

Westside Infant-Family Network (WIN)
Outcomes Report for Fiscal 2009



Long term goal: WIN will improve the secure attachment outcomes among children (prenatal through three) such that children are better able to thrive.

Quantitative Service Goal: WIN will serve approximately 325-350 individuals (75 family dyads) per year through case management and/or mental health therapy services.

Goal	FYE 2009 Outcome
Serve 75 family dyads	85 family dyads received case management and/or mental health therapy services
Serve 325-350 individuals	355 individual family members received case management and/or mental health therapy services
	368 individuals attended WIN-sponsored professional-level trainings
	A total of 723 clients served

Qualitative Service Goals:

CHILDREN

1. Indicators & Outcomes: WIN Children will improve their developmental outcomes as screened by the *Ages and Stages Questionnaires (ASQ)*,ⁱ administered every 6 months throughout program involvement. Target: 70% of children who screened as having an “area of concern” will move out of 1 or more identified area(s) of concern after 12 months or more of mental health therapy ❖ as defined by ASQ.

Goal	Outcome
70% children will move out of 1 or more identified area(s) of concern	83% children (10/12*) moved out of 1 or more identified area(s) of concern

* Of the qualifying catchment group of 28 children, 16 children had no areas of developmental concern one year prior to the most recent screening; hence do not appear in this outcome group.

2. Indicators & Outcomes: WIN Children will demonstrate increased behaviors associated with secure attachment as observed and reported by WIN therapists using the Parent-Infant Relationship Global Assessment Scale (PIR-GAS).ⁱⁱ Target: 70% of children will show an increase in secure attachment behaviors (as defined by a gain in three points or more and/or movement to the next higher decile as defined the PIR-GAS scale) after 12 months or more of mental health therapy. ❖

Goal	Outcome
70% children will show increase in secure attachment behaviors	89% children (25/28*) showed increase in secure attachment behaviors
	The 25 children who showed improvement had an average score gain of 18.56 points. The remaining 3 children had an average score loss of 2 points.

* All 28 children qualifying for the catchment group are included in the outcome data.

FAMILIES

1. Indicators & Outcomes: WIN Parents/Primary Care Givers demonstrating need as screened by the Parenting Stress Index-Short Form (PSI/SF) will show improvement in clinically significant levels of stress
ⁱⁱⁱ Target: 70% of care givers will show improvement as measured by the PSI/SF after 12 months or more of mental health therapy. ❖

Goal	2009 Outcome
70% Parents/Primary Care Givers will show improvement in clinically significant levels of stress	57% parents/primary care givers (12/21*) showed improvement in clinically significant levels of stress

* Of the qualifying catchment group of 28 caregivers, 7 caregivers do not appear in this outcome group because they did not have a comparison score, did not show an initial clinically significant level of stress, or had a comparison or most recent score of 10 or less in the Defensive Responding category.

2. Indicators & Outcomes: Families will be successfully linked to services in the community for their identified needs, as tracked through WIN's on-line service plan data system. Target: 60% of identified needs for all family dyads served by WIN during the reporting period will be linked to services.

Goal	Outcome
60% of identified needs will be linked to services	95.7% of identified needs were linked to services (an average of the service linkage percentages for each of 84* family dyads)

*This outcome is for 84/85 families. One family did not have a service plan.

AGENCY STAFF

1. Indicators & Outcomes: Direct service staff at each agency will be better able to identify, refer and provide services for WIN families as indicated by pre- and post-questionnaires collected at WIN-sponsored trainings. Target: Over the course of our training year, 75% of respondents will demonstrate increased knowledge and competency on post-training questionnaires.

Goal	Outcome
75% of respondents will demonstrate increased knowledge and competency	75% respondents (153/204*) demonstrated increased knowledge and competency

* Of 368 training attendees, 204 completed both a pre- and a post-training questionnaire at one of WIN's 6 FYE 2009 trainings. Questionnaires were offered to attendees of all trainings. These outcomes were created before we offered trainings to the public so this number is for our whole training group, not just for WIN and partner agency respondents.

2. Indicators & Outcomes: Clinical staff at each agency (where present) will observe an improved capacity of non-clinical staff to identify, refer and support "WIN eligible" families as measured via yearly interview. Target: 90% of clinical staff will report improvements.

Goal	Outcome
90% of clinical staff will observe an improved capacity of non-clinical staff	100% of 5 clinical staff observed an improved capacity of 12 non-clinical staff

WIN AGENCIES

1. Target: 75% of all families referred to WIN by partner agencies within the fiscal year will receive WIN case management and/or mental health therapy services, as defined by:

- Case management: Family has been successfully linked and followed through on at least one referral provided by a WIN case manager;
- Mental health therapy: Family has engaged in dyadic therapy with WIN therapist for at least 3 50-minute sessions.

Goal	Outcome
75% families referred to WIN will receive case management and/or mental health therapy services	92% WIN families referred in FYE 2009 (35/38) received case management and/or mental health therapy services
	69% of families referred and served in FYE 2009 (24/35) received case management AND mental health therapy services
	31% of families referred and served in FYE 2009 (11/35) received case management services only

This outcome measure is new, replacing the following goal: Case managers for 80% of families will receive a case consultation on the family’s mental health needs. Our outcome was consistently 100% because every new case receives a case consultation within 60 days of referral.

Of all the families identified as needing WIN services, we wanted to capture the percentage that actually ended up receiving them. We are holding ourselves to more stringent standards, seeking to ensure that a high percentage of WIN referrals are appropriate for WIN services, and measuring our success in client follow-through.

❖ To be included in this catchment group, the client must meet criteria A:

- A. Client started fiscal year as a mental health therapy services client and/or received MH therapy during the reporting period

And meet criteria B or C:

- B. Client has received 12 or more months of MH therapy services by the end of the reporting period
- C. Client has a closed case, having received 6 or more months of MH therapy

ⁱ ASQ is used to measure improvement in five developmental areas: Communication, Gross Motor, Fine Motor, Problem Solving or Personal Social. Each area has a cut off score.

ⁱⁱ PIR-GAS is used to measure the level of adaptation of the parent-child relationship on a scale from 99 to 0 based on the intensity, frequency, and duration of the disturbance. A score of 99 to 80 represents an adapted relationship, 79 to 40 represents a tendency toward a disordered relationship, and 39 to 0 represents a disordered relationship.

ⁱⁱⁱ PSI/SF: Improvement is defined by: 1) client moving out of clinically significant levels of stress score in one or more subcategory of three subcategories: Parental Distress (PD), Parent-Child Dysfunctional Interaction (P-CDI), Difficult Child (DC), or the overall Total Parenting Stress AND 2) reduction in client’s total parenting stress score by five or more points. The raw score cutoffs for each subcategory are as follows: PD-33 or above; P-CDI- 26 or above; DC-33 or above, Total Stress- 86 or above.