Data Mapping Worksheet: Pine County DSDS Case Study

What might this look like?

Pine County has been implementing Triple P for four years. After seeing disparities in population health outcomes, Pine County decided to collect and analyze additional data to see if disparities are present in their Triple P scale-up. In addition to data required for state monitoring, Pine County is interested in learning more about disparities in (1) their training outcomes, (2) Triple P service delivery outcomes, and (3) short-term outcomes.

Note that each measurement question is identified, a measurement plan outlined, and use for improvement planned.

# Data Mapping Worksheet: Recruitment and Selection

Pine County set goals to recruit practitioners for all levels of Triple P. They will be counting the number of practitioners recruited for each level of Triple P and tracking turnover and retention to understand selection outcomes. To understand the quality of recruitment and selection processes, they will also assess selection criteria.

# Data Mapping Worksheet: Training

Pine County set goals to train those recruited to deliver all levels of Triple P and are required to report training numbers to the state. They will be counting the number of practitioners trained, the level they are trained to deliver, and will request training data from Triple P America to understand training outcomes of accreditation and practitioner knowledge, skills, and abilities. To understand the quality of training, in particular whether training outcomes are different, Pine County is also collecting data to allow disaggregation of training data by practitioner characteristics (such as race, ethnicity, gender, language spoken). These data will help answer the question “are training outcomes the same for all practitioners?”

# Data Mapping Worksheet: Coaching

Pine County set goals to coach practitioners for all levels of Triple P. They will be counting the number of practitioners who participate in coaching and tracking improvements to practitioner knowledge, skills, and abilities. To understand the quality of coaching, they will also monitor adherence to the coaching plan.

# Data Mapping Worksheet: Fidelity

Pine County will be counting the number of fidelity assessments completed and looking to see if practitioners are delivering Triple P as intended. To understand the quality of this process, they will also determine whether observation data are included in fidelity assessments.

# Data Mapping Worksheet: Triple P Service Delivery

Pine County will be counting the number of caregivers served by level of Triple P, the number of children in caregivers’ families, use of Triple P Online, and client satisfaction; all data required by the state. As noted above, Pine County is also collecting data related to disparities in delivery, so outputs and outcomes will also be disaggregated by race/ethnicity and geographic location of caregivers.

# Data Mapping Worksheet: Triple P Short-term Outcomes

To understand the difference Triple P is making for families, Pine County is monitoring data collected from Triple P’s client satisfaction questionnaire (CSQ) and the parenting experience survey (PES). They are also examining child behavior outcomes from Triple P Level 4-5 delivery and will be assessing these data for disparities among caregiver and/or child characteristics. The state requires reporting of these data, but Pine County is also warehousing these data internally for assessment and data-driven decision making at the local level, as the state does not share back county-specific data reports.

# Data Mapping Worksheet: Triple P Long-term Outcomes

To better understand community needs, Pine County is monitoring data collected by the state on child maltreatment, out-of-home foster care placements, and child maltreatment injuries.

For additional ideas on measurement questions, data collection methods, tools, and sources, see the [NCIC-TP Local QOM Guidance Brief 2017](https://www.dropbox.com/s/23layacrpryw2oi/NCIC-TP%20Local%20QOM%20Guidance%20Brief_FINAL.pdf?dl=0) or the [Triple P Data Resources for Needs Assessment](https://www.dropbox.com/s/zs2fk4ugjaoccx1/Triple%20P-Related%20Data%20Sources-April%202020.docx?dl=0) developed by the Children & Youth Branch at the NC Department of Health and Human Services. The [Triple P Implementation Framework](https://www.triplep.net/glo-en/getting-started-with-triple-p/implementing-triple-p/implementation-framework/) is another source for additional measurement questions, especially related to quality of your implementation process. The Data Mapping Worksheet appendix has over 75 measurement questions including opportunities to examine equity in your implementation and service outcomes.

