The Outcome Measurement System (OMS)
Part Two Training Webinar
Creating Reports & Sharing Results

Kaitlin Lounsbury, Program Evaluation Coordinator

National Children's Alliance

July 17, 2018

Today's Webinar

The webinar is recorded & you will get a copy of the slides.

It will be approximately one hour long.

We will start by reviewing content on the slides. We will end with a 10-15 minute demo of the Qualtrics reporting dashboards.

Phones are muted due to the large number of attendees, <u>use the text box to type questions</u>.

We will try to answer relevant, group-oriented questions **at the end**.

Kaitlin will respond to you directly after the webinar if we run out of time or your question is specific to your center.

Please complete the feedback survey in the follow-up email!

General implementation/survey collection topics were already covered in the Part One Webinar on June 28th

Training Materials in Addition to Webinars

OMS Training Section on NCA Members Only Website

http://nationalchildrensalliance.org/members/oms

Improve Your Experience	**Use Your Results**	**Add Your Voice**
Training materials for collecting data	Telling your story through OMS	How using OMS can help your CAC

Otherwise, materials were included in your OMS Start-Up Email or can be requested by emailing OMScoordinator@nca-online.org

- Administrative Guide with screenshots & step-by-step instructions
- Two-page Quick Start Guide with most important steps
- Various special-topic guides, scripts, templates (now also included as an appendix in the Admin Guide)
- Cheat Sheet of Qualtrics Report Buttons

Paper surveys are included in your OMS Start-Up Email or you can request them by emailing OMScoordinator@nca-online.org. They are not publicly posted, as some centers have requested additions.

Reminder: If your center needs extra custom items added to your surveys (for a funder, etc.), contact the OMS Coordinator or your State Chapter. Kaitlin will program into the online system, give you an updated paper copy, and add to online reports in your account.

Why is Program Evaluation Important?

- Make improvements
  - Data-informed decisions:
    - Maintain or expand effective parts
    - Change or remove ineffective parts
  - Engage participants
  - Provide feedback to staff
- Meet accountability requirements
  - Expectation for many funders – current and potential
  - Other stakeholders: boards, donors, policy-makers
- Raise awareness
  - Promote successful practices
- Contribute to the organization & the field
  - Add to existing knowledge about what does and does not work, for both internal and external uses

The Bigger Picture

❖ Statistics and results from programs like OMS are also included in aggregated state, regional, and national reports.

❖ **NCA and Chapters use this data to advocate for <u>YOU</u>**

　　o We need this data to show why CACs are so important

　　o This allows us to fight for the resources your program needs to survive and thrive

　　o Helps CACs stand out from other programs

❖ This is why we need ALL centers to follow best practices in data collection and make the best use of this valuable resource.

　　o The more data you collect, the harder we can fight for you

Your State
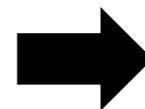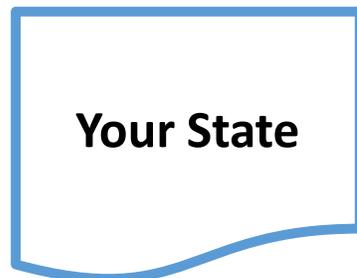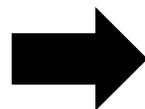
How can CACs use data?

Improve Services

- Establish common goals, ensure all staff are working toward these goals
  - Communicate current trends and desired outcomes to staff members
- Identify strengths and areas for improvement – prioritize resources
  - Find out which parts of your CAC are working well
    - Continue or expand effective services
    - Provide positive feedback to staff, celebrate successes
  - Fix problem areas
    - Identify services with low numbers, get the data to back up "gut feelings"
    - Reconsider current practices that may be unsuccessful and show staff why "business as usual" is not working, with data to back it up
    - Make the case for additional funding, staffing, or other resources

"Good" vs. "Bad" Performance on OMS

Each CAC may have different interpretations of their results, but here are some overall points to keep in mind

- **# of Surveys Collected:** Some states or individual CACs may choose to set targets or goals for number or percent of surveys to collect. This might be to encourage staff, perhaps finding the current number and pushing for a reasonable increase in the next timeframe. This is not just a quota, though – every family should have the opportunity to share feedback!

