



West Virginia Purchasing Division

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The following documentation is an electronically-submitted vendor response to an advertised solicitation from the *West Virginia Purchasing Bulletin* within the Vendor Self-Service portal at ***wvOASIS.gov***. As part of the State of West Virginia's procurement process, and to maintain the transparency of the bid-opening process, this documentation submitted online is publicly posted by the West Virginia Purchasing Division at ***WVPurchasing.gov*** with any other vendor responses to this solicitation submitted to the Purchasing Division in hard copy format.

Header

List View

General Information | Contact | Default Values | Discount | Document Information

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Project: Third Party Evaluato

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Purchasing Division
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**State of West Virginia
 Solicitation Response**

Proc Folder : 98820

Solicitation Description : Addendum #1: Title IV-E Waiver Project: Third Party Evaluato

Proc Type : Central Master Agreement

Date issued	Solicitation Closes	Solicitation No	Version
	2015-05-27 13:30:00	SR 0511 ESR05201500000003931	1

VENDOR

VS0000005485

Westat Inc

FOR INFORMATION CONTACT THE BUYER

Robert Kilpatrick
 (304) 558-0067
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Signature X	FEIN #	DATE
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All offers subject to all terms and conditions contained in this solicitation

WPN 15-257 | Via wvOASIS.gov

RFP #

CRFP 0511 No. BCF1500000001

Title IV-E Waiver Project: Third-Party Evaluator

Part I: Technical Proposal



May 27, 2015

Submitted to:
State of West Virginia
Department of Administration
Purchasing Division
2019 Washington Street East
Charleston, WV 25305

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May 27, 2015

Robert Kilpatrick, Senior Buyer
State of West Virginia
Department of Administration
Purchasing Division
2019 Washington Street, East
Charleston, WV 25305

RE: Title IV-E Waiver Project: Third Party Evaluator, CRFP No. 0511 BCF1500000001
Westat Proposal Number 15-257

Dear Mr. Kilpatrick:

Westat is pleased to submit a proposal for the Title IV-E Waiver Project Evaluation. We propose a strong team of child welfare experts to lead the evaluation. Jane Mettenburg, proposed principal investigator, and Dr. Jaymie Lorthridge, proposed project director, would lead the research team.

Ms. Mettenburg is a Westat Senior Study Director with leadership roles on many national and local child welfare evaluations. Ms. Mettenburg is currently directing two Title IV-E waiver evaluations. For the Michigan IV-E Waiver Demonstration, "Protect MiFamily," Ms. Mettenburg directs all aspects of the evaluation of trauma-informed practice. She is also responsible for creating the analytical files and designing the outcome analyses for Phase III of Ohio's IV-E Waiver Evaluation. In addition to her waiver work, she directs data mining tasks and site-specific administrative data analysis for the Permanency Innovations Initiative (PII) Project. PII is a Presidential Initiative to reduce the number of youth in long-term foster care.

Dr. Jaymie Lorthridge is a Westat Senior Study Director with extensive experience in multisite research and evaluation of projects. Dr. Lorthridge currently oversees fidelity assessment for Protect MiFamily and serves as the Permanency Innovations Initiative evaluation site lead for the RISE grantee. As a site lead, she oversees the planning and implementation of a mixed-methods evaluation of RISE's intervention Care Coordination Team (CCT) services for youth in foster care in Los Angeles County. CCT services are delivered using a wraparound approach.

We look forward to your review of our proposal. If you have questions, please contact me at 301-294-2857 or at markfreedman@westat.com or Jane Mettenburg at 301-517-8012 or at janemettenburg@westat.com.

Sincerely,

A handwritten signature in black ink that reads "Mark Freedman". The signature is written in a cursive, flowing style.

Mark Freedman
Vice President

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Acknowledgement Addendum Form

ADDENDUM ACKNOWLEDGEMENT FORM
SOLICITATION NO.: BCF150000001

Instructions: Please acknowledge receipt of all addenda issued with this solicitation by completing this addendum acknowledgment form. Check the box next to each addendum received and sign below. Failure to acknowledge addenda may result in bid disqualification.

Acknowledgment: I hereby acknowledge receipt of the following addenda and have made the necessary revisions to my proposal, plans and/or specification, etc.

