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Evaluation of Early Childhood Court Teams in Escambia and Okaloosa Counties

Overview of Methods, Findings and Recommendations

Wednesday, August 30, 2017

DCF Child Protection Summit, Orlando, Florida

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Ounce of Prevention Fund of Florida

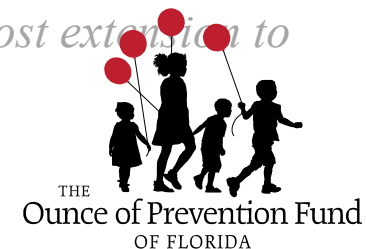
Evaluation Funded by the Institute for Child Welfare,

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Early Childhood Court

The goal of Florida's Early Childhood Court Teams is to improve child safety and well-being, heal trauma and repair the parent/child relationship, expedite permanency, prevent recurrence of maltreatment, and stop the intergenerational cycle of abuse/neglect/violence.



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Early Childhood Court

Florida's Early Childhood Court has 15 specific core components:

- Judicial Leadership
- Trauma Lens
- Central Role of Infant Mental Health Specialist & Child-Parent Psychotherapy
- Continuum of Behavioral Health Services
- Collaborative Court Team
- Community Coordinator
- Cross Agency Training
- Developmental Support for the Child/Parent
- Parent Education and Support
- Placement Stability and Concurrent Planning
- Monthly Family Team Meetings
- Parent-Child Contact (Family Time/Visitation)
- Co-parenting
- Evaluation
- Funding and Sustainability



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Major Evaluation Components and Project Information

1. Pre-post comparison using self-report inventory to determine whether ECCT members' knowledge of the impact of traumatic stress increases as a result of participating in live training on trauma-informed care.
2. Pre-post comparison of self-report inventory to determine whether parenting stress (as measured by the Parenting Stress Index – Short Form) changes over the first four months of ECCT participation.
3. Qualitative analysis of interviews with parents served by the ECCTs
4. Collaboration Survey of ECCT Staff and Community Stakeholders
5. Matched comparison design with families served by the Escambia and Okaloosa ECCTs as the intervention groups.





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Major Evaluation Components and Project Information

- The human subject protection protocol was approved through Western IRB and Baptist Hospital IRB. During the summer, this project shifted to rely solely on the Baptist Hospital IRB.
- Priority area was “evidence-based services for children birth to five.” Research category was “enhancing collaborative stakeholder relationships in child welfare practice.”





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ECCT Trauma Informed Training September 22-23, 2016

- The training was delivered by the National Center for Child Traumatic Stress (NCTSN) and based on the NCTSN *Child Welfare Trauma Training Toolkit*.
- The evaluation of the training relied on a 10 item questionnaire in the Toolkit that was administered pre training and post training. The questionnaire measured through self-report the level of knowledge about child trauma. A 5-point Likert response scale is used and ranged from 0=Not at all to 4= To a very great extent.



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ECCT Trauma Informed Training

September 22-23, 2016

- The number of training participants included in the evaluation was 37. However, only 29 participants completed both the pre training questionnaire and the post training questionnaires.
- Among the 37 training participants who completed the pre training questionnaire, a variety of local social service organizations and service providers were represented:
 - Half of the participants represented child welfare (51.4%),
 - around a quarter represented mental/behavioral health (24.3%), and
 - 13.5% represented “other” organizations not listed.
 - The remaining participants represented the courts and education system (8.1% and 2.7%, respectively).
 - A majority of training participants (31) were ECCT members (83.8%).



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Improvement in the Knowledge of Child Trauma

- All pre-post differences for the questionnaire items were statistically significant.
- The pre-post percent changes for the questionnaire items ranged from 35-87%.
- Improvement in the knowledge of child trauma and trauma-informed care far exceeded the threshold in the proposal (10% change).





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ECCT and Parent Stress

- In the proposal, participation in the ECCT was hypothesized to have a positive impact on the level of parent stress. The tool selected to measure parental stress was the Parenting Stress Index-Short Form (PSI-SF) (Abidin, 2012).
- In this evaluation, the PSI-SF was administered to parents based on the following criteria:
 - The parent is at least 18 years old.
 - The parent had not yet completed the PSI survey for this study.
 - The parent had been receiving ECCT services for at least four months (120 days.)