- **Demographics of Children/Team Members:** Each survey starts with basic questions about the child (gender, race/ethnicity, age) or team member (professional discipline, years working with CAC model, county/jurisdiction). This is meant to be compared to data you already have in your CMS about clients served and information you already know about your team. Do the percentages line up (approximately)? Are any group over- or under-represented? How you better reach all groups?

"Good" vs. "Bad" Performance on OMS, cont.

- **Comparison to Past Timeframes:** Reports allow you to filter results for specific timeframes. If you run a report for all surveys collected in 2016 and then you run a report for all surveys collected in 2017, what differences do you see? Have some items improved? Have other items deteriorated? How can your team celebrate these successes or find solutions to trouble areas?

- **Comparison to State, Regional, and National Trends:** This is when the benchmarking tabs on your reports will be especially helpful. They can also be filtered by date, so you can see if you have improved relative to the larger group as well in given timeframes.

  - **"Healing, Justice & Trust"** National OMS reports from NCA are created annually and highlight trends in the field that we believe are most essential in terms of successes in our field and areas the field should focus on. We use this data to create training and technical assistance programs as well!

- **Share results with your team!** You may not wish to share every data point, depending on the situation/group, but find ways to highlight successes and ask for assistance on areas needing improvement.

How to Handle Negative Feedback

- Evaluation reveals both areas for improvement AND areas of success. Negative results should not be viewed as failures, but rather opportunities to learn and improve.

- Some negative feedback is inevitable. We provide services in a challenging field and there may be many reasons that caregivers or team members are dissatisfied.

  - **Issues within your direct control:** Share feedback with staff & brainstorm solutions

  - **Partner issues:** Inform team members about any trends you are seeing (i.e. lack of follow-up, misinformation, etc.)

  - **Issues outside your control**: Acknowledge the feedback and inform any stakeholders on the possible reasons why families may feel this way.

How can CACs use data?

Raise Awareness & Engage Partners

- Enhance public image of CACs
  - Add statistics to public awareness campaigns and social media
  - Include results as part of flyers and brochures provided on-site or distributed by community partners
- Remind partners why the CAC is so important
  - Engage professionals from partner agencies to increase involvement in the MDT/CAC.
  - Show partners that your families value the services of your CAC, using feedback from clients and other data showing how many families benefit from this work.
- Engage board members
  - Provide boards with information to use in planning and evaluation
    - Need to hire a new staff member? Show them why, with data and feedback from families and team members.

NATIONAL CHILDREN'S ALLIANCE®
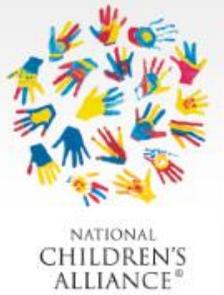
Safe Shores (DC) Fundraising Materials

Thanks to you, Safe Shores – The DC Children's Advocacy Center is making the future better for children and families affected by abuse, trauma and violence.

FORENSIC SERVICES

Your support helped **542 children** speak their truth by providing a safe space to tell their story.

Safe Shores' goal is to ensure children only have to tell their story one time, in one place, to one person.

CLINICAL SERVICES

Your gift was instrumental in helping to heal the hearts and souls of children: **we provided over 1,200 art, sand and play therapy sessions.**

Safe Shores hired two new therapists this year, bringing our total to five full-time clinical staff.

DID YOU KNOW?
Therapy is provided free of charge to every single Safe Shores client for as long as needed.

PREVENTION EDUCATION

This year saw unprecedented growth in our Prevention Education Program.

We had a **410% (!) increase** in the number of adults who committed to keep kids safe by being trained in Stewards of Children©, an evidence-supported, child sexual abuse prevention program.

