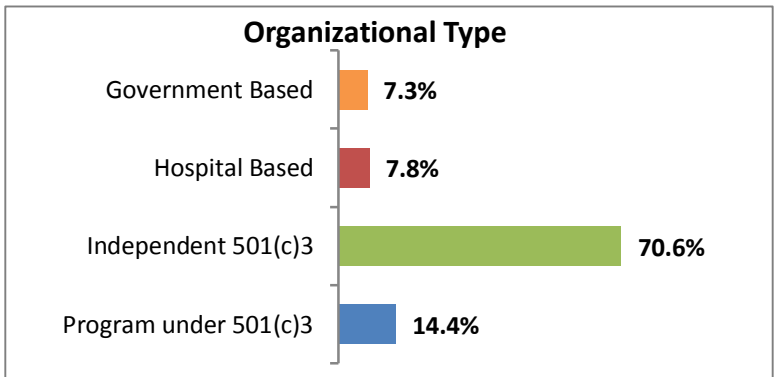
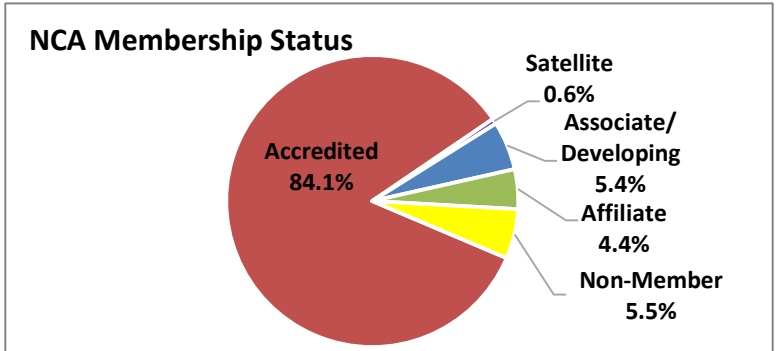
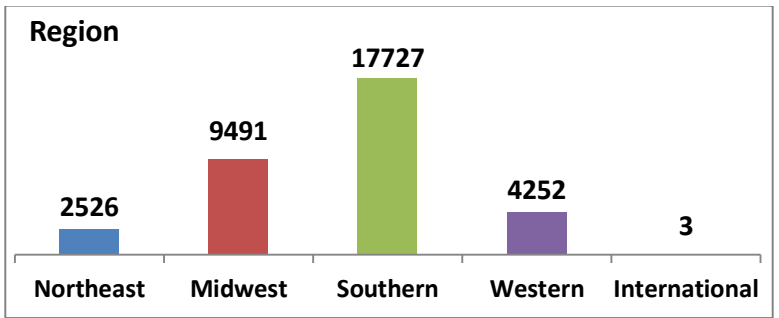
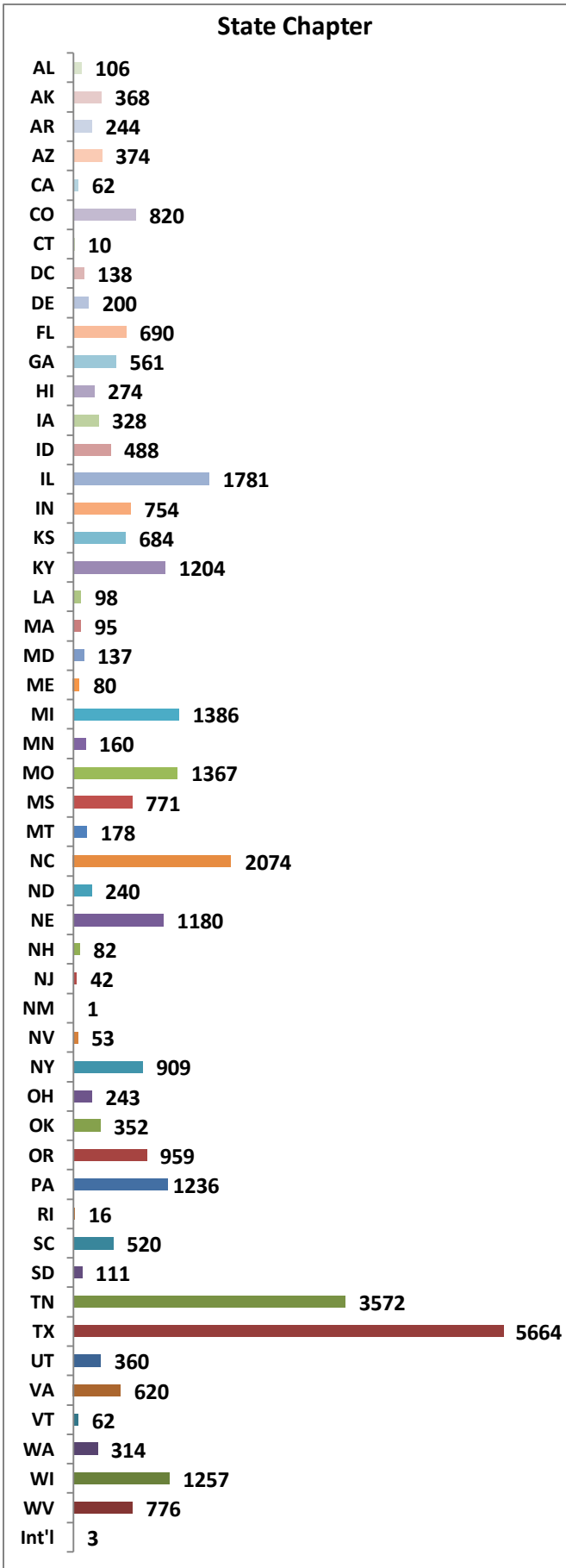
95% of caregivers agreed with items measuring the extent to which the CAC facilitates healing for children and caregivers.



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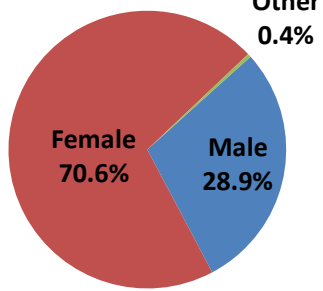
96% of MDT members agreed with items measuring the extent to which the MDT approach results in more collaborative and efficient case investigations.

Characteristics of Centers Collecting Initial Visit Caregiver Surveys

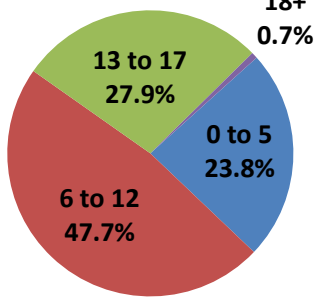


Initial Visit Caregiver Survey Results

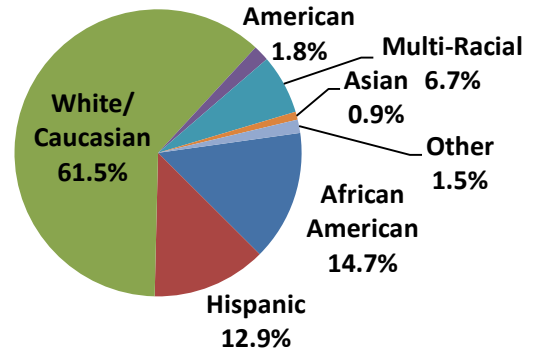
Child Gender



Child Age



Child Race



The Child's Experience

Strongly Agree Somewhat Agree

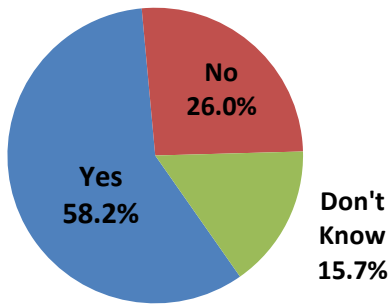
My child felt safe at the center.