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ECCT and Parent Stress (continued)

- There was no administration of this tool prior to the participation of each parent in ECC. A retrospective measurement approach was applied. This allowed the parent to reflect back to before their participation in the ECC for the completion of one tool and then to their current experience in the completion of the second tool.
- Each ECC team coordinator received a set number of questionnaires with the instructions for administering the tool.





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Table 1. Descriptive Statistics for the PSI-SF, Retrospective Before and Now

Total and Subscale Scores	Before				Now			
	N	Mean (SD)	Range	% High	N	Mean (SD)	Range	% High
Total Stress	21	71.40 (14.01)	47-106	0	21	65.51 (15.5)	42-98	0
Parental Distress	20	29.83 (7.98)	18-44	15%	20	27.24 (7.18)	18-47	5%
Parent-Child Dysfunctional Interaction	20	21.00 (5.50)	13-31	0	20	18.35 (5.92)	12-32	0
Difficult Child	21	23.00 (5.09)	16-37	0	21	22.09 (5.59)	16-32	0





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Assessments using the PSI-SF

Subscales, Ns	Total Stress (TS) N = 21	Parental Distress (PD) N = 20	Parent-Child Dysfunctional Interaction (PCDI) N = 20	Difficult Child (DC) N = 21	
Specific Score Thresholds	Criteria for High Score				
	TS Score of 110 or higher	PD score of 40 or higher & DC score of 33 or lower	PCDI score of 37 or higher, DC score of 40 or higher, and PD score of 33 or lower	DC score of 40 or higher, PCDI score of 28 or lower, & a PD score of 33 or lower	DC score of 40 or higher, PCDI score of 37 or higher, & a PD score of 33 or lower
Assessment of High Score for Each Subscale		“Parent is experiencing personal adjustment problems that are at least partially independent of the parent-child relationship”	“Parent is coping with exceptionally difficult behavior or personality characteristics in his or her child”	“Intervention in the form of short-term parental consultation or a parent education class focused on management strategies should be sufficient to improve the situation”	“A more intensive child-oriented intervention program, which should include careful diagnostic assessment of the child’s behavioral adjustment and functioning, is required.”
Before Number of Participants	TS = 0	PD = 3 DC = 20 PD+DC = 3 (15%) 1 missing from PD	PCDI = 0 DC = 0 PD = 12 PCDI+DC+PD = 0 1 missing from PCDI	DC = 0 PCDI = 18 PD = 12 DC+PCDI+PD = 0	DC = 0 PCDI = 0 PD = 12 DC+PCDI+PD = 0
Now Number of Participants	TS = 0	PD = 1 DC = 21 PD+DC = 1 (5%) 1 missing from PD	PCDI = 0 DC = 0 PD = 16 PCDI+DC+PD = 0 1 missing from PCDI	DC = 0 PCDI = 18 PD = 16 DC+PCDI+PD = 0	DC = 0 PCDI = 0 PD = 16 DC+PCDI+PD = 0



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PSI-SF Results Differences between “before” and “now”

		Paired Samples Test							
		Paired Differences					t	df	Sig. (2-tailed)
		Mean	Std. Deviation	Std. Error Mean	95% Confidence Interval of the Difference				
					Lower	Upper			
Pair 1	Parental Distress Before - Parental Distress Now	2.51579	8.93416	2.04964	-1.79034	6.82192	1.227	18	.235
Pair 2	Parent Child Dysfunctional Interaction Before - Parent Child Dysfunctional Interaction Now	2.36842	4.08535	.93724	.39935	4.33750	2.527	18	.021
Pair 3	Difficult Child Before - Difficult Child Now	.90476	3.22343	.70341	-.56252	2.37205	1.286	20	.213
Pair 4	Total Parental Distress Before - Total Parental Distress Now	5.89524	16.08597	3.51025	-1.42701	13.21748	1.679	20	.109





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Interviews with ECCT Parents

- Twelve parents were interviewed by telephone (6 from Escambia and 6 from Okaloosa). Thank you to the FamiliesFirst case managers and others that facilitated this process.
- Telephone interviews occurred from October 2016 through November 2016.
- \$20 gift cards for parents





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Parent Interview Questionnaire (Questions paraphrased)

- When was your first meeting with the ECCT?
- What happens at ECCTs?
- What kinds of services have you received?
- What was helpful?
- What could have been better?
- Has your relationship with your child or children changed?
- Do you have any other comments about experiences in ECCT?