Research shows that adults who participate in Stewards of Children© trainings leave with **increased knowledge, improved attitudes, and are more likely to adopt effective child-protective behaviors.**

Safe Shores aims to train 30,000 adults, or **5% of Washington DC's population**, in order to change the culture of child protection by 2020.

2014	302
2015	1,241

www.safeshores.org
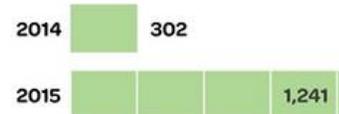
FAMILY ADVOCACY SERVICES

Many of the children and families we see don't have the resources to provide items critical to their healing process. When families are dealing with trauma associated with abuse, even small tasks can feel overwhelming and out of reach.

Together, we lifted the spirits of **234 children and families** by providing holiday gifts.

You inspired confidence and excitement for a new year of learning: **220 children received brand new school supplies!**

You made a difficult transition just a little easier for kids by providing clothing and toiletries for **302 take-care bags.**

Your support helped **232 parents and caregivers** get through a tough time by providing much-needed items such as grocery gift cards, furniture, school uniforms and emergency travel funds.

95%
95% of parents and caregivers told us that their child felt safe at Safe Shores.

92%
92% of parents and caregivers felt that they left knowing what to expect with the situation facing their child and family.

92%
92% of parents and caregivers felt that staff provided them with resources to support their child and respond to their needs.

Your giving helped restore hope to 1,292 children and families this year.

"I appreciated the kind and helpful resources that they [Safe Shores] offered my family and I at this difficult time. We truly thank the staff at the Center."

"The staff was very patient, friendly and warm. We appreciate the gift card and clothing. The whole experience at the Center made us feel at ease."

"Every aspect of this situation has been difficult, but this visit has been very beneficial and informative – a silver lining in this experience."

"I want to say thank you and I feel at home and safe with my child here."

Safe Shores
THE DC CHILDREN'S ADVOCACY CENTER
www.safeshores.org

NCA Annual Brief Report

Healing, Justice, & Trust

A National Report on Outcomes for Children's Advocacy Centers 2016

NATIONAL CHILDREN'S ALLIANCE

What is the National Children's Alliance?
NCA is the national association and accrediting body for a network of 822 Children's Advocacy Centers— CACs. We provide support, advocacy, quality assurance, and national leadership for CACs, all to help support the important work that CACs do in communities across the country. CACs provide a coordinated, evidence-based response to children who have been abused in all 50 states.

What are CACs and how do they help kids?
To understand what a CAC is, you must understand what children face without one. Without a CAC, the child may end up having to tell the worst story of his or her life over and over again, to doctors, police, lawyers, therapists, investigators, judges, and others. They may not get the help they need to heal once the investigation is over, either.

Without CACs
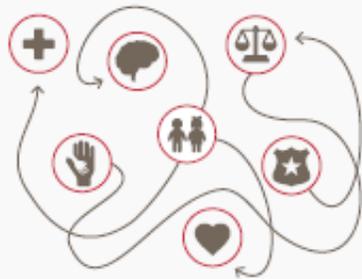
With CACs

CACs provide healing, justice, and trust for child victims of abuse
In 2016, CACs demonstrated that their model works through nearly 50,000 surveys from caregivers and MDT members. Here are some highlights that show our families and partners believe in the healing, justice, and trust we provide.

- Healing: 95% of caregivers agree that CACs provide them with resources to support their children.
- Justice: 99% of team members believe clients benefit from the collaborative approach of the MDT.
- Trust: If caregivers knew anyone else who was dealing with a situation like the one their family faced, 97% would tell that person about the center.

When police or child protective services believe a child is being abused, the child is brought to the CAC—a safe, child-focused environment—by a caregiver or other "safe" adult. At the CAC, the child tells their story once to a trained interviewer who knows the right questions to ask. Then, based on the interview, a multidisciplinary team (MDT) that includes medical professionals, law enforcement, mental health, prosecution, child protective services, victim advocacy, and other professionals make decisions together about how to help the child. Finally, they offer a wide range of services like therapy, medical exams, courtroom preparation, victim advocacy, case management, and more.

