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RESILIENT BEGINNINGS COLLABORATIVE
Measuring Progress Webinar
January 24, 2019

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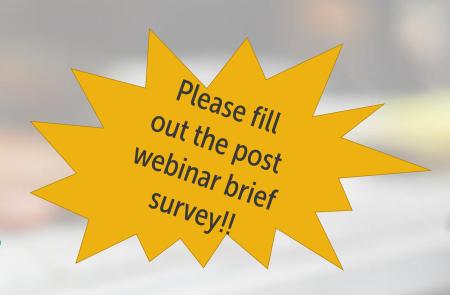CCI | CENTER FOR CARE INNOVATIONS

Webinar Reminders

1. Everyone is muted.
   - Press *6 to **mute** yourself and *7 to **unmute**.
2. Remember to chat in questions!

3. Webinar is being recorded, and will be posted on CCI's website & sent to everyone that registered.

Please fill out the post webinar brief survey!!

Agenda

1 RBC data reporting: Context & rationale

2 RBC data reporting: Operationalizing & next steps

3 Lessons from the field: Bayview Community Health Center

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Context: Evaluation goals

Assess impact of the initiative

Provide **real-time feedback** to inform technical assistance & program support

Identify lessons learned to ensure better care & support for kids and families experiencing trauma

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Context: RBC Evaluation Plan (updated Dec 2018)

	Q3 2018	Q4 2018	Q1 2019	Q2 2019	Q3 2019	Q4 2019	Q1 2020	Q2 2020
RBC org assessment (baseline & follow-up)	★							★
T2 training evaluations	★	★	★					
Phone interviews	★			★		★		★
Coaching calls (all teams in Q1, as needed after)			★	★			★	
RBC data reporting				★	★	★	★	★
Participant survey				★				★
Convening & webinar surveys, observation	★	★	★	★	★	★	★	★
Reflective conversations with RBC staff & faculty	★	★	★	★	★	★	★	★

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Common measurement rationale

Desire for consistent measurement approach to tell a more cohesive story

→

Assessment results: teams early in their efforts to collect data related to trauma & resilience

→

Small number of common metrics allows for focus for teams and support/coaching & provides opportunities for peer learning

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Common measurement: screening and referral

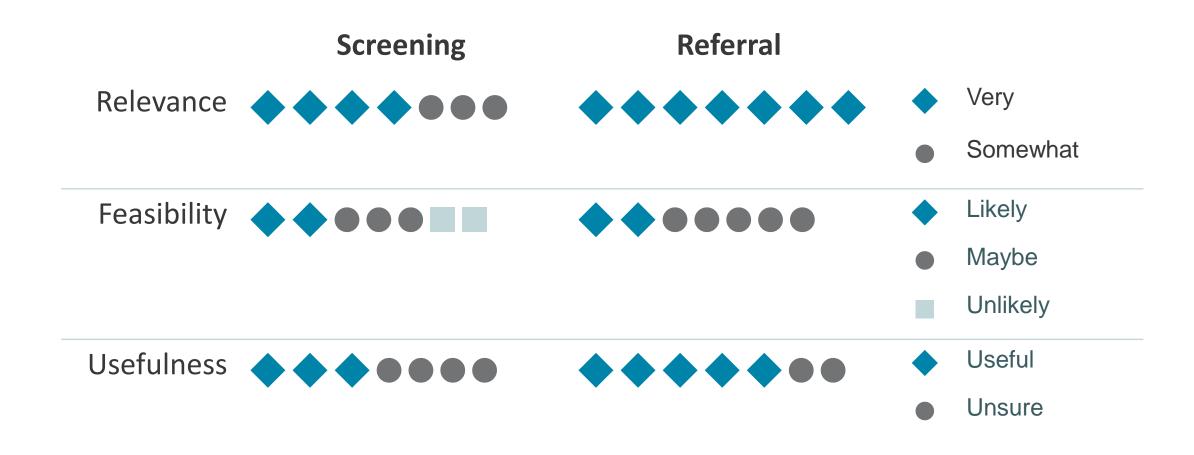Aligns with several elements of the PICC framework: assess, address, coordinate

→

Aligns with the work/focus of most teams (i.e., identifying patients who have experienced trauma & connecting them to services)

→

Desire for evaluation to be able to capture impact on patients (as well as on organizational culture)

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Potential common metrics: screening & referral

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Customizing common measurement
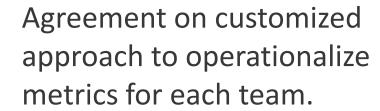
Guiding principles

- Move forward with common measures across the program

- Allow for customization to increase relevance, usefulness & feasibility

- Build incrementally on where teams are starting

- Leverage & align with existing program resources (especially coaching)