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Qualitative Analysis of Parent Interviews

Table 1. Percentages of Interview Transcripts Coded by Node (Interview Question), County and Evaluator

ECC County and Evaluator	Question 1 When?	Question 2 What happens?	Question 3 What services ?	Question 4 What was helpful?	Question 5 What could be better?	Question 6 Relation with child?
Escambia						
Evaluator 1	2.76	7.23	11.62	14.16	8.65	7.39
Evaluator 2	2.34	11.88	13.29	11.16	9.78	8.21
Escambia Averages	2.55	9.55	12.45	12.66	9.21	7.84
Okaloosa						
Evaluator 1	2.61	10.06	13.98	14.92	4.84	13.39
Evaluator 2	2.41	11.68	14.80	10.19	11.87	12.17
Okaloosa Averages	2.51	10.87	14.39	12.55	8.36	12.78
Overall Averages	2.53	10.21	13.42	12.60	8.79	10.31

Note: Responses to Question 7 were very short or relevant to (coded with) other questions and are not included in this table.





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Selected Findings in the Qualitative Analysis of Parent Interviews

- Parent descriptions of the Okaloosa ECC team meetings (Question 2) is below:
 - Ask how the parent is feeling/doing
 - Ask how the parent is progressing
 - Provide positive feedback (accomplishments)
 - Discuss what will happen in court
 - Ask if the parent has any questions
 - Suggest things that should be done as follow-up (appointments)
 - Ask what support and help is needed
 - Ask if there are any programs that would be beneficial





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Selected Findings in the Qualitative Analysis of Parent Interviews

Sub-Themes (Question 4—Was ECC helpful?)	Escambia ECC Findings	Okaloosa ECC Findings
Reunification with Children	Recognized reunification with children as a positive outcome in ECC. Evidence of a focus on the timing with references to entering the court system quicker and getting their children reunified quicker.	Recognized reunification as a positive goal and outcome in ECC.
Help and Support	Recognition of the support provided in ECC and by staff.	Recognition of support provided in ECC by a variety of staff from different agencies. More emphasis on not being able to make it through the process and do what was needed without ECC and the staff members mentioned.
Accountability	Recognition of the importance of making parents accountable.	No evidence in this analysis.
Believing in Parents	No evidence in this analysis.	Recognition of the importance of staff believing in the parents.
Understanding and Non-Judgmental	No evidence in this analysis.	Recognized the importance of understanding and being non-judgmental.
Acknowledgement and Positive Feedback	No evidence in this analysis.	Recognized being acknowledged and receiving positive feedback.
Communication and Sharing Information	Recognition of the importance of communication and positive reassurance.	Recognition of the importance of communication and positive reassurance
Relationships in the Family	No evidence in this analysis.	Recognized improvement in relationships with children and husband.
Substance Abuse Treatment and ECC Beneficial	No evidence in this analysis.	Recognized the benefits of substance abuse treatment and how ECC was different in its comprehensive approach and better understanding of the challenges facing the parent that has abused substances.



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Selected Findings in the Qualitative Analysis of Parent Interviews

Responses to Question 5 (suggested improvements)

- Escambia Findings
 - Finding 1: Better Scheduling for Court Hearings
 - Finding 2: Accessibility to Substance Abuse Treatment
- Okaloosa Findings
 - Finding 1: Communication Among Staff Working on a Case
 - Finding 2: Review and Accuracy of Information Available to the Court
 - Finding 3: Overreactions of Case Managers





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Selected Findings in the Qualitative Analysis of Parent Interviews

Responses to Question 6 (changes in relationship with child)

- Escambia Findings
 - Finding 1: Learned Parenting Tools and Cues
- Okaloosa Findings
 - Finding 1: Specific Therapies Identified as Helpful
 - Finding 2: Learning Parenting Skills
 - Learning to be Emotionally Present, Patient
 - Learning to not be Overprotective
 - Learning to Understand Needs