The CAC movement is growing and improving

With approximately 800 member CACs serving 324,602 children in 2016, NCA represents a growing movement providing more and better services to children and families nationwide.

In the last ten years, the number of NCA member centers serving kids has grown 35%

Since 2008, annually our member CACs have served...

- 60% more child victims of physical abuse
- 70% more child victims of neglect
- 111% more child witnesses to violence
- 46% more children endangered by drugs

And provided...

- 28% more children with counseling and other mental health services
- 44% more children with onsite forensic interviews
- 296% more children and family members with case management services
- 46% more children, family members, and community members with prevention education

The need remains

Despite the success of the CAC model in helping children who have been victimized by abuse, there's still an outstanding need for more CAC coverage, and more support. States in red below have a lower proportion of counties covered by CACs, while states in blue have a higher proportion of CAC-served counties or have full coverage.

Proportion of Counties Covered by CACs, by State

- 75-100% (20 w/DC)
- 50-75% (17)
- 25-50% (8)
- Less than 25% (6)
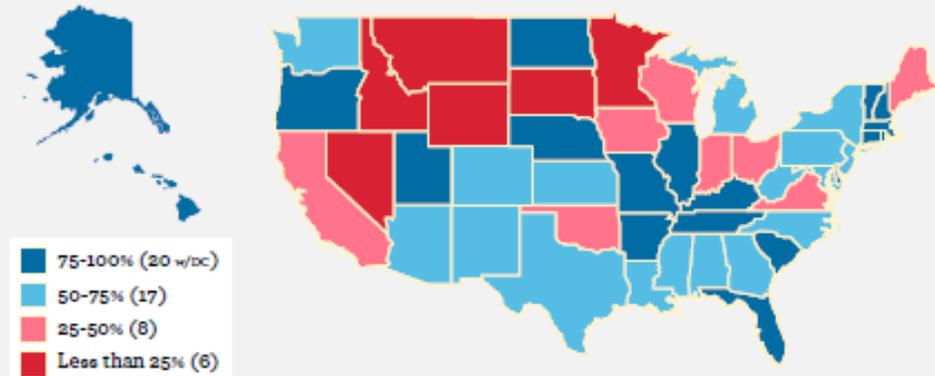
CAC services are available to approximately 4 in every 5 U.S. children

But that still leaves

13,533,785

children living in areas without a CAC.

Funding and legislative support helps ensure children across the country have access to a CAC when they need it, and helps expand capacity and geographic coverage to reach more children and families with the services they need. **Thank you for your support of this crucial resource for children and families in communities across the country.**

How can CACs use data?

Increase Funding & Other Resources

- Improve likelihood of securing and retaining funding
  - Funders expect to see the numbers behind your requests/reports
    - Data can be used for grant applications, including public and private grants
    - Individual and corporate donors also want to know how their money is being used, so show them the impact of your work with the numbers to back it up.
- Build partnerships with other organizations
  - Show other organizations, such as other community-based programs and research institutions, that your CAC would make an effective partner.
    - See an funding opportunity related to your work? Consider partnering with another agency on the proposal and improve your chances of success.
- Support changes in legislation
  - CAC data is combined into state, regional, and national statistics used by State Chapters and NCA, which we use to show state and federal representatives why CACs are so valuable.
  - Provide statistics to representatives to use in their fight for changes in legislation
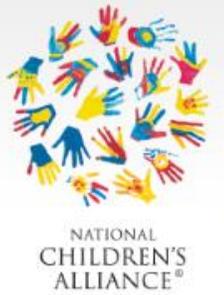
OMS Spotlight on a Participating CAC

How do you use your results? Who do you share them with and what has the reaction been?

