

# ZERO TO THREE SECONDARY PREVENTION INITIATIVE

## PROGRAM INDICATORS

**FY 2009 – FY 2011**

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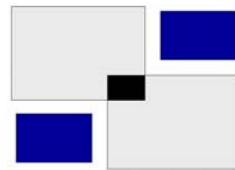
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# ZERO TO THREE SECONDARY PREVENTION PROGRAM INDICATORS

## Introduction:

The Zero to Three Secondary Prevention Initiative Program Indicators were created to address the building reality of outcomes and accountability for programs and services. The overarching purpose of this set of indicators is to systematically collect data from the entirety of grantees, and aggregate this data to inform the system as a whole. The Indicators are not designed to measure performance at the grantee level, rather to assure to stakeholders, including the State Legislature, that the Initiative is outcome-driven. Further, it will allow the Initiative to show that impacts are being made on the population served which warrant continued funding and support.

Traditionally, indicators for Zero to Three reporting were based on those established by the Zero to Five Advocacy Network of Michigan (ZFAN), an advocacy group working on behalf of service providers for infants and toddlers. These indicators, eight in total, were created for a larger service system, focusing on any home visitor services for families with children ages birth to five. The indicators created by the Zero to Three Secondary Prevention Steering Committee focus in on the ideas of ZFAN, and expand the number of indicators to cover the specificity of programs and services funded through Zero to Three. Therefore, these indicators are specific to the Initiative, intended for use by the Initiative, and weigh the accountability of the Initiative. In essence, they provide the framework for the system to respond to the requirements established by law.

The method through which the indicators were created focused on the history of data previously collected by grantees as well as an incorporation of new mandates and projects. In sum, the indicators created minimal new data points; rather, the indicators use and respond to the data already being collected by grantees through quarterly reporting requirements, state-wide evaluation efforts, grant agreements, and funding applications.

Percentage goals for meeting the indicators and outcomes were established through a process of informed research. Historical Initiative data was used to establish a base-line predicated on past performance. Initially, goals concerning indicators for which data from the Adult-Adolescent Parenting Inventory (AAPI-2) will be employed, a set of pilot data from over 2 years of AAPI-2 use was used to determine levels of success. Additionally, State of Michigan trend data, such as immunizations rate, were used to inform goals concerning such information. As updated during FY 2008, data from FY 2006 and 2007, the first two years through which these indicators were employed, were used to make necessary adjustments.

The indicators were also crossed with those created by the larger early childhood system in Michigan, known as the Early Childhood Comprehensive System. This allows for the work being done by Zero to Three providers to be connected and inform the larger early childhood system. Finally, the original indicators, in draft form, were sent to current Zero to Three Grantees for comments and feedback. The suggestions and remarks provided by the Grantees aided in shaping this final version of the system's accountability.

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*In closing, it is important to remember that accountability and outcomes are at the forefront of the decision-making process.*

Programs need to have the capacity to report to stakeholders in a systematic and coherent way; it is through these indicators that the Zero to Three Secondary Prevention Initiative will be accountable. By holding the system responsible for outcomes, it is the vision that the Zero to Three Secondary Prevention Initiative will remain in the forefront of providing high quality, effective and important child abuse and neglect prevention services for Michigan's families.

### **Description of Indicator Format:**

The indicators are grouped by a series of information, including Evaluation Focus Areas and Outcomes. Further, the indicators are crossed with statistics already established by the larger early childhood system; the data source from which the indicator will be informed is also provided. Below is a description of each field in the matrices on the following pages.

<i>Evaluation Focus Area:</i>	These focus areas are the classification of program intents as legislated by the State of Michigan. In all, Zero to Three Secondary Prevention includes 7 general focus areas: Promotion of Marriage, Foster Positive Parenting Skills, Improved Parent/Child Interactions, Promote Access to Needed Community Services, Improve School Readiness, Increase Local Capacity to Serve Families at-Risk, and Support Healthy Family Environments that Discourage Alcohol, Tobacco, and Other Drug Use.
<i>Outcomes:</i>	The outcomes were established to organize the data and information processed through the indicators themselves. They focus the indicators in to groups to help inform the overall legislated focus areas.
<i>Indicators:</i>	The main focus of this document, the indicators lay-out the exact specification of what information will inform the outcomes and the focus areas.
<i>ECCS Indicator:</i>	The column provides the indicator number and letter for which it corresponds in the Early Childhood Comprehensive System. This enables users to see how the Initiative is addressing similar issues as the larger early childhood system, as well as provide data to this system.
<i>Data Source:</i>	The data source gives the resource from which data will be collected to inform the indicator.
<i>Definition:</i>	Preceding each focus area, the definition outlines the Steering Committee's characterization of each focus area and their outcomes and indicators. In general, these definitions provide direction for understanding the focus areas in the context of secondary prevention and early childhood development.