Addendum Numbers Received:

(Check the box next to each addendum received)

- | | |
|--|--|
| <input checked="" type="checkbox"/> Addendum No. 1 | <input type="checkbox"/> Addendum No. 6 |
| <input type="checkbox"/> Addendum No. 2 | <input type="checkbox"/> Addendum No. 7 |
| <input type="checkbox"/> Addendum No. 3 | <input type="checkbox"/> Addendum No. 8 |
| <input type="checkbox"/> Addendum No. 4 | <input type="checkbox"/> Addendum No. 9 |
| <input type="checkbox"/> Addendum No. 5 | <input type="checkbox"/> Addendum No. 10 |

I understand that failure to confirm the receipt of addenda may be cause for rejection of this bid. I further understand that any verbal representation made or assumed to be made during any oral discussion held between Vendor's representatives and any state personnel is not binding. Only the information issued in writing and added to the specifications by an official addendum is binding.

Westat, Inc.

Company

Mark Freedman

Authorized Signature

May 26, 2015

Date

NOTE: This addendum acknowledgment should be submitted with the bid to expedite document processing.
Revised 6/8/2012

Required Document

STATE OF WEST VIRGINIA
Purchasing Division

PURCHASING AFFIDAVIT

MANDATE: Under W. Va. Code §5A-3-10a, no contract or renewal of any contract may be awarded by the state or any of its political subdivisions to any vendor or prospective vendor when the vendor or prospective vendor or a related party to the vendor or prospective vendor is a debtor and: (1) the debt owed is an amount greater than one thousand dollars in the aggregate; or (2) the debtor is in employer default.

EXCEPTION: The prohibition listed above does not apply where a vendor has contested any tax administered pursuant to chapter eleven of the W. Va. Code, workers' compensation premium, permit fee or environmental fee or assessment and the matter has not become final or where the vendor has entered into a payment plan or agreement and the vendor is not in default of any of the provisions of such plan or agreement.

DEFINITIONS:

"Debt" means any assessment, premium, penalty, fine, tax or other amount of money owed to the state or any of its political subdivisions because of a judgment, fine, permit violation, license assessment, defaulted workers' compensation premium, penalty or other assessment presently delinquent or due and required to be paid to the state or any of its political subdivisions, including any interest or additional penalties accrued thereon.

"Employer default" means having an outstanding balance or liability to the old fund or to the uninsured employers' fund or being in policy default, as defined in W. Va. Code § 23-2c-2, failure to maintain mandatory workers' compensation coverage, or failure to fully meet its obligations as a workers' compensation self-insured employer. An employer is not in employer default if it has entered into a repayment agreement with the Insurance Commissioner and remains in compliance with the obligations under the repayment agreement.

"Related party" means a party, whether an individual, corporation, partnership, association, limited liability company or any other form or business association or other entity whatsoever, related to any vendor by blood, marriage, ownership or contract through which the party has a relationship of ownership or other interest with the vendor so that the party will actually or by effect receive or control a portion of the benefit, profit or other consideration from performance of a vendor contract with the party receiving an amount that meets or exceeds five percent of the total contract amount.

AFFIRMATION: By signing this form, the vendor's authorized signer affirms and acknowledges under penalty of law for false swearing (*W. Va. Code §61-5-3*) that neither vendor nor any related party owe a debt as defined above and that neither vendor nor any related party are in employer default as defined above, unless the debt or employer default is permitted under the exception above.

WITNESS THE FOLLOWING SIGNATURE:

Vendor's Name: Westat, Inc.

Authorized Signature: *E. Patricia Egan Engler* Date: May 26, 2015

State of Maryland

County of Montgomery, to-wit:

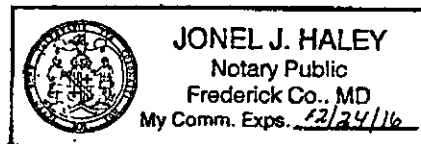
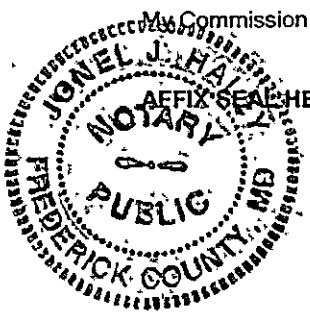
Taken, subscribed, and sworn to before me this 26 day of May, 2015.

My Commission expires 24 December, 2016.