Caregiver Surveys:

*"We have used the results of these surveys for funders. In particular, the Victims of Crime Act (**VOCA**) and [State] **Health and Human Services**. This is a great way to show the results of our services according to the families we serve! This **helps funders see what an amazing job we do** and helps our staff see what **areas we may need to improve in**."*

*"For our staff some of the great outcomes have been the **comments families leave**. This may show **themes** such as families wanting more services. Now the families can indicate what services they feel they need. So we have adjusted how we refer families to services and what services we need to have in our back pockets! This is also a **huge boost for morale** when you see how families are grateful for what we have helped with."*

OMS Spotlight on a Participating CAC

MDT Surveys:

*"In reviewing results we can **see where changes need to be made** with regards to the dynamics of a particular MDT. Its great to **hear from our partner agencies how we have helped them,** but it is necessary to hear what we need to improve upon to help them with these cases."*

Overall:

*"We have used comments and outcomes from all surveys to share with our **Board of Directors** how we are doing. We have used this as **kudos amongst our staff** as well."*

*"With everyone requiring agencies to SHOW how you make a difference, utilizing OMS and getting some values on **how we make a difference** and showing **how we have improved in particular areas** has been extremely helpful!"*

This center also uses quotes from caregivers and MDT members in their annual report, and other materials, to give context to other statistics.

Big Picture: How are State Chapters Using Data?

- **Share outcomes with state funders**

  - As part of existing relationship or when requesting new/additional funding

- **Provide statistics on legislative visits to show value of CACs**

  - Stand out from other organizations competing for funding

- **Present results to boards, members, and the public**

  - Include results in annual reports, newsletters, and presentations

  - Add to Chapter website and brochures

- **Use data in trainings to demonstrate CAC/MDT goals**

- **Identify struggling areas & offer assistance**

OMS Resources for Members (NCA website)

National reports - "Healing, Justice & Trust"

2016 reports are available – 2017 reports coming this summer!

Will have 2 versions showing national results of OMS

- Member version – includes many suggestions/takeaways for the CAC field
- Brief version – combines OMS with other data sources

http://nationalchildrensalliance.org/members/oms-resources-members

OMS Resources for Members (NCA website)

A customizable, professionally-designed template has been made for combining results from OMS, statistics, Gap Maps, and other sources to tell a unified story about your CAC. A training video and link to the resource is available on this page.

http://nationalchildrensalliance.org/members/oms-resources-members

Differences Between Accounts & Links

- Links to each of the survey types for your center – use for collecting surveys themselves (on a tablet, entering paper surveys, etc.).
    - There is no login required. The links can be opened on any device connected to the internet.
    - The code at the end of each link is how the system knows that results belong to your center, so surveys results will show up in your reporting dashboards above, as well as state, regional, and national aggregated reports, all automatically. **Please be careful when typing in links – consider using short links.**

- Qualtrics accounts are for viewing results in reporting dashboards. **There are NO survey administration functions in accounts themselves.**
    - **Login Page:** https://nca.az1.qualtrics.com/vocalize/login
    - **Username/Email:** email@example.com
    - **Password:** Use "Forgot Password?" button if needed

Each CAC has one account – share login information with all staff at your center who will be working on OMS. Passwords can be changed using the Forgot Password? button, but usernames must be changed by NCA.
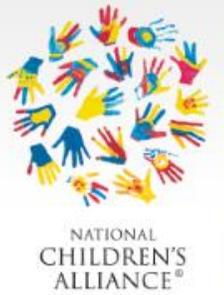
Tabs in Dashboards

Your center will have a minimum of 5 tabs for each survey type. If your center has requested additional items, you may have one or more additional tabs for those items.

- **Demographics**: 1st of 3 tabs showing just your center's data: Number of surveys, completion method, and demographic information such as gender, race/ethnicity, and age for children, and professional discipline, years working with the CAC model, and county for MDT Surveys.