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ECC Collaboration Surveys

September 2016 (N=30) and January 2017 (N=14)

- Surveys included:
 - Questions addressing ECC goals, level of satisfaction, level of agreement on several objectives, achievements, challenges, and suggestions to address these challenges.
 - *Wilder Collaboration Factors Inventory*, which defines collaboration as “a mutually beneficial and well-defined relationship entered into by two or more organizations to achieve common goals. The relationship includes a commitment to mutual relationships and goals; a jointly developed structure and shared responsibility; mutual authority and accountability for success; and sharing of resources and rewards” (Mattessich, Murray-Close, & Monsey, 2001, p. 59).

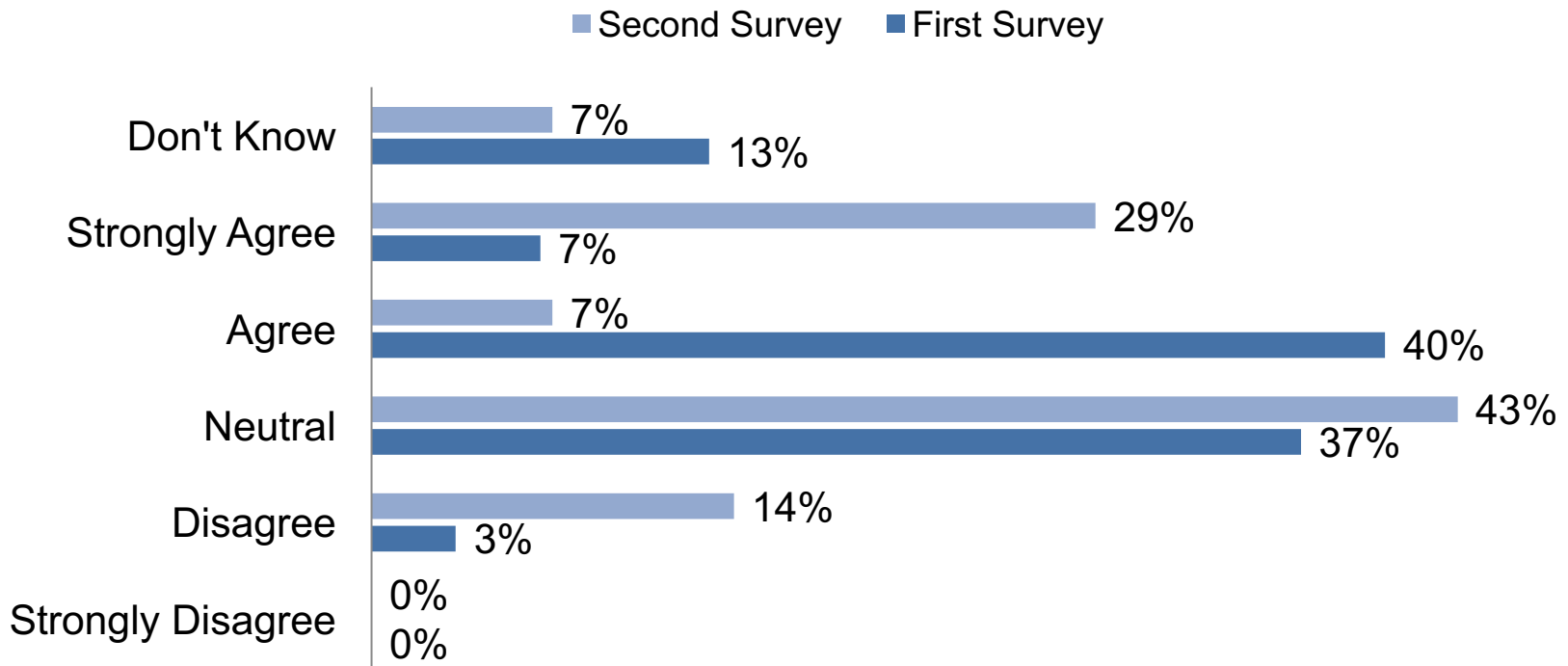




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Selected Findings based on the Collaboration Surveys

Parents will have improved levels of stress after ECCT participation.