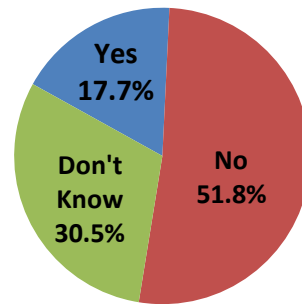
My child's questions were answered to our satisfaction.



Children Received Referrals for Services



Caregivers Want Additional Services for Children



Examples of Additional Services Suggested by Caregivers for Children:

- + Counseling, therapy services (alternatives or in addition to services already offered; i.e. more specialized counseling)
- + Financial/material services for the family (housing, food stamps, child care, etc.)
- + Skill-building activities, support groups, specialized support for issues such as anger management and self-esteem

Interactions with Center Staff

Strongly Agree Somewhat Agree

Staff members at the center were friendly and pleasant.



When I came to the center, my child and I were greeted and received attention in a timely manner.



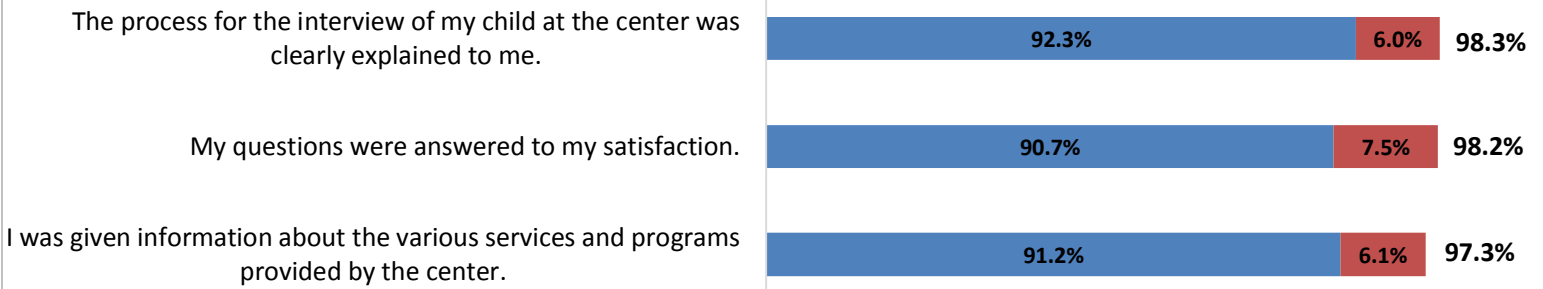
The center staff made sure I understood the reason for my visit to the center today.



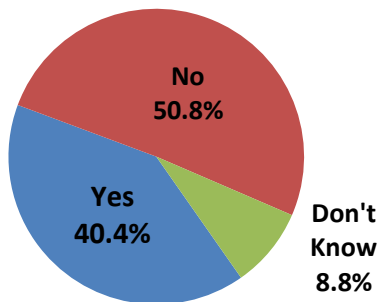
Initial Visit Caregiver Survey Results - Continued

Caregiver Access to Information and Services

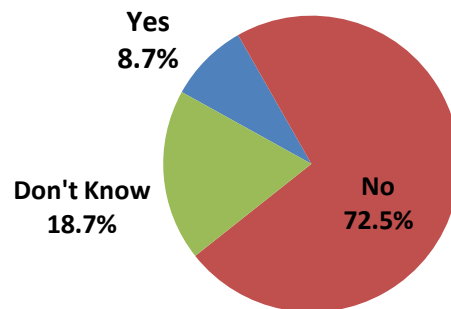
Strongly Agree Somewhat Agree



Caregivers Received Referrals for Services



Caregivers Want Additional Services for Themselves

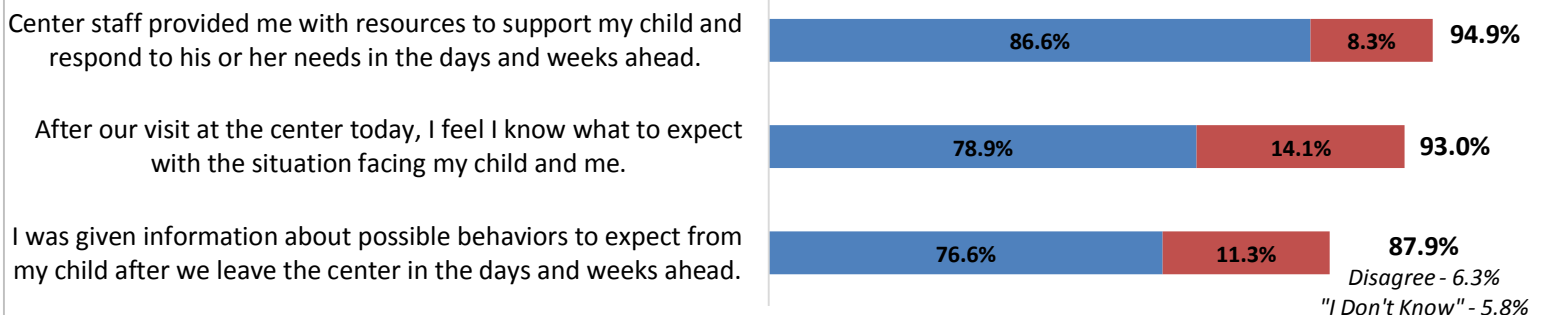


Examples of Additional Services Suggested by Caregivers for Themselves:

- + Counseling, therapy services (if not offered or in addition/alternatives for services already offered), support groups, support with caregivers' own trauma history (sexual abuse, domestic violence).
- + Financial/material services for caregivers and their families (housing, transportation, etc.)
- + Parenting skills, resources to support children, education about child abuse
- + Legal support, more advocacy services for caregivers