AFFIX SEAL HERE

NOTARY PUBLIC

[Signature]
Purchasing Affidavit (Revised 07/01/2012)



Attachment A: Vendor Response Sheet

Attachment A: Vendor Response Sheet

Qualifications and Experience

- Q. Vendor should provide in Attachment A: Vendor Response Sheet information regarding their firm, such as staff qualifications and experience in completing similar projects; references; copies of any staff certifications or degrees applicable to this project; a proposed staffing plan; descriptions of past projects completed entailing the location of the project, project manager name and contact information, type of project, and what the project goals and objectives were and how they were met. Vendor should:**
- a. Provide a brief summary of any knowledge and skills you may have related to the DHHR Bureau for Children and Families Statewide Automated Child Welfare Information System (SACWIS), Family and Children's Tracking System (FACTS).**
 - b. Provide a brief summary of any knowledge and skills you may have related to SACWIS systems in other states.**
 - c. Provide a brief statement related to any IV-E Federal waiver evaluation that the proposer has developed within the last ten (10) years providing information related to the specific waiver.**
 - d. Provide an official statement from an entity or state for whom you have performed work either as a consultant and/or partner in the design and implementation of a Federal IV-E Waiver evaluation for a child welfare program.**

About Westat

Westat is a state-of-the-art research corporation known for the quality of its professional staff in a broad range of research areas, including statistical design, survey research, and program evaluation. Westat has an established reputation for performing successful research studies in a wide range of programs and subject areas such as: child welfare and other social services, criminal and juvenile justice, substance abuse, human services, health, housing, and, education. Since 1963, Westat has grown steadily by serving Federal and local government agencies, private businesses, and other clients. A key element of Westat's success is our commitment to serving clients through exceptional project performance. Another factor in our growth has been our broadly distributed form of

employee ownership; employees realize that their efforts and commitment can make a difference in the value of their company.

Description of Westat's Structure

Westat's headquarters is located in Rockville, Maryland, in the Washington, DC, metropolitan area. We also maintain research offices near our clients in Bethesda, Maryland; Atlanta, Georgia; Cambridge, Massachusetts; Durham, North Carolina; Philadelphia, Pennsylvania; and Houston, Texas. In addition, we have international offices in Beijing, China; Liberia, Costa Rica; Addis Ababa, Ethiopia; New Delhi, India; Johannesburg, South Africa; and Bangkok, Thailand.

Our headquarters and associated offices accommodate our professional and administrative staff, our computer technology and information processing facilities, our survey processing staff, the centralized direction of our network of Telephone Research Centers, and the management of our nationwide field interviewing and data collection resources. Westat's headquarters also provides the support facilities needed to conduct efficient research operations: a technical information library, editorial and graphics departments, a conference and training facility, a secure records storage facility, and reproduction and microfilming departments.

Overall professional, technical, and operational guidance for Westat's project activities is provided by the directors of our study areas, who may act as project directors or as Corporate Officers supervising project directors. Although Westat study groups have expertise in specific subjects and methodologies, we remain a project-oriented organization with the flexibility to assemble staff from various study groups to meet the needs of individual projects.

Westat offers a research, technical, and administrative staff of more than 2,000 with the technical and management skills to design and direct large-scale research and to provide the personal client services needed for projects of all sizes. In addition, 1,100 additional staff are engaged in data collection and processing at Westat's survey processing facilities, at our Telephone Research Center (TRC) facilities, and throughout our nationwide field data collection operations. The following are some highlights of our research staff skills:

- A strong group of senior social science professionals—including sociologists, statisticians, psychologists, and economists—with extensive training and experience in the specific subject matter of many Government research program areas;

- Senior statisticians with international reputations in survey sample design and statistical analysis;
- Senior staff with experience in social program evaluation and in specific research fields such as educational assessment, clinical trials, and epidemiologic research;
- Experienced computer systems and information technology professionals who know how to meet the special needs and systems requirements of our project work;
- Teams that provide specialized technical assistance or services, such as medical and dental examinations or occupational exposure assessments, to meet specific study requirements; and
- Experienced consultants who provide technical and programmatic guidance to our staff and participate directly on project teams.

Westat's Child, Youth, and Family Research (CYFR) Area

Central to Westat's success is the group of staff that focus on research pertaining to children and families. Westat's Child, Youth, and Family Research (CYFR) Area consists of experts in the fields of child abuse and neglect, foster care, permanency and reunification, guardianship and kinship care who routinely apply their knowledge to high-impact child welfare research and evaluation studies. In addition, CYFR staff have expertise in criminal and juvenile justice topics such as, offender programs and services, court processes, and victims. CYFR staff also perform analyses using multidimensional surveys and complex administrative data sets, separately and combined, for the purpose of informing programs and policy. CYFR staff have extensive experience with the Federal IV-E Waiver process, and will assist the Bureau for Children and Families (BCF) in complying with the mandates as defined in the Terms and Conditions of the waiver.