- **Experience Summary (Archived & New):** 2nd of 3 tabs showing just your center's data. Core survey items (multiple choice, etc.) and any comments directly related to those items. *Additional tabs in Follow-Up and MDT with N/A responses removed.*

- **Comments:** 3rd of 3 tabs showing just your center's data. Comments on bigger/more detailed open-ended items.

- **Benchmark - Demographics**: 1st of 2 tabs benchmarking your center's performance to state, regional, and national results. Each item has color-coded bars for each group (your own center, the state you are in, the region your state is in, and the national data). This particular tab shows benchmarking to demographic items previously discussed and shown on the Demographics tab.

- **Benchmark - Experience Summary (Archived & New):** 2nd of 2 tabs benchmarking your center's performance to state, regional, and national results. Shows benchmarking to all other multiple-choice items on the survey.

Next: Live Demo

NATIONAL CHILDREN'S ALLIANCE®
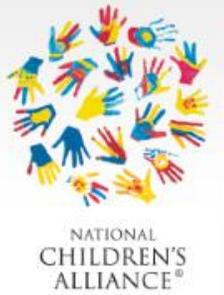
See the full list of surveys by clicking the Projects button in the right-hand corner

Select the survey type for which you wish to view results

Disregard meta-data on the right. This refers to national totals. You will see your center's own information in the dashboard itself for each survey type.

qualtrics.

Projects   Help

All Folders   Project Name ˅

Search P...   + Create Project

★ 🌐 1. OMS - Initial Visit Caregiver Survey
Dashboard · Modified 2017-11-17 18:35:28

5
Pages

66
Widgets

132k
Responses

★ 🌐 2. OMS - Caregiver Follow-Up Survey
Dashboard · Modified 2017-11-17 18:39:22

6
Pages

118
Widgets

27k
Responses

★ 🌐 3. OMS - Multidisciplinary Team (MDT)
Dashboard · Modified 2017-11-17 18:44:40

6
Pages

68
Widgets

40k
Responses

★ 🌐 4. OMS - Case-Specific Multidisciplinary Team
Dashboard · Modified 2017-11-28 20:16:04

5
Pages

37
Widgets

7.4k
Responses

★ 🌐 5. OMS - Individual Client Needs Assessment
Dashboard · Modified 2017-11-17 18:46:45

5
Pages

49
Widgets

19k
Responses

Showing page 1 of 1

Switch surveys using the drop-down or return to the Projects page.

Your center's data is divided into the first 3 tabs (see review on the next page)

Benchmark your results to larger groups – state, region, national – via the last 2 tabs.

Download by tab or by widget (item) to export a PDF or JPG (screenshots) or a CSV spreadsheet (raw data, replaces the "Responses" page in FluidSurveys)

Filter results by timeframe. "All Time" by default, but click to choose a specific date range.

Filter results by location (**only necessary if your organization oversees multiple centers**). Click the bar to select one center (or state, for regional users) or use the drop-down menu to select multiple locations at once (type in the first few letters of the name)

Access account settings (such as to change the password), refresh the account to prompt updates, or log out.

1. OMS - Initial Visit Caregiver Survey

Projects   Help

Demographics   Experience Summary   Comments   Benchmark - Demographics   Benchmark - Experience Summary

Filtering by: ncaid: 12345   state: Example State   region: Example Region   Survey Date: All Time   Center/Location: All   Hide Filters

Download Dashboard
Email Dashboard

Center/Location
Kaitlin's House Children's Advocacy Center   9

State
Example State   9

Number of Responses
9
No change
Over previous week

Survey Completion Method 8 Responses
Computer or tablet at the center   25%
(Center Staff Only) - Paper & Pencil   75%

Child's Gender 7 Responses
Female   57%
Male   29%
Other   14%

QUESTIONS?

For more information, technical support, or any other questions, please contact:

Kaitlin Lounsbury at klounsbury@nca-online.org or

OMScoordinator@nca-online.org

(202) 548-0090 Ext. 211

Please complete the webinar feedback survey in your follow-up email!