Preparing Caregivers for Future Possibilities

Strongly Agree Somewhat Agree

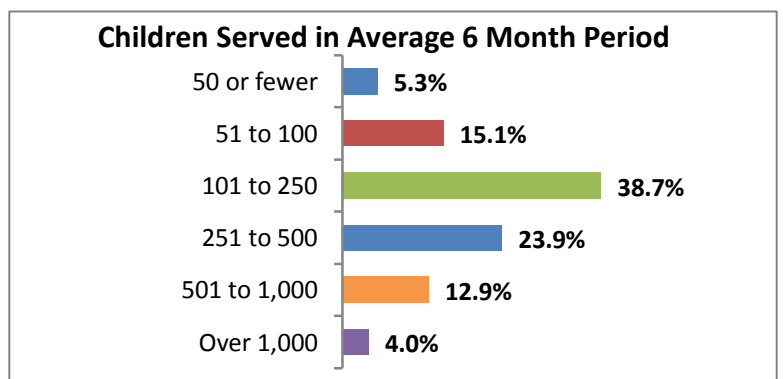
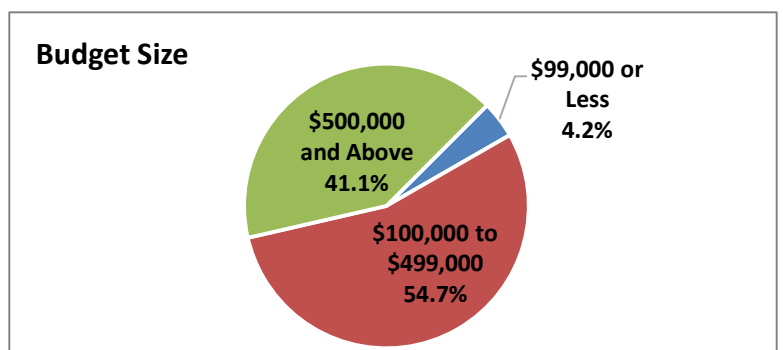
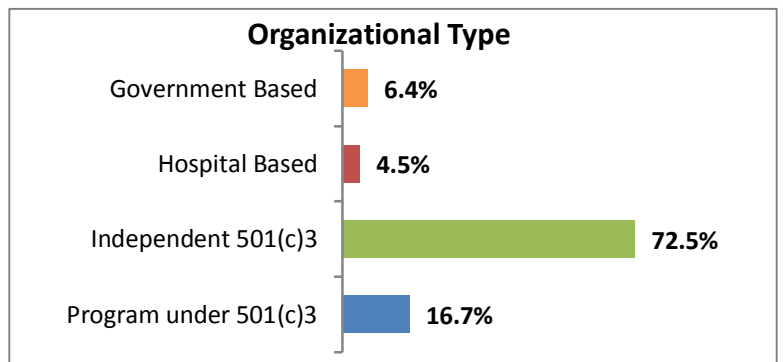
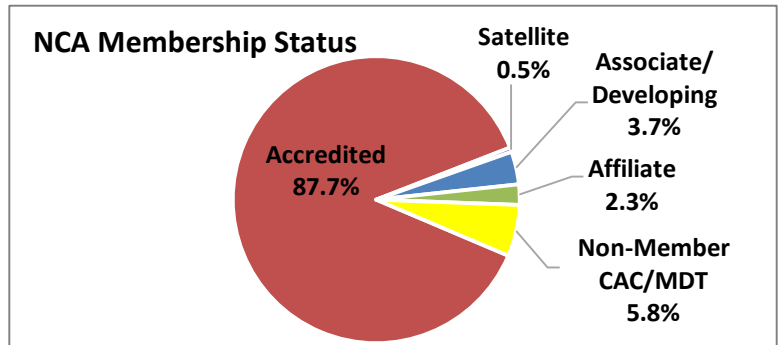
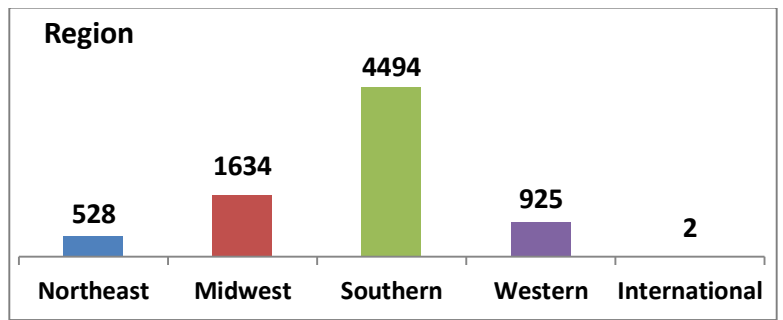
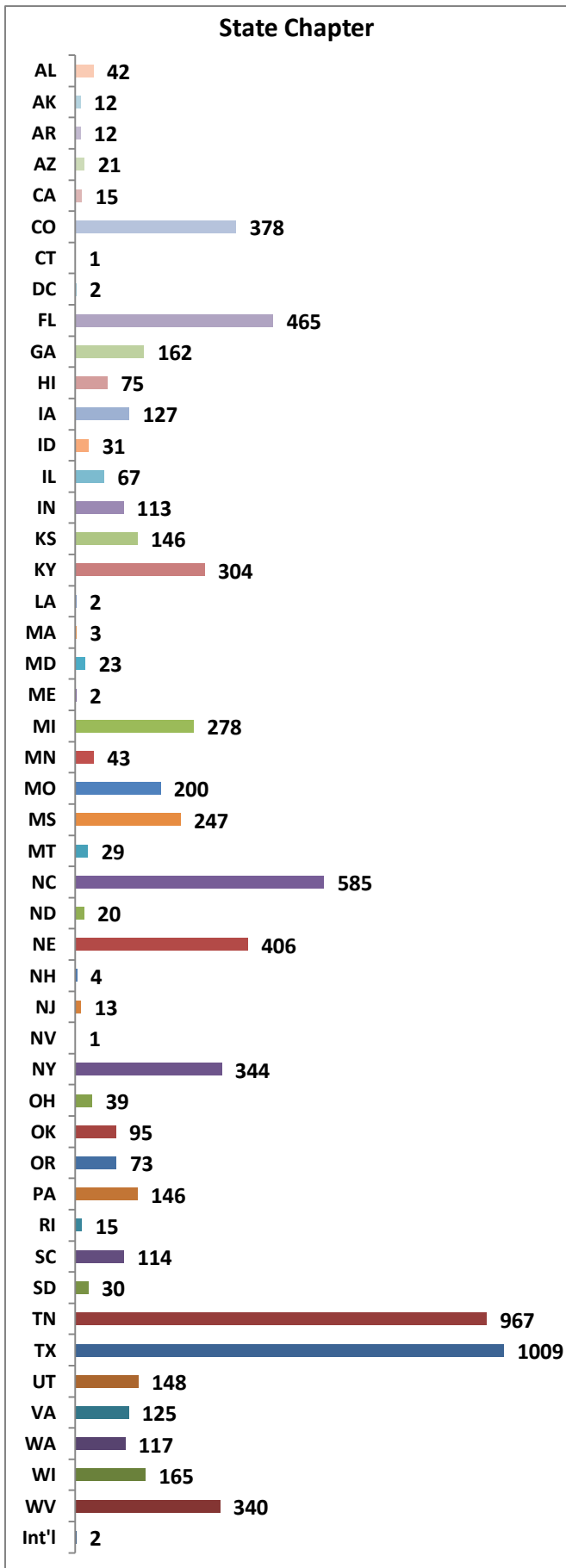


This survey includes additional open-ended items:

- + What did you appreciate the most about your experience at the center?
- + Was there anything that the center staff could have done better to help you or your child? (**Nationally, 2.6% answered "yes"**). If yes, please tell us what the center staff could have done better to help.

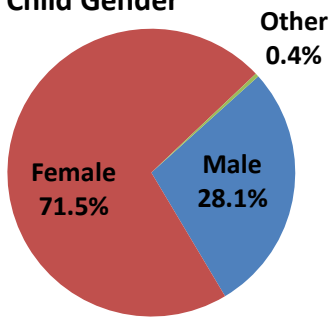
Centers can use responses to these items to see what is working well and what may need improvement.