A(a). Vendor Response to Q(a):

Knowledge and Skills Related to SACWIS and FACTS

Information on families served by the West Virginia DHHR is collected and stored in the Family and Children's Tracking System (FACTS), a statewide automated child welfare information System (SACWIS). FACTS was implemented statewide in 1997 with the goal of facilitating program planning and compliance, facilitate state and federal reporting and financial accounting. The FACTS case management system enables DHHR to track families served by DHHR, including family background information, service activities, and family progress toward their case plan goals.

Information generated from FACTS reflects a high degree of accuracy with the caveat that children discharged at the end of a month and interstate child placements (children returning to WV or entering an out-of-state facility) may not be captured in the same month as the occurrence.

The result of a collaboration between state providers and DHHR, FACTS incorporates the Automated Placement Referral (APR) system. The APR system captures in-state child referrals to group residential care facilities and psychiatric residential treatment facilities. All DHHR staff are required to make referrals through the system (FACTS Plus) and all providers are required to respond to referrals electronically, thus ensuring that interactions between both parties are tracked. Another unique feature of FACTS is that it has Adult Protective Services, Adult Residential Services, and Child Care Program data incorporated into the system.

While Westat cannot claim any hands-on experience with FACTS, we have extensive experience in using data from SACWIS and SACWIS-like systems from Arizona, California, Illinois, Kansas, Louisiana, Maryland, Massachusetts, Michigan, Nevada, New Jersey, New York, Ohio, Tennessee, Texas, Virginia, and the District of Columbia. We describe our experience with these systems in more detail in the sections that follows.

A(b). Vendor Response to Q(b):

Experience Using Data from SACWIS and SACWIS-like Systems in Other States

Our evaluation team has extensive experience working with SACWIS and similar child welfare systems in other states, at both the state and county levels. Westat has used these data systems to determine eligibility for interventions, to assign cases for random controlled trials (RCTs) and to develop analytical files to evaluate outcome measures. We highlight some of our key experiences with these systems below:

- In a few **Title IV-E waiver evaluations**, Westat used SACWIS, along with agency fiscal data, as the basis for building assumptions around unit cost. In Illinois and Wisconsin, SACWIS data were used by Westat to determine the impact of the intervention on key proximal and distal outcomes. We are currently using SACWIS data to analyze outcomes for the Michigan and Ohio waiver evaluations.
- For the **Evaluation of Colorado Differential Response Study**, Westat used SACWIS measures to operationalize fidelity measures. For example, we checked SACWIS to see that a caseworker visited a family and how many times.

- For the **Permanency Innovations Initiative**, Westat used SACWIS or SACWIS-like data systems for each of the six PII grantees (Arizona, California, Illinois, and Kansas; City of Los Angeles; and Washoe County, Nevada) to conduct data mining to identify or, in some cases, confirm, intervention target populations. In addition, we assisted Washoe County, Nevada with the development of a statistical analysis system (SAS) random assignment algorithm to build into their state's SACWIS system. We also plan to examine safety and permanency outcomes using SACWIS systems for each of the grantees.
- For the **Fourth National Incidence Study on Child Abuse and Neglect (NIS-4)**, Westat used SACWIS or SACWIS-like data files from 35 states and the District of Columbia on maltreatment reports and investigations for evaluative coding to study definitions and for computing the national child abuse and neglect incidence rates.
- For the **Arizona Families F.I.R.S.T Substance Abuse Treatment Evaluation**, Westat used child welfare, TANF/JOBES, and Medicaid data in the evaluation of Arizona Families F.I.R.S.T program. Westat also developed an evaluation database system and conducted the client satisfaction survey. Westat staff identified the data elements to be included; built and maintained the system (forms, tables, queries, reports, and macros); and obtained comparable data across nine program sites and from state agency databases.

A(c). Vendor Response to Q(c):

Experience with Title IV-E Waiver Projects

Westat is proud of the role it has played in seven Title IV-E waiver demonstrations in six different states: Illinois, Tennessee, Wisconsin, Ohio, Massachusetts, and Michigan.

- In the **Evaluation of the Illinois Subsidized Guardianship Waiver Demonstration**, 6,800 children in three state regions were randomly assigned to either the demonstration group (eligible for subsidized guardianship) or control group (not eligible for subsidized guardianship) to assess the impact of offering subsidized guardianship on permanency. This longitudinal study of status and outcomes of the children and families included collecting data at two points of service delivery: a baseline interview for information about the children and families at the time of enrollment, and a follow-up interview in spring 2001. Interviews were conducted with caregivers and children older than age 8. A process evaluation described the implementation of guardianship and the context in which it operates.
- For the **Illinois Permanency for Older Wards Waiver Study**, nearly 3,000 youth (age 14+) were randomly assigned to the demonstration group (eligible for enhanced transition services) or control group (not eligible for enhanced services). Westat collected and analyzed administrative data, interviewed youth and their caregivers,

conducted focus groups with agency and court personnel, and collected additional information from the administrative case review (ACR) process.