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**Foster Positive Parenting Skills:** Supporting parents in strengthening those characteristics that lend stability to their child’s development, including<sup>1</sup>:

- Increased understanding of child development
- Increased awareness and responsiveness to child’s engagement strategies
- Increased understanding of appropriate child discipline techniques
- Providing a safe and nurturing home environment

Evaluation Focus Area	Outcomes	Objective/Indicator	ECCS Indicator	Data Source
<b>FOSTER POSITIVE PARENTING SKILLS</b>	Increase at-risk parenting attitudes to normal, positive sustainable levels	1) Of those with AAPI-2 pre-test scores near at-risk levels, <b>60%</b> will increase them to normal levels prior to discharge from the program.		AAPI-2 Data
		2) <b>85%</b> of participants will not have AAPI-2 scores drop to at-risk levels when a previous administration indicated them as ‘normal’.		AAPI-2 Data
		3) Of those whose AAPI-2 scores drop to at-risk levels after the pre-test scored them as ‘normal’, <b>80%</b> will raise them to positive levels by the next administration.		AAPI-2 Data
		4) Quarterly, <b>80%</b> of parents will show an increase or maintain the level of how they rate their parenting skills.	8.b.	AAPI-2 Demographic Questionnaire
	Improve parent’s understanding of child development	1) <b>70%</b> of participants will show an increase on the “Appropriate Parental Expectations” Construct from the pre-test to the second administration.		AAPI-2 Data

<sup>1</sup> *Effective Home Visiting for Very Young Children – 1, MSU Best Practice Briefs No. 17, 1999-2000, p. 2*

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Evaluation Focus Area	Outcomes	Objective/Indicator	ECCS Indicator	Data Source
<b>FOSTER POSITIVE PARENTING SKILLS</b>	Enhance the parenting capacities of participants	1) For each grantee, the mean AAPI-2 score on a single construct will increase between .25 and .75 points between each administration.		AAPI-2 Data
		2) <b>65%</b> of participants will show an increase in AAPI-2 scores, significant or not, from the pre-test to the 2nd administration in at least 3 constructs.		AAPI-2 Data
		3) <b>65%</b> of participants will show an increase in AAPI-2 scores, significant or not, from the pre-test to the 3rd administration in at least 3 constructs.		AAPI-2 Data
		4) Annually, <b>80%</b> of parents will indicate an improvement in parenting skills as a result of 0-3 services.	8.b.	0-3 Program Register
		5) <b>100%</b> of grantees who serve parents of newborns will provide or ensure access to parenting skills classes or individual instruction focused on basic care and child safety.	8.c.	0-3 Program Register

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**Improved Parent/Child Interactions**: To assist and support parents to be appropriately responsive, consistent with the child’s development and safety, including the child’s<sup>2</sup>:

- Bids for attention,
- Moods,
- Emotional states,
- Expressions of interests, and
- Efforts to communicate.

Evaluation Focus Area	Outcomes	Objective/Indicator	ECCS Indicator	Data Source
<b>IMPROVED PARENT/CHILD INTERACTIONS</b>	Improve parent/child relationships	1) <b>95%</b> of participants will show an increase in how they rate their quality of relationships with their children from their pre-test to their final administration of the AAPI-2.		AAPI-2 Demographic Questionnaire
		2) The percentage of families who remain in service will increase over 4 quarterly reports.		0-3 Program Register

<sup>2</sup> Shonkoff, J. P. and Phillips, D. A. (Eds.) (2000). *Neurons to Neighborhoods: The science of early childhood development*. Washington, D.C.: National Academy Press

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Evaluation Focus Area	Outcomes	Objective/Indicator	ECCS Indicator	Data Source
<b>IMPROVED PARENT/ CHILD INTERACTIONS</b>	Infants and toddlers are safe	1) <b>96%</b> of children in families served will not have Category 1 or 2 CPS Dispositions while enrolled in services.	7.a.	0-3 31-B
		2) <b>96%</b> of children in families served will not have a Category 3 CPS Disposition while enrolled in services.	7.a.	0-3 31-B
		3) <b>90%</b> of children in families served will not have a Category 1 or 2 CPS Disposition 6 months after exiting from the program.	7.a.	0-3 31-B
		4) <b>90%</b> of children in families served will not have a Category 3 CPS Disposition 6 months after exiting from the program.	7.a.	0-3 31-B
		5) <b>90%</b> of children in families served will not have a Category 1 or 2 CPS Disposition 12 months after exiting from the program.	7.a.	0-3 31-B
		6) <b>90%</b> of children in families served will not have a Category 3 CPS Disposition 12 months after exiting from the program.	7.a.	0-3 31-B

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**Promote Access to Needed Community Services:** Programs assist families to identify services to meet family needs and assist to remove any barriers to access<sup>3</sup>.