Characteristics of Centers Collecting Caregiver Follow-Up Surveys

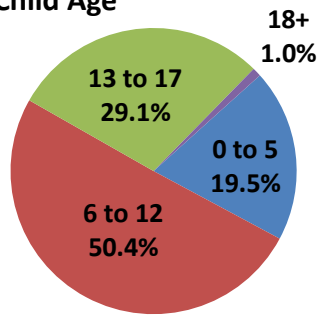


Caregiver Follow-Up Survey Results

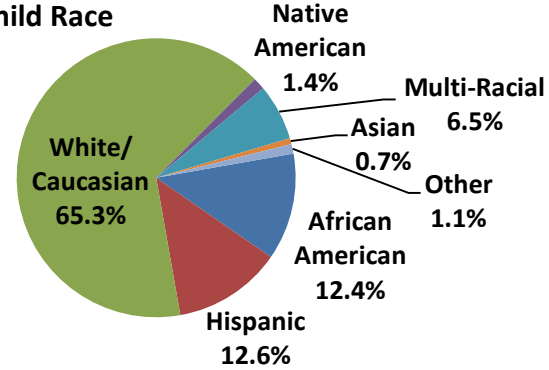
Child Gender



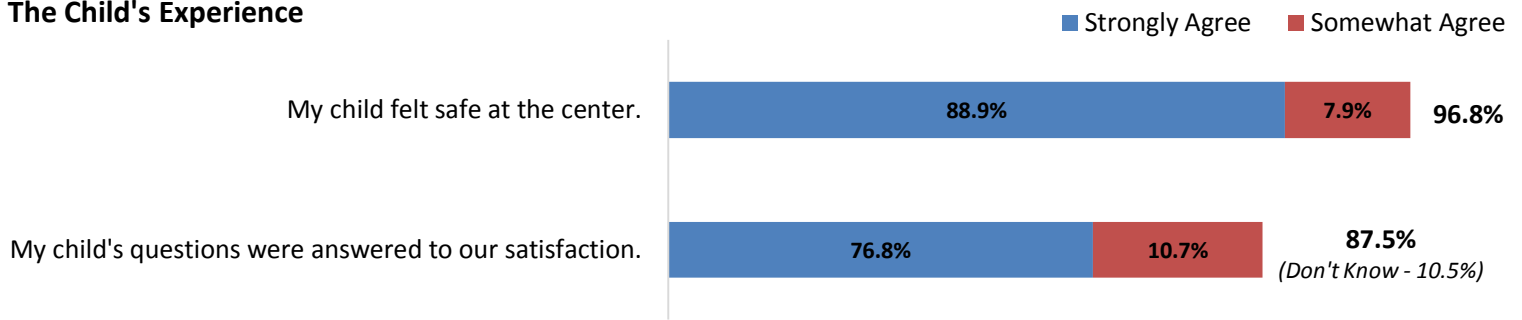
Child Age



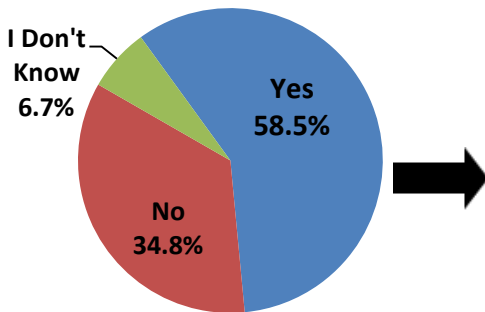
Child Race



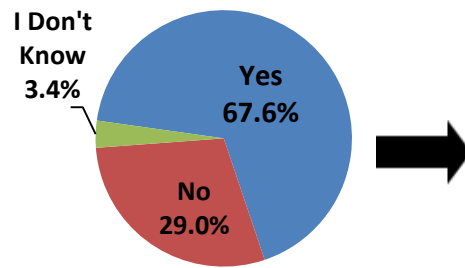
The Child's Experience



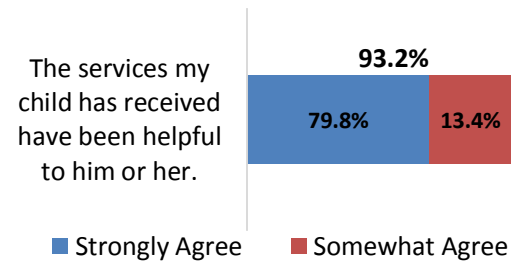
Children Referred to Services



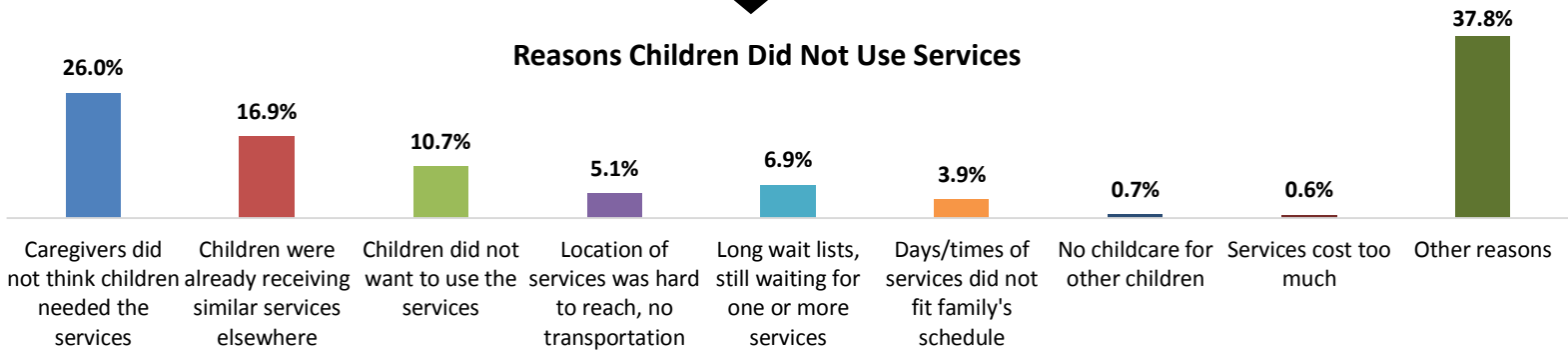
(If Referred)
Children Used Any Services



If children used services, caregivers agreed...

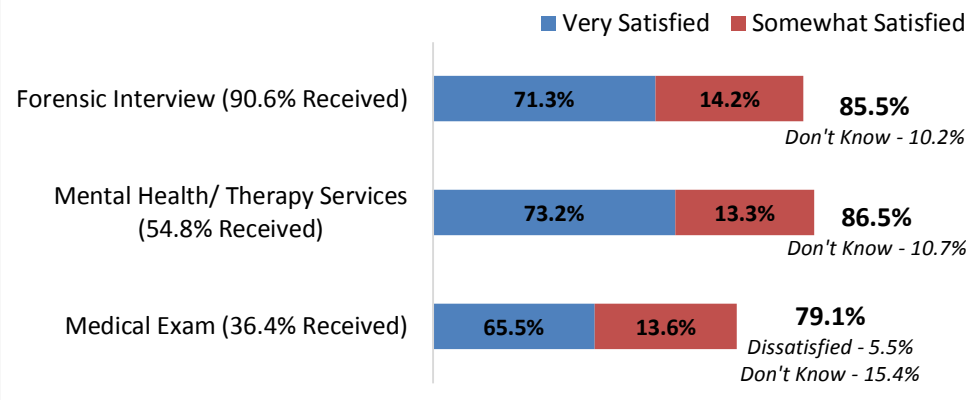


Reasons Children Did Not Use Services



Caregiver Follow-Up Survey Results - Continued

Child Satisfaction with Specific Services

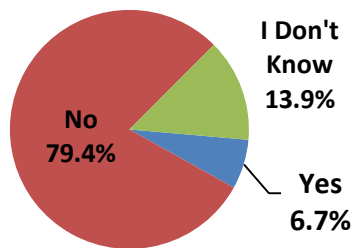


965.7% of **Forensic Interviews** were performed on-site **at the CAC** (2.7% elsewhere, 1.6% did not know)

59.6% of children received **Mental Health Services** on-site **at the CAC** (34.5% elsewhere, 5.9% did not know)

54% of children received **Medical Exams** on-site **at the CAC** (37.3% elsewhere, 8.7% did not know)

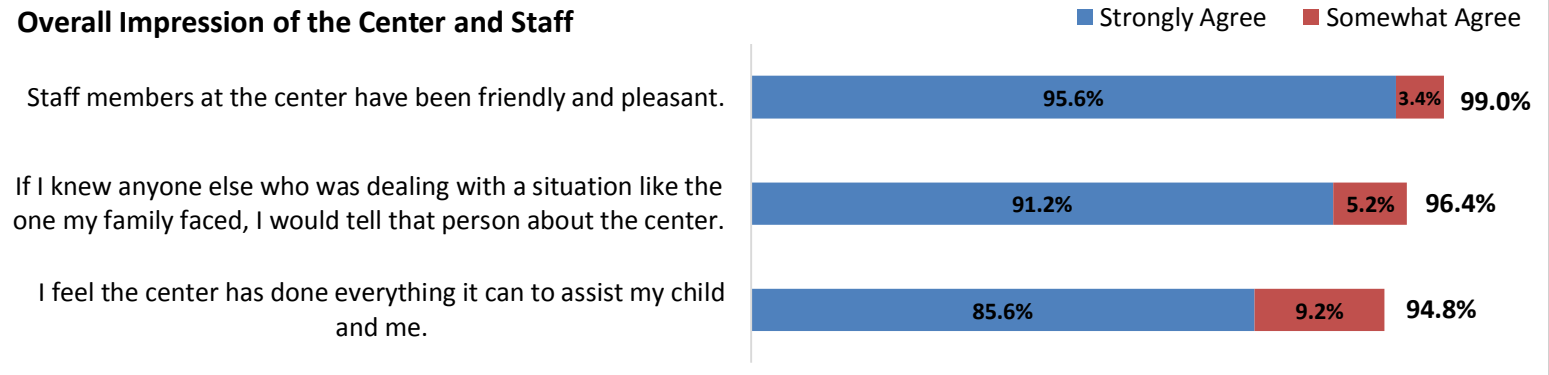
Caregivers Would Like Additional Services for Children