- For the **Assessment and Evaluation of the Tennessee Subsidized Guardianship Waiver Demonstration**, 1,122 children were randomly assigned to the demonstration group (eligible for subsidized guardianship) or control group (not eligible for subsidized guardianship). As a subcontractor to the Children and Family Research Center at the University of Illinois, Urbana-Champaign (UIUC), Westat was responsible for randomly assigning foster care children to treatment groups (eligible for subsidized guardianship) and control groups (not eligible for subsidized guardianship) and for conducting telephone interviews with approximately 1,500 caregivers about the factors influencing their decisions about different permanence options.
- The **Wisconsin Subsidized Guardianship Waiver Evaluation** included 209 children in long-term relative foster care (not randomly assigned) and 320 children, most in relative foster care (randomly assigned to eligibility or no eligibility for subsidized guardianship). Westat worked with two subcontractors—the Children and Family Research Center, University of Illinois, and the Institute for Research on Poverty, the University of Wisconsin—to evaluate the Wisconsin Subsidized Guardianship Initiative. Caregivers were interviewed at the time of enrollment to obtain information about demographics, case history characteristics, household composition, social integration, services received, role of biological parents, legal and other issues, attachment status, and attitudes toward subsidized guardianship and the placement in general. Administrative data were also collected on outcomes, case history characteristics, and case planning.
- For **Ohio’s Title IV-E Waiver Demonstration-Phase II (ProtectOhio 5)** placement outcomes analysis, Westat is estimating the impact of the waiver relative to the pre-waiver period using stratified competing-risks Cox proportional odds hazards models and counterfactual imputation. This methodology adjusts comparisons between waiver and non-waiver counties for differences in case mix. Survival analysis is being used to model time-to-event data. Survival analysis in this case is used to examine how placement duration and relative frequencies by exit type change during the waiver period in the demonstration counties as compared to those same measures in the comparison counties, controlling for as many confounding factors as possible.
- As a subcontractor, Westat is conducting participant outcome analyses for the **Evaluation of the Commonwealth of Massachusetts Title IV-E Waiver Demonstration** to test the hypothesis that a redesigned congregate care system, Caring Together, will produce more desirable outcomes for children, young adults and families than the prewaiver residential treatment services. Using administrative data, Westat will use “distance matching” to match Caring Together children with pre-waiver children, and then conduct regression analyses and survival analyses to examine outcomes. The results will be used to understand whether or not the Title IV-E Waiver, implementing Caring Together, was effective in producing more desirable outcomes.
- In one of our most recent collaborations, Westat is leading, in partnership with the University of Michigan School of Social Work, the evaluation of Michigan’s **“Protect**

MiFamily” Title IV-E Child Welfare Waiver Demonstration. Protect MiFamily seeks to enhance the safety and explicitly improve the well-being of children and families by providing an innovative array of prevention services to families with young children who are at high or intensive risk for maltreatment as determined by child protective services (CPS). The evaluation methodology is designed to test the overarching hypothesis that connecting families with well-targeted and effective services (i.e., evidence-based services that reflect family needs and strengths) will improve family functioning, decrease the risk of subsequent maltreatment and prevent the placement of children in foster care. The evaluation relies on several evaluation and research methodologies: random assignment to treatment and control services; process evaluation; model fidelity assessment; outcome analysis using primary and administrative data; and cost analysis. Throughout the waiver period, Westat has worked with Michigan’s Department of Human Services, the private service providers, and the Demonstration’s Steering Committee to continually monitor performance targets and implement continuous improvement strategies.

Experience Conducting Non-IV-E Research and Evaluations

Westat is a nationally acknowledged leader in the area of child welfare program evaluation and has successfully conducted several complex, high-profile, and benchmark national studies. For example, Westat conducted the **Fourth National Incidence Study of Child Abuse and Neglect (NIS-4)** to capture the total number of children who were abused or neglected in the United States during the study year (2005 to 2006) and to indicate the degree to which this number had changed since the earlier incidence studies: NIS-1 (1979), NIS-2 (1986), and NIS-3 (1993). The NIS-4 effort included several additional tasks to enhance the quality and/or interpretability of the NIS findings, including (1) two surveys of CPS agencies: one on overall policies, procedures, and practices and the other on screening standards to determine how referrals would be treated concerning uninvestigated cases identified by sentinels and (2) a survey of professionals (“sentinels”) community agencies who regularly had contact with children and families on their definitions of child abuse and neglect.