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| Data Mapping Worksheet: Pine County DSDS Case Study | | | | | | |
| **Recruitment & Selection** | | | | | | |
| **Data Type** | **Measurement question** | **Data point** | **Collection Method/Tool** | **Source** | **Frequency** | **Data use and improvement** |
| **OUTPUTS** | 1. **How many** practitioners are we recruiting and selecting? 2. What **level of Triple** **P** will these practitioners plan to deliver? | (1) # Triple P practitioners selected  (2) # Triple P practitioners selected **by levels** | Agency recruitment and selection records | Agency data, data | Monthly | Monthly data meeting |
| **OUTCOMES** | 1. Are we recruiting the right folks to be practitioners? | Practitioner turnover, retention | exit interviews, staff records | Agency data | Twice a  year | Quarterly strategic planning session |
| **QUALITY** | 1. Is selection criteria aligned with Triple P goals and principles? 2. Does selection process include observational assessments? | Selection process review and checklist | Agency records review | Agency data | Annually | Agency quality improvement review |
| **Training** | | | | | | |
| **OUTPUT** | 1. **How many** practitioners are we training? 2. What level of Triple P are practitioners trained to deliver? | 1. # Triple P practitioners accredited 2. # Triple P practitioners accredited **by levels** | Agency training records | Agency data, practitioner data | Quarterly | Quarterly strategic planning session |
| **OUTCOMES** | 1. Did practitioners complete training accreditation? 2. Did training increase the knowledge, skills, and abilities of practitioners? | 1. Certification from Triple P America 2. KSAs of practitioners in training | Training data from Triple P | Triple P training data sent to agencies | Twice a year | Quarterly strategic planning session |
| **QUALITY** | (5) Are training outcomes the same for all practitioners? | (5) Outcomes of training by practitioner demographics, zip code | demographics, zip code of practitioners from training records | Agency data | Annually | Quarterly coalition meeting |
| **Coaching** | | | | | | |
| **OUTPUTS** | 1. How many coaching activities have occurred? | # one on one coaching sessions, group coaching sessions and peer support sessions. | NC Triple P Monthly Staff Activity Report | Agency data | Monthly | Monthly data meeting |
| **OUTCOMES** | 1. Is coaching helping to develop the knowledge, skills, and abilities needed to effectively deliver Triple P? | Knowledge, skills, and abilities rating | Self-report on items assessed by Triple P in training | Agency data | Twice a year | Quarterly strategic planning session |
| **QUALITY** | 1. Are coaches following the coaching plan? | Adherence to frequency, and the format, methods, and expected outcomes of coaching | Coaching plan review | Agency data | Annually | Quarterly coalition meeting |
| **Fidelity** | | | | | | |
| **OUTPUTS** | 1. How many fidelity assessments are completed? | # fidelity assessments completed | Agency records | Agency data | Monthly | Monthly data meeting |
| **OUTCOMES** | 1. Have enough fidelity assessments been completed? | Progress on # fidelity assessments needed to measure if practitioners are delivering core components of Triple P as intended | Goals for # fidelity assessments | Agency data | Twice a year | Quarterly strategic planning session |
| **QUALITY** | 1. Do fidelity assessments include observation of practitioners’ abilities and other sources of information to assess Triple P delivery? | Fidelity assessment process | Fidelity assessment review | Agency data | Annually | Quarterly coalition meeting |
| **Triple P Service Delivery** | | | | | | |
| **SERVICE DELIVERY DATAA** | 1. How many caregivers have received Triple P? 2. How many children have been served by Triple P 3. How many caregivers have received each level of Triple P? 4. **Where** are these caregivers located across the region? 5. What are the **demographics** of caregivers receiving Triple P? 6. How many caregivers are using Triple P Online? 7. Are caregivers satisfied with Triple P interventions? 8. Are discussion and seminar participants satisfied with Triple P interventions? 9. Are caregivers satisfied by TPOL? | (1) # of caregivers served  (2) # of children served  (3) # caregivers served **by levels**  (4) zip code of caregiver location  (5) demographics of caregivers  (6) TPOL users  (7) CSQ1: Rating of quality, CSQ4: Come back to Triple P  (8) Seminar, discussion survey  (9) TPOL satisfaction survey | Caregiver contact records  Family background Questionnaire  Client satisfaction questionnaire (CSQ) | Agency data, practitioner data  CSQ: L2 Brief Primary Care, L3 Primary Care, L4, L5  Group CSQ: L2 Seminar, L3 Discussion  TPOL data | Quarterly  Twice a year | Quarterly coalition meeting |
| **EQUITY** | 1. Is there equitable access to Triple P services? 2. Is there equitable delivery for all caregivers? 3. Is there equitable quality for all caregivers? | (10) zip code of deliveries relative to population  (11) # deliveries by demographics relative to population  (12) CSQ data by demographics | (9) 5-yr ACS census data by zip code  (10-11) 5-yr ACS census data by race/ethnicity  Client satisfaction questionnaire (CSQ) | (9-11) ACS census data  CSQ | Annually | Annual meeting |
| **Short-term Outcomes** | | | | | | |
| **OUTCOMES** | 1. Is Triple P helping caregivers? 2. Is Triple P helping families? 3. Is Triple P helping children? | (1) CSQ2: Helped parents deal with child behavior; PES2a-e: Ratings of parenting experience, PES3: Parent confidence, PES4: Parenting support  (2) CSQ3: Helped parents deal with problems in family  (3) CSQ5: How is child’s behavior at this point; PES1: Rate difficulty of child’s behavior over last 6 weeks; Child Behavior pre/post measurement options | Client satisfaction questionnaire (CSQ)  Parenting Experience Survey (PES), the Parent Satisfaction Survey and Parenting Scale  Child Behavior: SDQ, ECBI, CBCL-Preschool, CBCL-16, or DBC | CSQ: L2 Brief Primary Care, L2 Seminar, L3 Primary Care  PES: L3 Primary Care , L4, L5  Child Behavior: Level 4/5 | Monthly | Annual meeting |
| **EQUITY** | 1. Are short-term outcomes equitable for all caregivers? 2. Are short-term outcomes equitable for all children? | Same as above, by demographics and zip code of caregivers, children (inc. age of child) | Family background questionnaire | Same as above | Twice a year | Annual meeting |
| **Long-term Outcomes** | | | | | | |
| **OUTCOMES** | 1. What is the scope of substantiated child maltreatment in our region? 2. What is the scope of child out-of-home placements in our region? 3. What is the scope of child maltreatment injuries in our region? | 1. Investigative reports of abuse and neglect 2. Number of children in custody 3. ICD-9/10 codes for child maltreatment injuries | (1) Archival data of substantiated child maltreatment reports  (2) Archival data of out of home foster care placements  (3) Archival data emergency room visits indicating child injury | (1-2) Publicly available data from NC FAST county-level data <http://ssw.unc.edu/ma/>  (3) Data request North Carolina Disease Event Tracking and Epidemiologic Collection Tool http://ncdetect.org | Annually | Annual meeting |