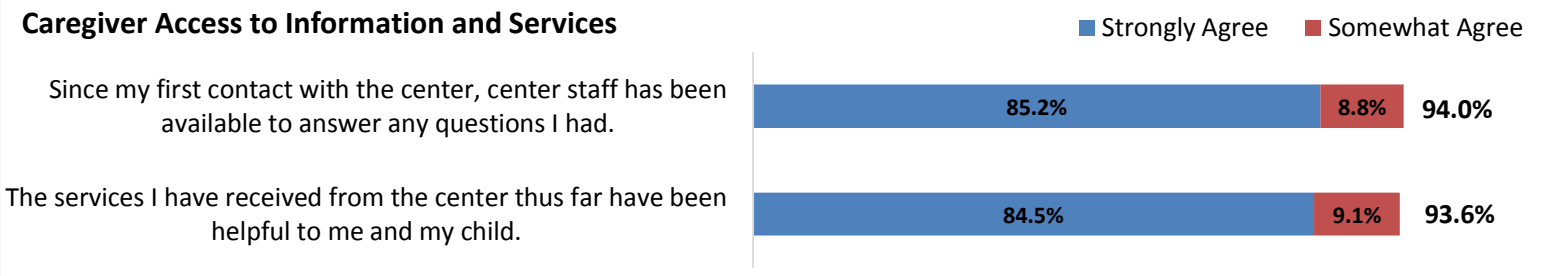
Examples of Additional Services Suggested for Children:

- ✚ Counseling, therapy services (alternatives or in addition to services already offered; long-term counseling; counseling closer to home)
- ✚ More follow-up actions and updates on case from CAC and other agencies (law enforcement, child protective services; some caregivers expressed frustration with lack of movement or cases not being taken "seriously")
- ✚ Assistance with the legal process
- ✚ Financial/material services for family (housing, child care, etc.)
- ✚ Skill-building activities, mentoring, support groups

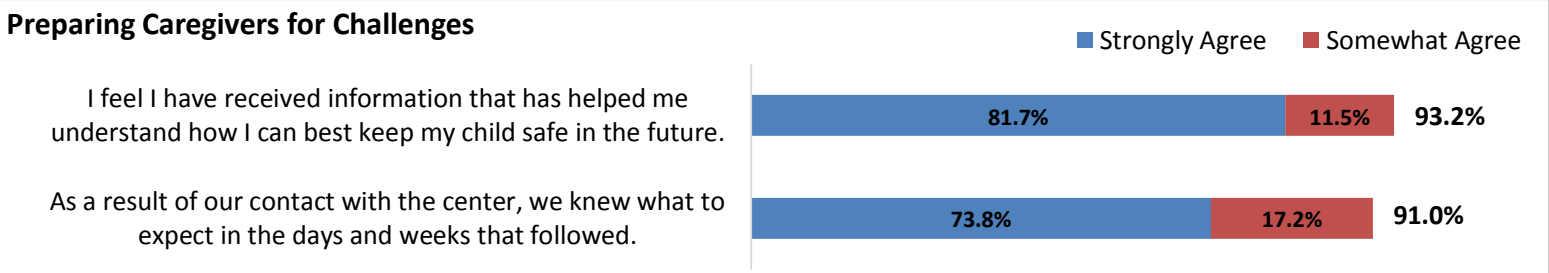
Overall Impression of the Center and Staff



Caregiver Access to Information and Services

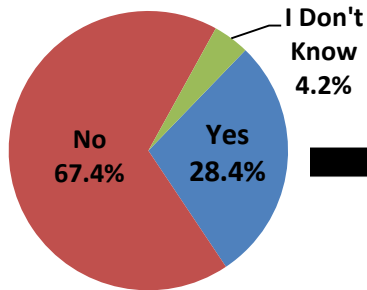


Preparing Caregivers for Challenges

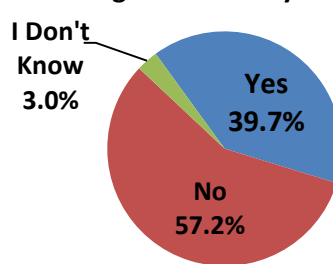


Caregiver Follow-Up Survey Results – Continued

Caregiver Referred to Services



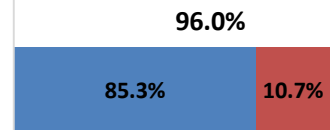
(If Referred) Caregiver Used Any Services



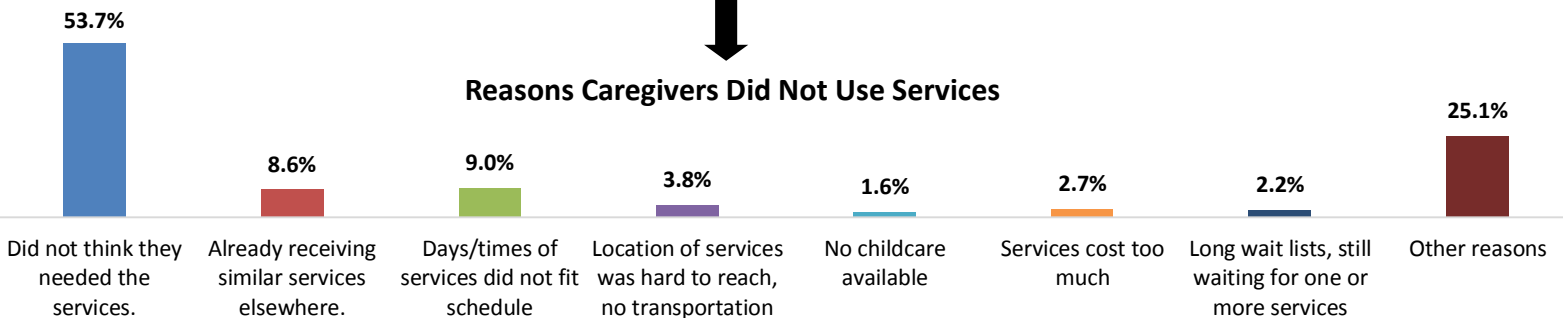
If caregivers used services, they agreed...

The services I have received have helped me to support my child and meet his or her needs.