In partnership with the Social Work Research Center in the School of Social Work at Colorado State University, Westat recently conducted the **Evaluation of the Colorado Consortium on Differential Response**. Differential response (DR) is a system reform that allows child protective services (CPS) to address screened-in allegations of child maltreatment in different ways. Eligible families from five Colorado counties were randomly assigned to either a family assessment response or an investigation response. The evaluation involved an outcomes, process, and cost-study components. Westat’s role on the evaluation included Family Exit Survey data collection; developing the data analysis plan; cleaning, weighting, and analyzing survey and administrative data for the process and outcomes evaluation; co-writing the interim and final reports; co-writing an article on

the findings (that was published in the journal on *Child Abuse and Neglect*), and presenting findings at several national conferences.

Highlighted Past Projects and Corporate References

We provide a discussion of four evaluation projects, including type of project, location, project goals and how these goals were/are being met successfully. References (project manager name, email address and phone numbers for the customer organization) are also included for these projects.

Evaluation of the Michigan’s Title IV-E Waiver Demonstration “Protect MiFamily” Michigan Department of Human Services 2013 to Present

Summary: Protect MiFamily seeks to enhance the safety and explicitly improve the well-being of children and families by providing an innovative array of prevention services to families with young children (ages 0 to 5) who are at high or intensive risk for maltreatment as determined by child protective services (CPS). The Michigan Department of Human Services (DHS) currently offers prevention programs and family preservation services, but none contain the combination of evidence-based interventions or resemble the characteristics of those services proposed in the waiver demonstration project. DHS has contracted with private agencies in three demonstration sites (Kalamazoo, Macomb, and Muskegon counties) to coordinate strength-based, trauma-informed services and engage with families in their own homes to prevent maltreatment and the need for removal.

Project Goal: The goal of the Michigan IV-E Waiver demonstration project is to test the hypothesis that an array of intensive and innovative home-based family preservation services tailored to the needs of individual families will (1) prevent the incidence and recurrence of maltreatment; (2) reduce the number of children who enter out-of-home placement; (3) improve child safety and family well-being; and (4) be cost-effective and cost-neutral. Michigan has contracted with Westat and the University of Michigan to carry out a rigorous evaluation to examine this goal.

The evaluation methodology is designed to test the overarching hypothesis that connecting families with well-targeted and effective services (i.e., evidence-based services that reflect family needs and

strengths) will improve family functioning, decrease the risk of subsequent maltreatment and prevent the placement of children in foster care. The evaluation team participates in an Evaluation Steering Committee, meets routinely with the participating County representatives, and Michigan DHS waiver project staff to discuss the progress of the evaluation.

How We Are Meeting the Project Goal: The evaluation relies on several evaluation and research methodologies that are described here.

- **Random Assignment to Treatment Services and “Services As Usual”**– A Westat statistician provided programming code for, and reviewed the development and programming of, the randomizer for the evaluation. We continue to monitor the probability ratios for random assignment to ensure that the proportion of cases in each assignment category remains consistent with the target probabilities (2 to 1 ratio).
- **Client Consent Procedures** – The evaluation team developed a client consent form, consent administration procedures, and lead initial and refresher trainings with waiver staff as well child protection staff on the administration of the consent with clients.
- **Process Evaluation** – The evaluation team has taken a collaborative approach in the conduct of the process evaluation, enlisting the input of DHS representatives, private service providers, and other key stakeholders in the development of a comprehensive data collection plan. The proposed evaluators developed interview and focus group guides, conducted site visits to capture information about facilitators and perceived barriers to implementation, as well as insights into the types of people we would interview. A self-administered family satisfaction survey, to be completed at different phases of service delivery, was designed by the evaluation team, together with procedures for receiving of these surveys from clients and waiver agencies. In addition, agency documentation is collected by the study team, and service data on both treatment and control group families are received. Through collaboration with DHS, a fidelity assessment tool was developed, as well as a quarterly analysis process for using the tool.
- **Outcome Evaluation** – Through a variety of data sources, the evaluation team ensures the study addresses the research hypotheses of the study. The evaluation team receives, reviews, tracks, and monitors the data quality of assessment and survey data completed as part of waiver services. In addition to the monthly compiled sample files, the evaluation team receives and processes primary data gathered through the Protect MiFamily database, the electronic Devereux Early Childhood Assessment (e-DECA) database, and the Protective Factors Survey (PFS) database files. It also acts as the administrator for e-DECA and the PFS. Our partner, the University of Michigan, receives Michigan’s State Automated Child Welfare Information System (MiSACWIS) data and provides analysis of the child maltreatment and foster care outcomes for this study. Together, the study team provides an on-going data support relationship with the data entry specialists and DHS, and convenes meetings with DHS Protect MiFamily central office staff to resolve ongoing data quality issues.

