Indicator #21: Are you actively using an evaluation plan that provides measurable results to and helps to improve your preventive and clinical intervention efforts?

ATE

Background

- Documenting the impacts of services is critical to the success of any ESMH program.
- Documenting program impacts not only allows clinicians to understand and improve their preventive and clinical efforts, it provides funders and community stakeholders with valuable information about the effectiveness of the program.
- Programs should evaluate both processes (e.g., number of students seen, how quickly seen) and outcomes (e.g., changes in behavior, grades, attendance after services).



Process

- Process evaluations study how the program components work and interact. Process indicators may include:
 - type and number of services provided
 - number of clients served
 - clinician productivity
 - participation in school-wide committees and teams



Outcomes

- It is important to measure short-term outcomes, since many desired changes in educational and social well-being might take many years to achieve (Horsch, 1998).
- Include evaluation of outcomes that are relevant to schools! (e.g., attendance, discipline referrals; Weist et al., 2000)
- ESMH programs may improve overall school climate (Bruns et al., 2004).



Outcomes

- There is beginning evidence suggesting that SMHPs are cost effective (Weist et al., 2000).
- SMHPs may reduce unnecessary referrals to special education (Bruns et al., 2004) and unnecessary utilization of higher cost health care.
- Documentation of impacts in saving costs can be helpful in advocacy efforts.



Menu of Suggested Activities

- Document <u>service utilization and</u> <u>productivity</u> (e.g., population served, number of students referred and seen, number of therapeutic contacts).
- Obtain <u>satisfaction surveys</u> and <u>informal</u> <u>evaluation data</u> by stakeholders affected by the program (students, parents, teachers, administrators).



Menu of Suggested Activities

- Hold <u>qualitative forums</u>, such as focus groups with stakeholders to gather their ideas on program impacts and recommendations for improvement.
- Measure changes in <u>students' academic</u> <u>functioning</u> throughout program services
 - grades
 - attendance
 - discipline problems



Menu of Suggested Activities

- Measure changes in <u>students' psychosocial</u> <u>functioning</u> throughout program services, (e.g., emotional/behavioral problems, risk and protective factors).
- Assess <u>school-level or system changes</u> (e.g., level of aggression in the school, referrals to special education, school climate).



- Document service utilization and productivity (e.g., population served, number of students referred and seen, number of therapeutic contacts).
 - Collect demographic data on all clients (during intake) and compare with school population.
 - Utilize a daily record form to document all services.
 - Summarize daily record of services in monthly reports.
 - Document the percentage of referred students who are actually seen.
 - Document participation in school-wide committees and teams.



- Obtain <u>satisfaction surveys</u> and <u>informal</u> <u>evaluation data</u> by stakeholders affected by the program (students, parents, teachers, administrators).
 - Horsch (1998) suggests asking stakeholders about "the perception that resources and relationships relevant to school achievement and child/family wellbeing are becoming more accessible."
 - Utilize satisfaction surveys developed specifically for stakeholder groups (students, parents, teachers, administrators).



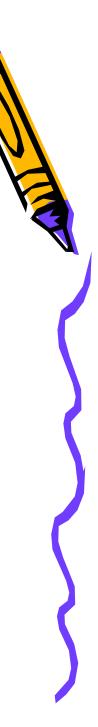
- Measure changes in students' academic functioning (grades, attendance, discipline problems).
 - Assess student reports of academic indicators (e.g., grades, attendance, discipline problems) at intake and periodically throughout services.
 - Use school's data on academic indicators to measure change.
 - Collect teacher reports of student performance and behavior at intake and periodically throughout services.
 Select reports that are brief and user-friendly (e.g., Strengths and Difficulties Questionnaire).



- Measure changes in psychosocial functioning throughout program services, (e.g., emotional/ behavioral problems, risk and protective factors)
 - Collect student, teacher, and parent reports of psychosocial functioning at intake and periodically throughout services.
 - Suggested measures Strengths and Difficulties Questionnaire; Asset Checklist



- Assess school-level or system changes (e.g., level of aggression in the school, referrals to special education).
 - Note that such evaluations require resources and commitment and should be done only with well established and well resourced programs. Many ESMH programs are not at a point to be measuring systems level changes.
 - Document the number of cases in your caseload that are referred to special education for emotional/ behavioral issues.
 - Conduct a school climate survey periodically, including questions about the impact of the school mental health program on climate.



Web Resources

- Center for School Mental Health Analysis and Action, Quality Assurance Resource Packet (<u>http://csmha.umaryland.edu/</u>)
- Center for Mental Health in Schools (<u>http://smhp.psych.ucla.edu</u>)
 - Introductory Packet: Evaluation Accountability: Getting Credit for All You Do
 - Technical Assistance Sampler: Evaluation and Accountability Related to Mental Health in Schools
 - A Sampling of Outcome Findings from Interventions Relevant to Addressing Barriers to Learning



Background References

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