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Selected Findings based on the Collaboration Surveys

- The comments regarding ECCT achievements:
 - Shorter time frame to permanency (reunification as well as other discharges, such as adoption)
 - More reunifications
 - Strong team approaches and more resources
 - Successes with families in reunification with younger child even when a parent has had his/her rights terminated for older children
 - Confidence instilled in parents





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Selected Findings based on the Collaboration Surveys

Comments regarding challenges and suggestions to address them were instructive for the ECCTs in both counties.

- Clients difficult to locate, move often and have phones disconnected (Both counties)
- Need more feedback from providers (Both counties)
- The needs of older siblings are not being met (Okaloosa)
- Parent attorneys working against the goals in ECCT (Okaloosa)
- CPP slows down the reunification (Okaloosa)
- Difficult to address a parent's multiple challenges (DV, substance abuse, low functioning) in 9-12 months (Escambia)
- Some case managers and foster families are too adversarial with parents, particularly those with substance abuse (Okaloosa)
- Housing and transportation are barriers (Okaloosa)





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Selected Findings based on the Collaboration Surveys

- Lack of clear ECCT policy/procedures (acceptance/eligibility of families into ECCT, scheduling of staffings and court hearings) (Escambia)
- Need strong leadership to guide the focus of the ECCT (Escambia)
- Need the ECCT process to be streamlined (Both counties)
- Need more service/therapy options that are trauma-informed (Okaloosa)
- Need rules for reunifications, overnight and unsupervised visitations (Okaloosa)
- If family is not engaged, need to have them attend another induction in ECCT to re-evaluate their desire and allow another family to participate (Okaloosa)
- Staffings should be held on the same day as court hearing (Okaloosa)





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Matched Comparison Design

Comparing ECCT and Non-ECCT Comparison Groups

- An Excel data file with variables in Florida Safe Families Network (FSFN) was created by the FFN system staff.
- The earliest child protection records had receive dates of 05/19/2013 in Escambia and 09/06/2013 in Okaloosa. The date the data were retrieved from FSFN was 01/05/2017.
- The first worksheet was a base table (# of Records = 151,139) that contained: Intake (investigation) number, Initial Role (identification of victim role), Receive date, Close date, County of residence, County of investigation, Safety Methodology (whether the Safety Methodology was practiced and the proxy was the completion of a Family Functioning Assessment or FFA).
- Additional worksheets displayed DOB, gender, and race for victims, maltreatment types and findings, and discharge information with dates for removal and discharge.
- Investigation/Intake Numbers for ECC participants were provided by ECC staff. These numbers were used to identify the ECC victims for subsequent data analysis.

