

**Agenda Item 8**  
**July 1, 2015****DATE:** June 23, 2015**TO:** Children and Families Commission of Orange County**FROM:** Christina Altmayer, Executive Director**SUBJECT:** Prevention and Early Intervention Program Evaluation**ACTION:** Approve funding the Prevention and Early Intervention Program Evaluation Design**SUMMARY:**

Consistent with Children and Families Commission's direction, staff released a Request for Response (RFR) for the Prevention and Early Intervention Program on April 24, 2015. The program will be supported by \$460,000 of Round 2 Catalytic funding. The design of Prevention Early Intervention program was substantially informed by the research done by Dr. Emily Putnam-Hornstein, of the Children's Data Network at USC, on Orange County child abuse data which found that while "*official cross-sectional data from 2013 indicate that 3.6% of children under age 5 were reported for maltreatment, when we longitudinally follow children from birth through age 5—data from the present report indicate that 11.5% of children were reported—significantly more children than previously appreciated.*" This staff report provides an update on the implementation planning effort, requests a funding set aside for the evaluation of the Prevention and Early Intervention Program, and approval of the initial evaluation design.

**DISCUSSION:**

In April 2015, the Request for Response (RFR) was released for a two year pilot program that targets families with at least one child age 0-5, which had an initial Child Abuse Registry report. The goal is to reduce future reports and incidences of abuse and neglect. Consistent with the action taken by the Commission at the December 2015 meeting, the scope of services includes:

- The use of standardized evidence based assessment that can be used as a pre and post measurement for participant families.
- A network of community service providers that can leverage existing community resources including evidence based intervention models such as Triple P (Positive Parenting Program).
- A backbone agency that can be accountable for data collection and quality assurance among the community service providers and does not provide direct services to the targeted families.
- Commitment of all agencies to a rigorous evaluation that identifies the benefit to the individual family for having participated in program, reduction in the number of 0-5 children whose families have subsequent and or substantiated child abuse reports, and the potential cost savings to the system because of the voluntary intervention.
- Payment structure based on achievement of targeted milestones including engagement of families in voluntary programs and completion of services.

The responses are due to the Commissions on June 24, 2015, and will be reviewed by panel including representatives of the Orange County Social Services Agency (SSA) and the Commission.

Two applicant conferences have been hosted by the Commission, as well as one-on-one technical assistance for agencies that submitted a Letter of Intent. Once the most qualified collaborative is identified, Commission staff and Social Service Agency staff will enter into negotiations for approximately 60-90 days to finalize all aspects of the scope, memorandum of understanding with SSA and performance payment structure. Contract(s) are expected to be presented for authorization at the September or October 2015 Commission meeting.

### **Proposed Evaluation Approach**

This project is being funded and launched as a one-time catalytic funding, with the expectation that should the pilot prove a measurable impact on reducing child abuse and neglect, the Commission would work with SSA and other potential partners to develop a long-term sustainability strategy. A Pay for Success funding model has been considered and incorporated into the implementation planning. Regardless of the sustainability strategy, evidence of impact will be critical for long-term funding.

Dr. Emily Putnam-Hornstein has been engaged and kept abreast of the program design and implementation process. A critical aspect of the project for long term sustainability efforts is the requirement for service providers to participate in rigorous evaluation. Dr. Hornstein has had the opportunity to share the Commission's program design, as defined in the Request for Response (RFR), with national foundations that are interested in funding research on child welfare interventions. Of particular interest for this evaluation effort is the use of administrative data for confirm outcomes and its implications for the advancement of Pay for Success agreements. The intent of the rigorous evaluation is to:

1. Independently determine the impact of the intervention on the participating families demonstrating that the community-based intervention measurably reduces rates of abuse and neglect; and,
2. Measuring the impact of specific elements of the intervention in terms of an efficient and effective process such as referral rates, willingness of families to participate in services, program completion rate, etc.

While this evaluation will provide rich data to assist in program design and an understanding of the outcome for families that engaged in services, it will not provide the "counter-factual", i.e. the evidence that the families would not have achieved those outcomes without the intervention provided. For this reason, staff recommends that a randomized control trial be included as an element of the program implementation and evaluation strategy.

The launch of the Prevention and Early Intervention Program provides a one time opportunity to structure a Randomized Control Trail (RCT) evaluation as these are additional services that have not been provided to similar families previously. The previously approved target population includes those families who have received an initial child abuse report but who are not eligible for additional services, based on a determination by SSA. This total population would include both a control and intervention group. The control group, or group of families that would not receive the prevention early intervention services, would receive services consistent with existing SSA protocol in place today. Commission staff has worked closely with SSA representatives throughout the design and implementation process and no changes or impacts will be made to existing SSA services. The ability of this program to capitalize administrative data to ultimately determine the outcomes for both the

treatment and control group is another benefit in decreasing the cost of an RTC evaluation and of particular interest to national foundations that fund this type of work.

Approval to develop an evaluation design for the program that includes a RTC element and to provide up to \$25,000 to support the evaluation is recommended. Funding is available in the FY 2014/15 approved evaluation budget. The Commission funding would support the design of RTC protocol, and provide an initial investment as staff works to attract a philanthropic investment for the comprehensive evaluation that would include both the performance management and RTC elements. Staff intends to work with The Children's Data Network and Dr. Emily Putnam-Hornstein to support the initial evaluation design.

#### **STRATEGIC PLAN & FISCAL SUMMARY:**

The proposed project has been specifically reviewed in relation to the Strategic Plan and is consistent with the Commission Strong Families goal area. The Round 2 Catalytic Funding has \$460,000 allocated to support early intervention and prevention services. Funding for evaluation is included within the FY 2014/15 Budget and will be carried over to next fiscal year.

#### **PRIOR COMMISSION ACTIONS**

- April 2015- Program Update
- December 2014- Approved release of the Request for Proposal
- October 2014- Released contingency on Title 4E waiver and confirmation of prevention early intervention scope
- January 2013- Programmatic update and funding set aside
- March 2012- Funding Allocation as part of the Round 2 Catalytic Investment

#### **RECOMMENDED ACTIONS:**

Approve up to \$25,000 of funding for an evaluation design that includes a Randomized Control Trail for the Prevention and Early Intervention Program.

**Contact:** Kim Goll