- Provide additional evaluation support to teams

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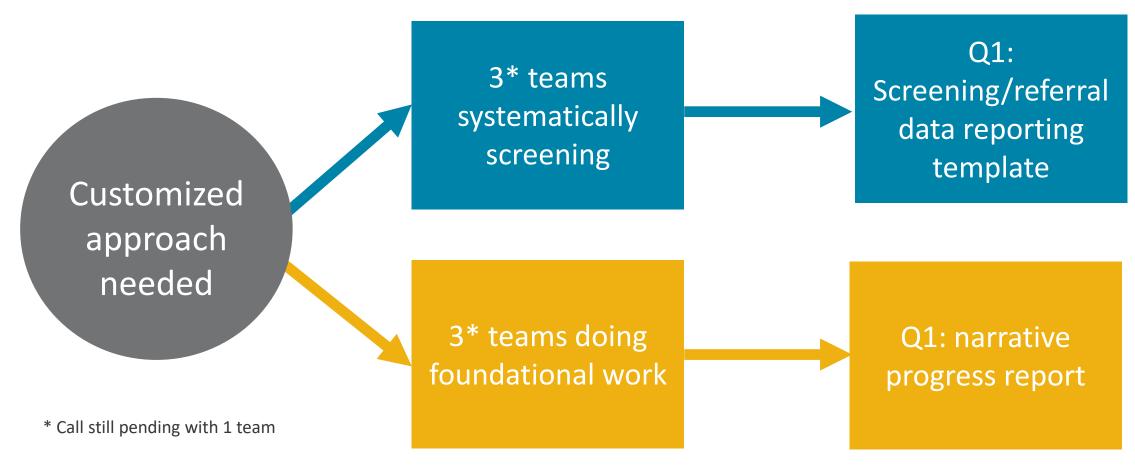
Decisions

Agreement on customized approach to operationalize metrics for each team.

Rescoped the evaluation to allow for increased customization & additional check-ins with teams

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Interview reflections – January 2019

Goal: develop a plan to get to cross-cutting metrics related to screening and referral

Customized approach needed

3* teams systematically screening

Q1: Screening/referral data reporting template

3* teams doing foundational work

Q1: narrative progress report

* Call still pending with 1 team

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Next steps for initial reporting

By **Feb 15**: Draft reporting template sent to teams for review

Apr 15: Q1 data report due to CCHE
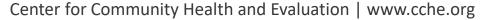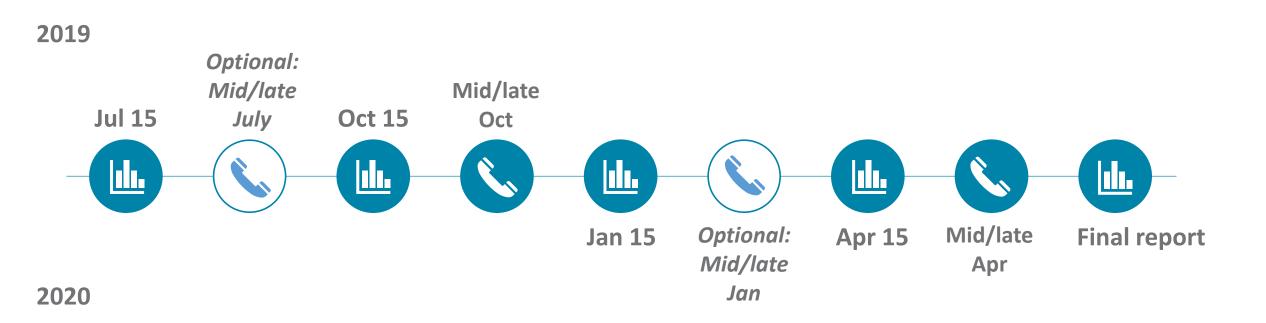
May 31: Revisions made to reporting template (as needed)

Feb 28: Reporting templates finalized

Mid/late Apr: Data & progress check-in calls with CCHE (phone interview)

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Timeline for ongoing reporting

2019

Jul 15 · *Optional: Mid/late July* · Oct 15 · **Mid/late Oct** · Jan 15 · *Optional: Mid/late Jan* · Apr 15 · Mid/late Apr · Final report

2020

Data reports

Phone interview/check-in call

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Other areas of interest for evaluation

Office environment: **changes in staff knowledge, commitment, comfort, and practice** related to trauma and resilience informed care; organizational **culture change**

Community partnerships: understanding, familiarity with community resources; development/expansion of relationships with community partners

Patient satisfaction and experience with screening and referral

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Questions?

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Upcoming RBC Events

Mark your calendars for these events! Registration coming soon.

1. **Mar 18:** The Children's Clinic Site Visit

2. **May 14:** In-Person Convening #3

3. **Jun 13:** Montefiore Site Visit