- **Reporting** – To meet the state and federal mandated reporting requirements for the waiver demonstration, the evaluation team prepares all evaluation sections of the Protect MiFamily Waiver Demonstration’s quarterly progress reports, semi-annual and annual reports to the Michigan DHS. The first semi-annual report for this project was praised by the Children’s Bureau Federal project officer for Title IV-E Wavier Demonstrations as being so thorough and well written that she encouraged other IV-E waiver sites to use it as a model for writing their reports.
- **Cost Analysis** – To examine comparative costs between experimental and control groups, the evaluation team receives reports on provider expenditures for direct, indirect, and concrete services, and mileage from DHS Protect MiFamily central office staff; Control Group Expenditure Tracking data and the cost neutrality formula from the central office staff.

Project Point of Contact:

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**Evaluation of Ohio’s Title IV-E Demonstration—Phase III (ProtectOhio 5)
Ohio Department of Job and Family Services (ODJFS)
1998 to Present**

Summary: For the Evaluation of Ohio’s Title IV-E Waiver Demonstration Project “ProtectOhio,” Westat worked with other research companies to determine whether alternative approaches to managing care increased the efficiency and effectiveness of Ohio’s child welfare system. Westat has worked on the Ohio waiver since 1998. Under a previous contract, the evaluation involved the investigation of the impact of new waiver services including family visitation, family team conferencing, and enhanced kinship services, for which Westat prepared the analytic files. Fourteen counties in Ohio received funds for new model services; an additional 14 counties served as controls.

Under the current 5-year contract, Westat, as a subcontractor to the Human Services Research Institute (HSRI), is conducting participant outcomes analysis to examine the impact of two waiver services: family team conferencing and enhanced kinship services. In Phase III, the 17 waiver counties are concentrating on standardized policy and program models in Family Team Conferences and Enhanced Kinship Care.

Project Goals: The goals of the Evaluation of Ohio’s Phase III Title IV-E Waiver Demonstration are to determine the impact of waiver services and to work with the “ProtectOhio” Consortium of counties in the continuous improvement of waiver services and a standard model of delivery of those services.

How We Met/Are Meeting the Project Goals: Under the previous contract, one of Westat’s roles was to evaluate the participant outcomes for the demonstration using data from Ohio’s SACWIS as well as county-level data systems. We examined whether demonstration area children experienced fewer out-of-home placements, whether there was an increase in recidivism of placements, and whether there was an increase in abuse or neglect. Westat also conducted a paper-and-pencil survey with 1,400 caseworkers to collect information about one randomly selected child in each caseload. The survey collected service and case information about each child and family, as well as demographic, attitudinal, and background information about each caseworker. Westat developed and maintained a database for administrative data collected over a 5-year period and a database for interview data collected in year 4 of the demonstration. Westat used Ohio SACWIS data in conducting a participant outcomes analysis to investigate the impact of the waiver. Analysts use stratified competing-risks Cox proportional odds hazards models and counterfactual imputation

methodologies to examine foster care length of stay. For a final report in 2003, Westat also conducted additional analysis to identify the reasons why children were being served, such as child maltreatment, child delinquency, or unruliness.

Under the current contract, Westat is responsible for the administrative data from the Ohio SACWIS used in analyses for the “ProtectOhio” Title IV-E Waiver Evaluation. Westat organized the “ProtectOhio” Data Workgroup to help the evaluation team better understand the data in SACWIS and to assist state SACWIS staff in developing specifications for new data elements required in SACWIS for the waiver strategies. The workgroup is composed of evaluation team members, county staff that work with data on a daily basis, and Office of Information Technology (OIT) staff who are familiar with the data needs of the waiver evaluation. Additional state and county staff are brought into the workgroup as appropriate for their expertise to address particular data needs for the waiver strategies. This work benefits not only the evaluation team but also the counties and the Ohio Department of Job and Family Services in understanding the data used in outcome measure development, analysis, and monitoring. This ongoing data workgroup examines the local use of statewide data, enabling comparative analysis of longitudinal records.