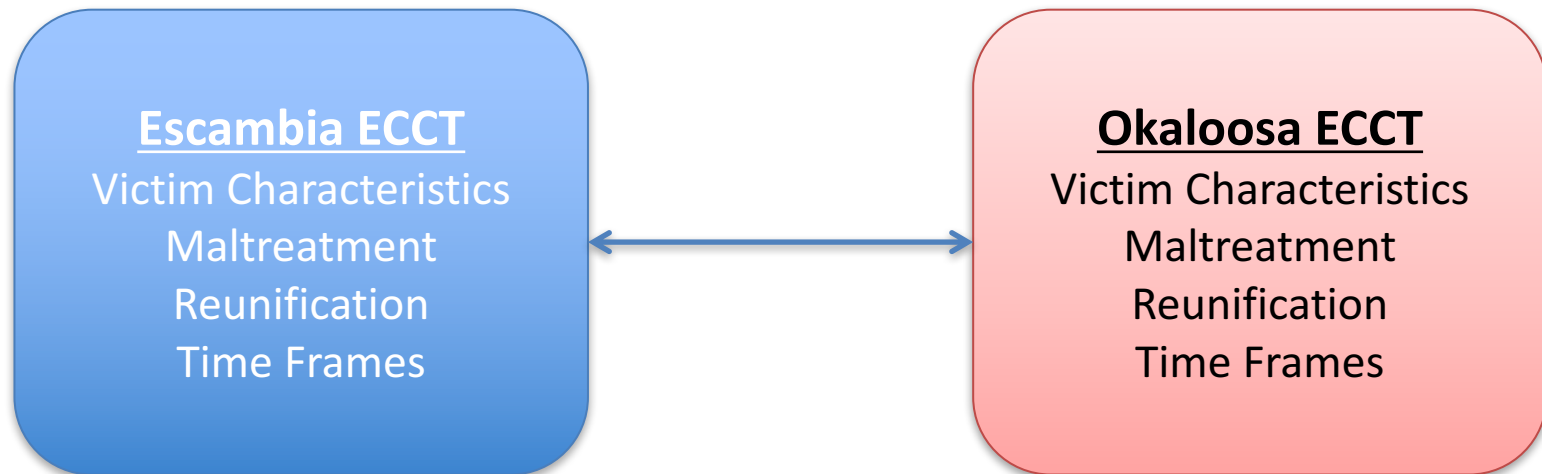


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ECCT Comparison

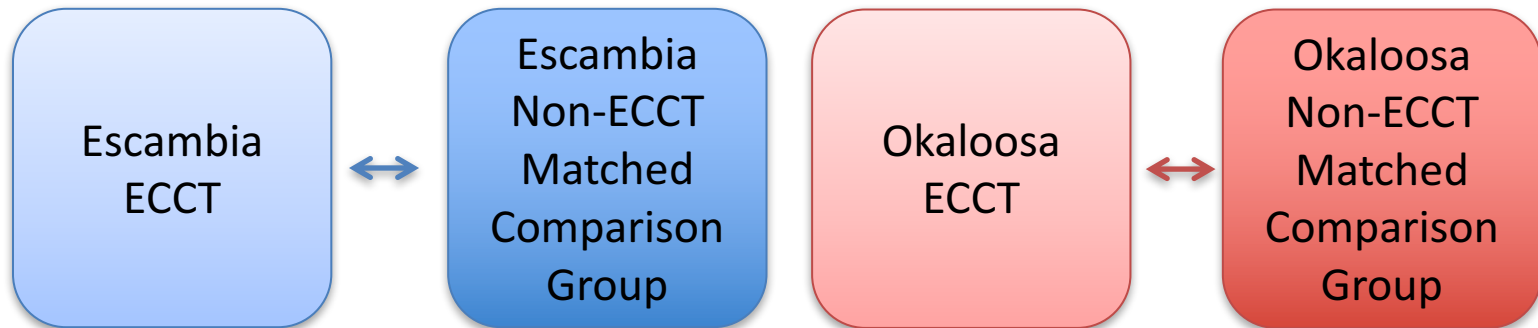


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Matched Comparisons for ECCT and Non-ECCT



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Comparison of ECCT Escambia and Non-ECCT Escambia (Propensity Scoring Matches for Comparison Groups)

Unique Victim and Unique Intake Data File	Means (Standard Deviations), Ranges or Percentages(Ns)	
Victim Demographics and Outcomes	Non-ECCT Escambia (N = 100)	ECCT Escambia (N = 100)
Youngest Age in Years (Mean)	.88 (1.085) 0-5	1.16 (1.403) 0-3
Birth to 1 Year of Age (%)	57.0% (57)	46.0% (46)
Gender (At least 1 Victim Female)	64.0% (64)	60.0% (60)
Black/Other (%)	37.0% (37)	43.0% (43)
Verified Maltreatment (for ECCT, maltreatment after ECCT referral)	28.0% (28)	20.0% (20)
Not Substantiated Maltreatment (for ECCT, maltreatment after ECCT referral)	49.0% (49)	15.0% (15)
Reunification (for ECCT, reunification after ECCT referral)	7.0% (7)	35.0% (35)





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Comparison of ECCT Okaloosa and Non-ECCT Okaloosa (Propensity Scoring Matches for Comparison Groups)