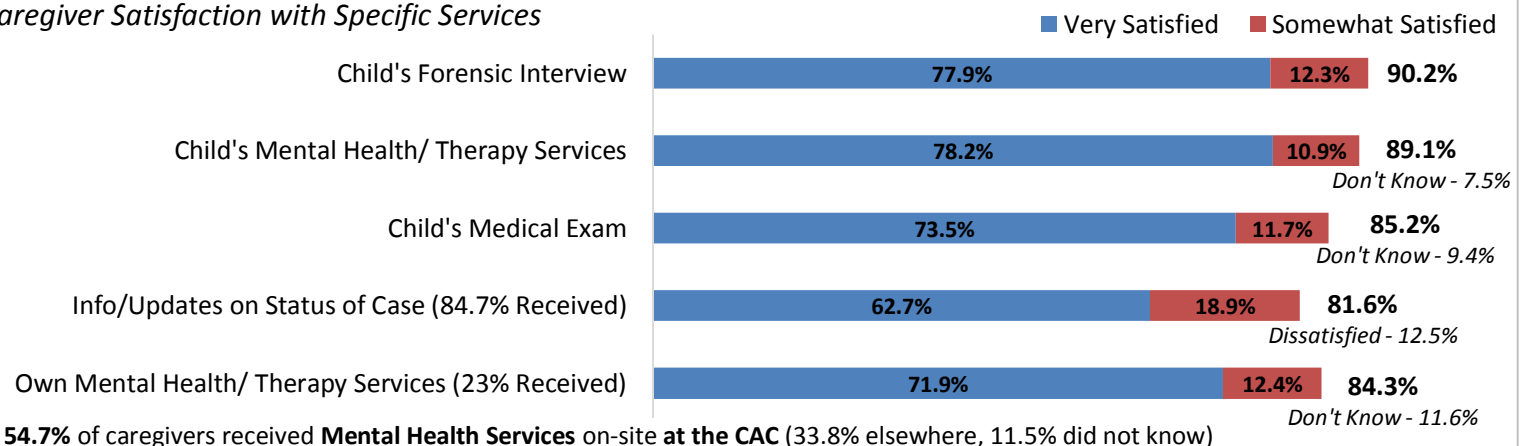
■ Strongly Agree ■ Somewhat Agree



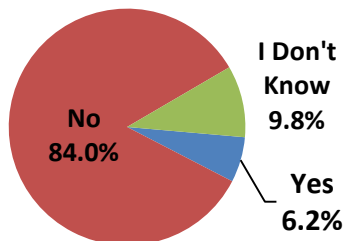
Reasons Caregivers Did Not Use Services



Caregiver Satisfaction with Specific Services



Caregivers Would Like Additional Services for Themselves



Examples of Additional Services Requested by Caregivers:

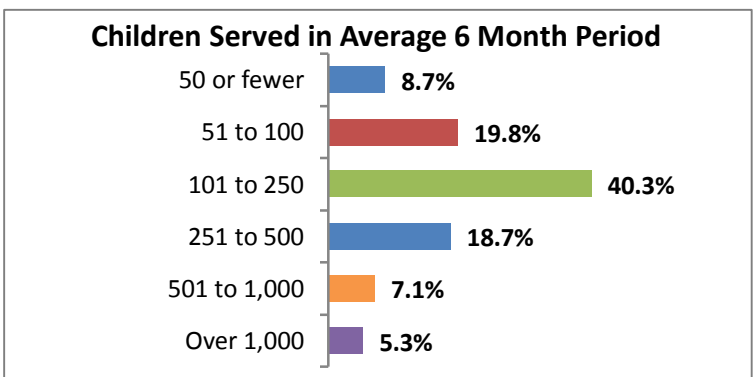
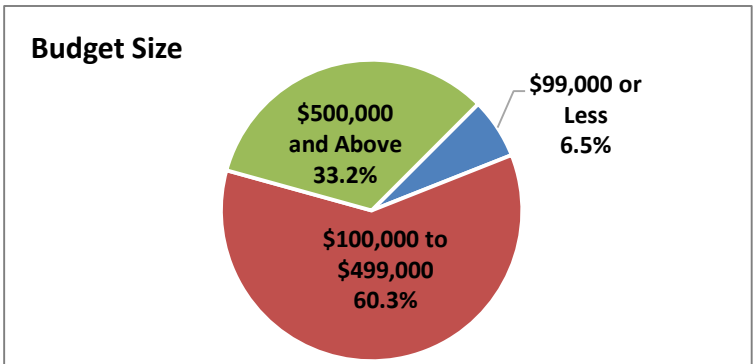
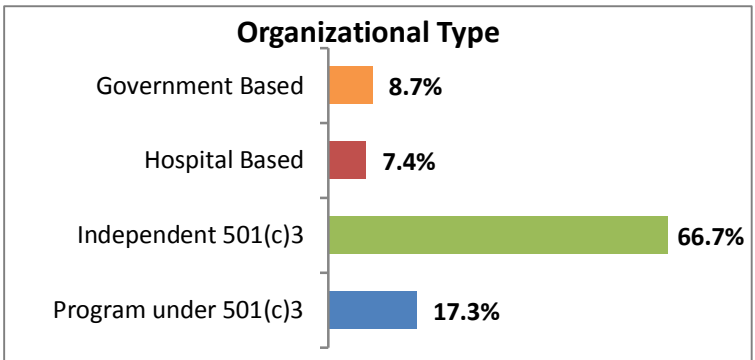
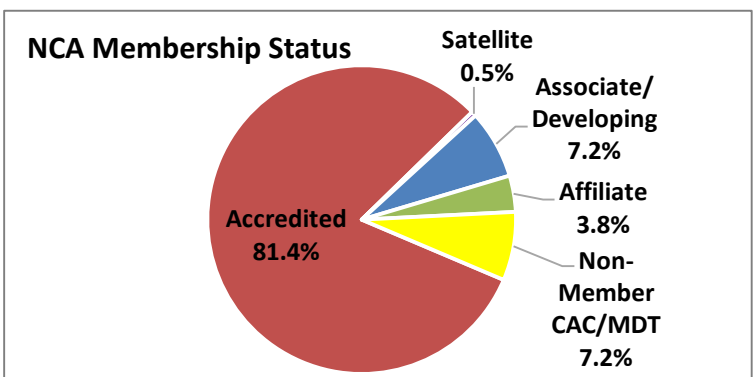
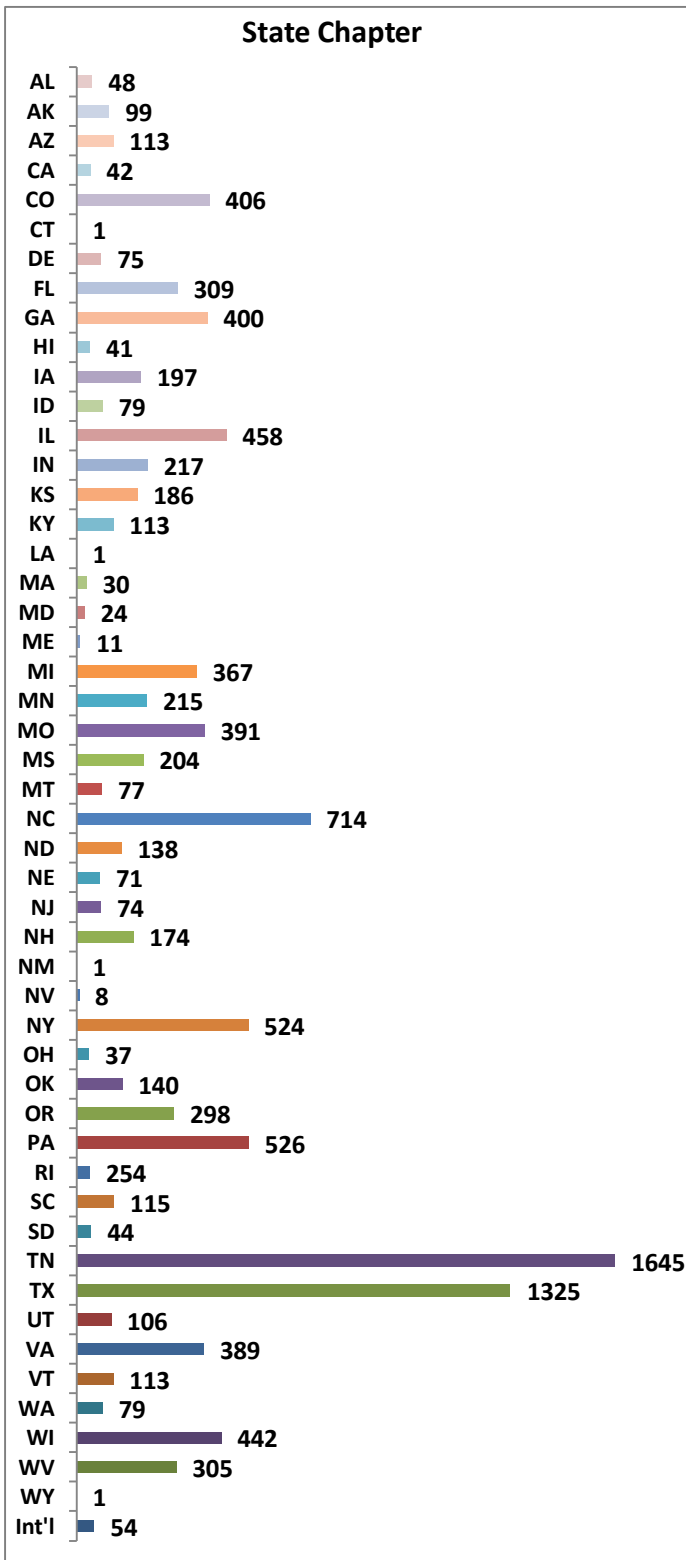
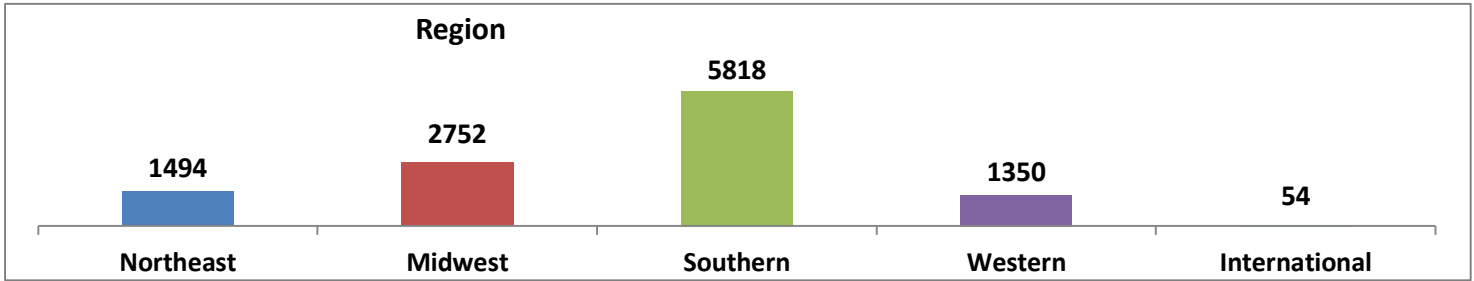
- ✚ Counseling, therapy services (alternatives or in addition to services already offered; counseling for other family members or the family as a group)
- ✚ More follow-up information and updates on the case from the CAC
- ✚ Legal services, advocacy; information from child protective services, law enforcement, and prosecutors
- ✚ Financial/material services for family (housing, child care, etc.)
- ✚ Parenting classes, information on how parents can support children