Evaluation Focus Area	Outcomes	Objective/Indicator	ECCS Indicator	Data Source
<b>PROMOTE ACCESS TO NEEDED COMMUNITY SERVICES</b>	Children will receive needed services	1) Annually, <b>100%</b> of children will participate in developmental screening.	3.a.	0-3 Program Register
		2) <b>100%</b> of children screened each quarter who are suspected to have developmental delays will be referred to <i>Early On</i> Michigan or a similar program.	3.b.; 10.d.	0-3 Program Register
		3) <b>80%</b> of children will be up-to-date with age appropriate immunizations each quarter.	1.i.	0-3 Program Register
		4) Each quarter, <b>80%</b> of children are up-to-date with well-child visits.	3.a.	0-3 Program Register
		5) <b>65%</b> of children who should be tested for lead will be up-to-date with age appropriate lead testing each quarter.		0-3 Program Register
	Families will receive needed services	1) Each quarter, <b>88%</b> of families served will have access to a primary health care provider.	1.a.; 2.b.	0-3 Program Register
		2) As reported quarterly, <b>90%</b> of pregnant women will receive the recommended number of pre-natal care visits.	1.d.	0-3 Program Register

<sup>3</sup> Nisbet, J. and Hagner, D. (2000). *Part of the Community: Strategies for including everyone*. Baltimore, MD: Paul H. Brookes Publishing Co.

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**Improve School Readiness:** Efforts that contribute to the well-being of the child so that the child is ready to succeed in school and life. One definition of “Ready to Succeed” includes<sup>4</sup>:

- Socially, emotionally and physically healthy
- Able to communicate needs, wants, and thoughts
- Enthusiastic and curious in approaching new activities
- Able to do problem solving and use new information
- Grounded in safe, stable, consistent, and nurturing relationships

Evaluation Focus Area	Outcomes	Objective/Indicator	ECCS Indicator	Data Source
<b>IMPROVE SCHOOL READINESS</b>	Children will be on target for school entry	1) <b>80%</b> of children will be up-to-date with age appropriate immunizations each quarter.	1.i.	0-3 Program Register
	Children will be developmentally age appropriate	2) <b>94%</b> of children screened quarterly will meet age-appropriate developmental milestones.	9.h.	0-3 Program Register

<sup>4</sup> Based on definitions created by Michigan’s Ready to Succeed Partnership

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**Increase Local Capacity to Serve Families At-Risk:** Programs maintain a stable level of services with steady cash matches, in-kind services, and local supports so families identified to be at the greatest risk and need can receive community interventions.

Evaluation Focus Area	Outcomes	Objective/Indicator	ECCS Indicator	Data Source
<b>INCREASE LOCAL CAPACITY TO SERVE FAMILIES AT-RISK</b>	Agencies will maintain program infrastructure	1) <b>100%</b> of grantees will guarantee matching funds prior to the start of the programming cycle.	11.d.	Annual Grant Review
	Appropriate services will be provided to at-risk families	1) Each quarter, <b>100%</b> of grantees will maintain or increase the number of families served with three or more risk factors.		0-3 Program Register
		2) Each quarter, Grantees report at least <b>50%</b> of families served have 3 or more risk factors.		0-3 Program Register
		3) Each quarter, <b>100%</b> of grantees will maintain or increase the number of services provided.		0-3 Program Register
		4) Each quarter, <b>100%</b> of grantees will maintain or increase the types of services available to families.		0-3 Program Register

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**Support Healthy Family Environments that Discourage Alcohol, Tobacco and Other Drug Use:** Provide information and support that encourage healthy life choices, a physical environment that protects family members from injuries and illness and discourages use/abuse of drugs, tobacco, and alcohol.

Evaluation Focus Area	Outcomes	Objective/Indicator	ECCS Indicator	Data Source
<b>SUPPORT HEALTHY FAMILY ENVIRONMENTS THAT DISCOURAGE ALCOHOL, TOBACCO AND OTHER DRUG USE</b>	Parents will receive education regarding healthy family environments	1) <b>100%</b> of programs will provide information on healthy family environments (for example, non-exposure to second-hand smoke; non-exposure to alcohol, tobacco, and other drugs).		Annual Grant Review
	Children are not exposed to second-hand smoke	1) <b>100%</b> of programs will assess tobacco use by parents and provide information regarding cessation.		Annual Grant Review