Unique Victim and Unique Intake Data File	Means (Standard Deviations), Ranges or Percentages(Ns)	
Intake Demographics and Outcomes	Non-ECCT Okaloosa (N = 55)	ECCT Okaloosa (N = 55)
Youngest Age in Years	1.64 (1.445) 0-4	.93 (1.168) 0-5
Birth to 1 Year of Age (%)	29.1% (16)	49.1%(27)
Gender (% At least 1 Victim Female)	69.1% (38)	63.6% (35)
Black/Other (%)	0.0% (0)	20.0% (11)
Verified Maltreatment (for ECCT, maltreatment after ECCT referral)	29.1% (16)	23.6% (13)
Not Substantiated Maltreatment (for ECCT, maltreatment after ECCT referral)	52.7% (29)	16.4% (9)
Reunification (for ECCT, reunification after ECCT referral)	3.6% (2)	32.7% (18)





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Impact of ECCT compared to Non-ECCT

- Odds ratios for reunification based on ECCT group participation were statistically significant ($p = .001$).
- Victims served in the ECCT in Escambia were 7.1 times more likely to have a reunification compared to victims not served in the ECCT in Escambia County.
- Victims served in the ECCT in Okaloosa County were 12.9 times more likely to have a reunification compared to victims not served in the ECCT in Okaloosa County.





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Descriptive Statistics, Early Childhood Courts (Escambia and Okaloosa) Source: Florida's Dependency Court Information System

ECCT Services, Time Frames, and Permanency Outcomes	Ns, Means (Standard Deviations), Ranges or Percentages			
	ECCT Escambia (102 records)		ECCT Okaloosa (77 records)	
Earliest ECCT Referral Date	9/12/2013		3/16/2015	
Active Case (Yes)	43.1% (44)		88.3% (68)	
Number of Caregiver Visits	N = 29	65.17(108.09) Range is 0-406	N = 56	66.73 (91.319) Range is 0-481
Number of Total Family Meetings	N = 21	6.43 (4.718) Range is 1-16	N = 73	6.82 (5.556) Range is 0-21
Reunified within 12 Months	N = 100	45.0%(45)	N = 76	34.2% (26)
Number of Placements (excludes records with "0" in data field)	N = 50	2.78(1.941) Range is 1-8	N = 16	1.18 (1.377) Range is 1-5
Number of Days from Removal to Reunification	N = 52	251.56(121.859) Range is 1-535	N = 29	222.86 (88.871) Range is 107-387
Number of Days between Recent Removal and Recent ECCT Start	0 Days=13		0 Days= 18	
	1 Day= 23		1 Day = 33	
	N = 89	27.57(83.138) Range is 0-760	N = 72	5.33 (17.388) Range is 0-106
Permanency Outcomes	N = 100		N = 76	
Adoption	12.0% (12)		1.3% (1)	
Guardianship-Relative	8.0% (8)		0	
Permanency-Both Parents	10.0% (10)		9.2% (7)	
Permanency-One Parent	26.0% (26)		1.3% (1)	
Records with No Outcome Data due to Remaining Open or Pending	44.0% (44)		88.2% (67)	



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Recommendations to Support and Improve ECCTs

1. More trauma-informed care training
2. Include the administration and review of the Parental Stress Index-SF for parents enrolled in the ECCTs
3. Monitor and strengthen ECCT collaboration by administering the *Wilder Collaboration Factors Inventory* and discussing the responses
4. Conduct ECCT Policy and Procedural Review Sessions
5. Conduct more evaluations of ECCTs





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Recommendations to Support and Improve ECCTs

6. Strengthen the Comprehensive Collection and Organization of Data on ECCT Participants
 - At a minimum, the following items should be included:
 - Demographics of all family members (DOB, race, ethnicity, and number of victims and other household members in an investigation/intake)
 - Maltreatment history (previous report dates, types of findings)
 - Dates for all steps in the process and services (i.e., receive date of intake, referral date to ECCT, court hearing dates, dates in the progression of the level of visitations, removal dates, discharge dates, closure dates, and dates for services)
 - All maltreatment findings and types in the most recent investigation/intake that resulted in child removal and subsequent to referral to ECCT
 - All discharge types before (if any) and subsequent to the ECCT referral
 - All services provided and level of progress in these services
7. Continue to document relevant information on provider services.





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The Future in Evaluations of ECC

- What are the best outcomes?
- What evaluation designs are robust scientifically, manageable, and fair for the families that need the services?
- What is an appropriate time frame?
- How many ECCs should participate?



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