This survey includes additional open-ended items:

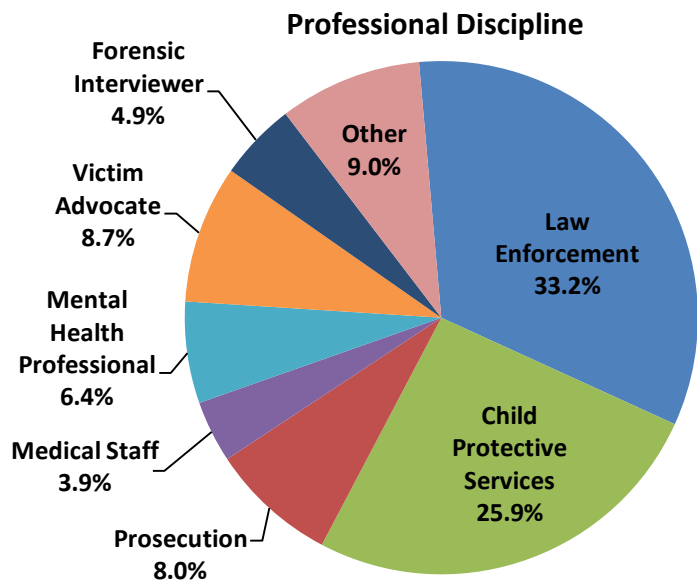
- ✚ What did you appreciate the most about your experience at the center since your first visit?
- ✚ Was there anything that the center staff could have done better to help you or your child? (**Nationally, 6% answered "yes"**). If yes, please tell us what the center staff could have done better to help.

Centers can use responses to these items to see what is working well and what may need improvement.

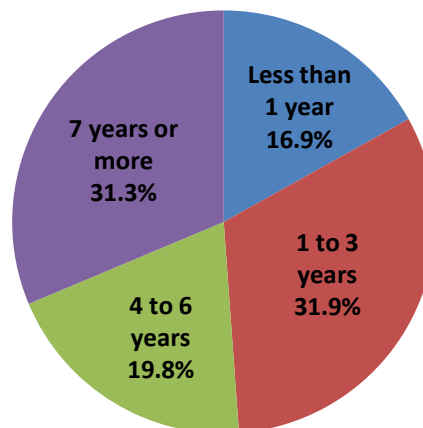
Characteristics of Centers Collecting Multidisciplinary Team (MDT) Surveys



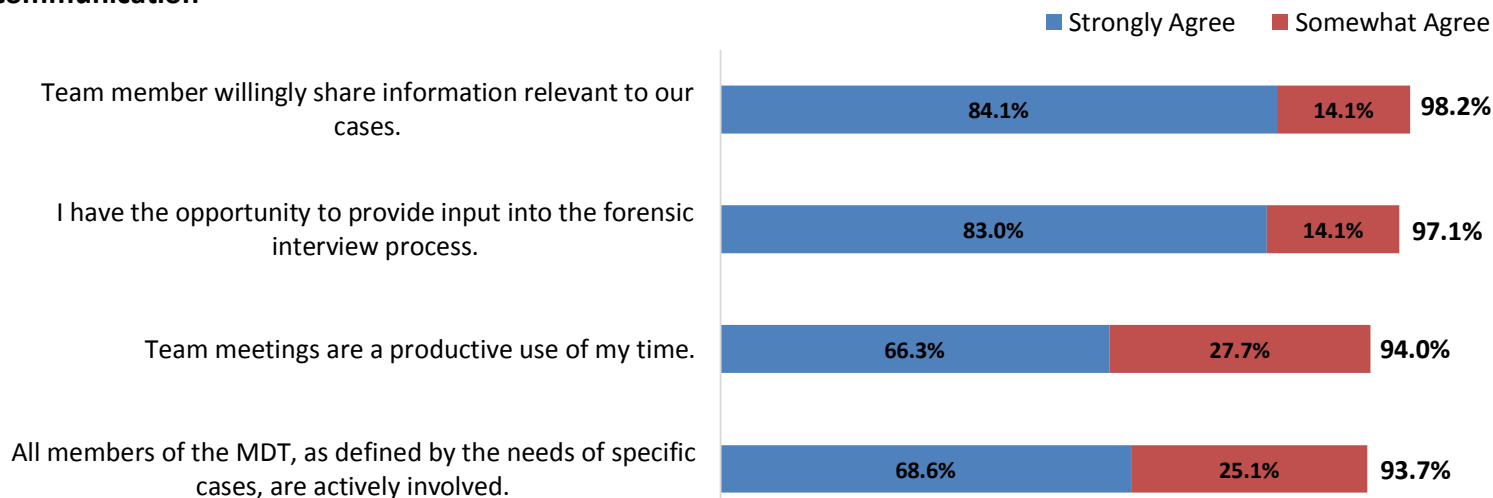
Multidisciplinary Team (MDT) Survey Results



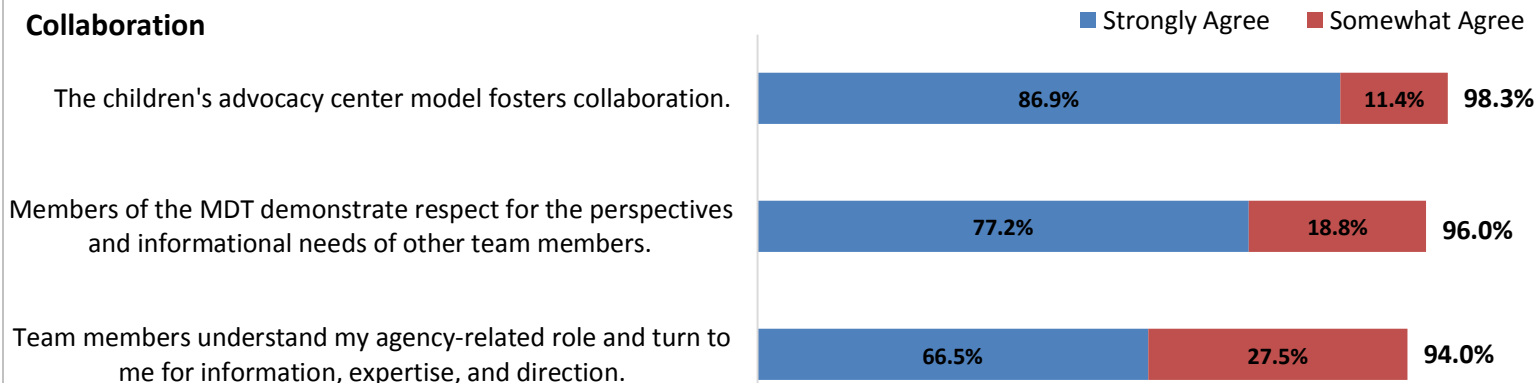
Time Worked with CAC Model at Center



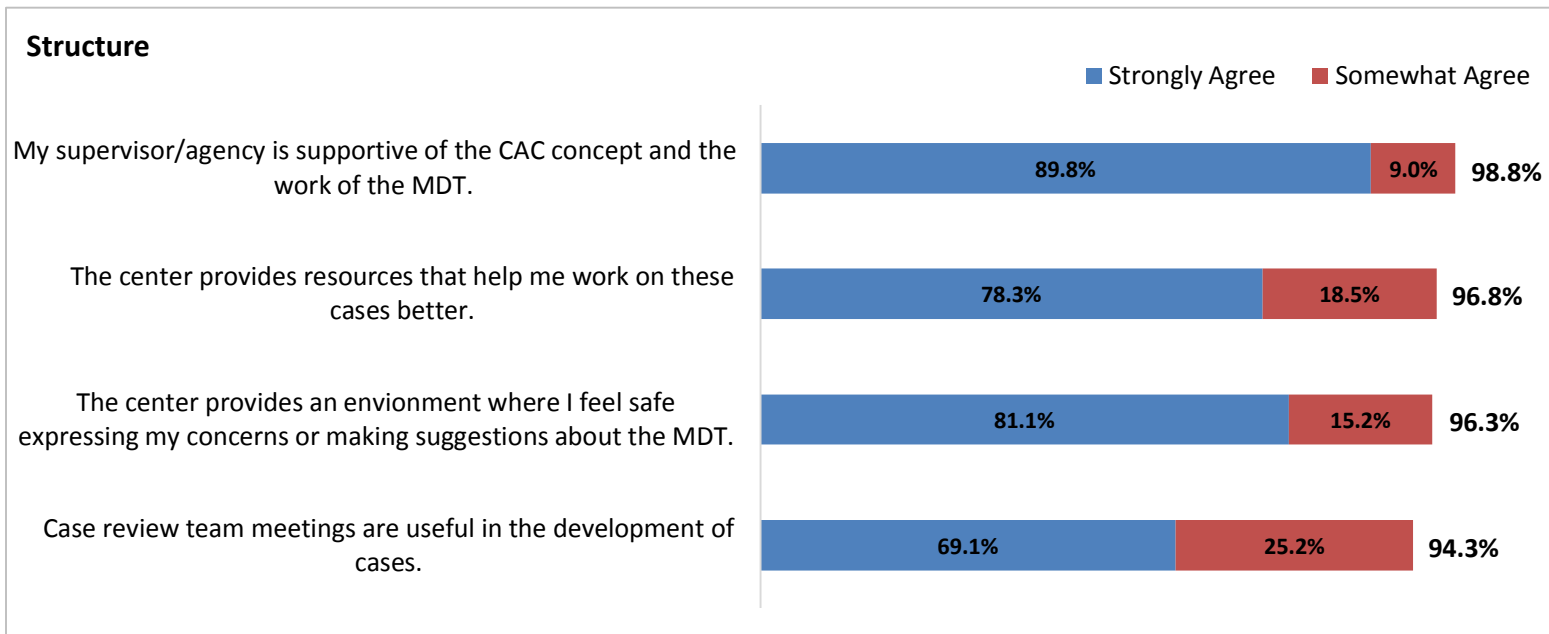
Communication



Collaboration



Multidisciplinary Team (MDT) Survey Results - Continued



Thank you!

The National Children’s Alliance would like to thank the State Chapters and Children’s Advocacy Centers for participating in the Outcome Measurement System (OMS) program. We greatly value your dedication to helping children, families, and the multidisciplinary team members in the communities you serve.



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Report Prepared by the National Children’s Alliance, February 2016

For Questions, Contact OMScoordinator@nca-online.org

Number of Centers Participating in Each State and Internationally - 580 Total

Alabama - 8	Alaska - 10	Arizona - 5	Arkansas - 5
California - 2	Colorado - 16	Connecticut - 5	Delaware - 3
District of Columbia - 1	Florida - 13	Georgia - 23	Hawaii - 5
Idaho - 4	Illinois - 34	Indiana - 15	Iowa - 5
Kansas - 12	Kentucky - 12	Louisiana - 4	Maine - 3
Maryland - 3	Massachusetts - 3	Michigan - 27	Minnesota - 5
Mississippi - 9	Missouri - 22	Montana - 9	Nebraska - 9
Nevada - 1	New Hampshire - 10	New Jersey - 4	New Mexico - 1
New York - 24	North Carolina - 33	North Dakota - 3	Ohio - 4
Oklahoma - 11	Oregon - 10	Pennsylvania - 20*	Rhode Island - 2
South Carolina - 9	South Dakota - 3	Tennessee - 38	Texas - 58
Utah - 7	Vermont - 9	Virginia - 13	Washington - 10
West Virginia - 21	Wisconsin - 14	Wyoming - 1	International - 2

Please note: Although the majority of centers collect all three survey types and all centers are encouraged to do so, some centers may choose to only collect one or two of the survey types (i.e. only Initial Visit Caregiver Surveys or only MDT Surveys). This is especially true for centers first joining the program or centers that only collect MDT surveys once a year (and fall outside the current six-month period). Also, due to the voluntary nature of the program, some centers may pause participation in times of staff transitions or other hardships and barriers to participation. Additional centers may have expressed interest in joining the program or even received training, but they are not counted in the numbers above unless they have submitted at least one survey since the online system for OMS, FluidSurveys, was launched in July 2014.

*In addition to 20 participating Children’s Advocacy Centers (CACs), Pennsylvania also collects MDT Surveys from professionals participating in their Continuous Practice Improvement Program (CPIP). These professionals serve on multidisciplinary teams throughout the state in counties that do not yet have fully developed CACs.