Westat captures and conducts secondary analysis of administrative data for 17 participating and 17 comparison counties on an annual basis. In Phase III, the 17 waiver counties are concentrating on standardized policy and program models in Family Team Conferences and Enhanced Kinship Care. Ohio is a county-administered state and, therefore, variances in service delivery models persist and must be taken into consideration in performing the evaluation analyses. Analysts use stratified competing-risks Cox proportional odds hazards models and counterfactual imputation methodologies to examine foster care length of stay, as well as trajectory analysis to examine service pathways.

Project Point of Contact:

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**Evaluation of the Permanency Innovations Initiative (PII)
Administration for Children and Families
U.S. Department of Health and Human Services
2011 to Present**

Summary: The Permanency Innovations Initiative (PII) is a multisite federal demonstration project designed to improve permanency outcomes among foster care children who have the most serious barriers to permanency. This 5-year, \$100 million initiative includes six grantees, each with a unique intervention designed to help a specific subgroup of children leave foster care in fewer than 3 years. PII objectives include the following:

- Implementing innovative intervention strategies, informed by the literature, to reduce long-term foster care stays and improve child outcomes;
- Using an implementation science framework enhanced by child welfare expertise to guide technical assistance activities;
- Rigorously evaluating these efforts to inform the child welfare field about efficacious programs, interventions, and practices that reduce long-term foster care; and,
- Building an evidence base and disseminating findings to build knowledge in the child welfare field.

Target populations in the PII project are (1) disproportionately represented children and youth of Native American and African American descent; (2) lesbian, gay, bisexual, transgender, and questioning (LGBTQ) youth and children; (3) children with serious emotional disturbances or mental health issues and/or challenges with placement instability; and (4) youth in foster care who have been in care for 2 years and have had either multiple moves or current mental health or trauma-related symptoms.

Westat and its subcontractors—James Bell Associates, the University of North Carolina at Chapel Hill, AndyB.org, Inc., and Ronna Cook Associates—are conducting rigorous cross-site and site-specific evaluations to examine the implementation and effectiveness of the PII project. The cross-site evaluation involves a cost study, a process/implementation study, and an administrative data study.

Project Goal: The overall goal of the project is to design and carry out rigorous site-specific and cross-site evaluations of the technical assistance models, implementation processes, contexts in which they are being carried out, cost implications, and effectiveness of the interventions in

achieving desired permanency and well-being outcomes. This goal is being achieved through two primary evaluation stages:

- Formative evaluation, which is the process of monitoring the relationships between program outputs and the achievement of key intended proximal (intermediate) outcomes. This evaluation phase tests whether grantee activities are associated with the expected outcomes of the project.
- Summative evaluation, a rigorous evaluation of the summary impact and casual efficacy and effectiveness of the intervention. This is the point at which the project determines whether the remaining proximal and distal (long-term) outcomes were achieved and the extent to which the changes can be attributed to the intervention.

How We Met/Are Meeting the Project Goal: Initial development of the cross-site and site-specific evaluation plans was performed by the evaluation team under a prior contract (Planning and Design Options for the Evaluation of the Long-Term Foster Care Initiative). Westat and its subcontractors coordinated with the grantees, local key stakeholders, and the Federal Technical Assistance contractor to formulate site-specific evaluation plans, which included identifying their target populations, interventions, comparison groups, and outcome measures and conducting evaluability assessments of these plans. The framework for this work, known as the PICO (population, intervention, comparison, and outcome) approach, has been adopted by the federal government for use with grantees, including Waiver Demonstration awardees. Under the previous contract, the evaluation activities included the following:

- Developing a knowledge base about and assessing the evaluability of each grantee;
- Engaging all the grantees in evaluation planning (including convening a grantee meeting on the evaluation and supporting site-specific development of management information systems);
- Establishing and working with an expert consultant group;
- Developing site-specific evaluation plans and resource estimates;
- Selecting baseline measures and identifying benchmarks for achieving goals;
- Producing a cross-site evaluation plan;
- Developing and pilot testing evaluation instruments;
- Producing Office of Management and Budget (OMB) clearance materials and securing institutional review board (IRB) approvals;

- Providing payments to grantees to offset some evaluation costs; and
- Delivering reports and briefings.

Under the current contract, Westat is implementing the site-specific and cross-site evaluations by performing the following activities:

- Providing evaluation support to all six grantees, including site visits as needed;
- Refining data collection instruments and procedures;
- Conducting primary data collection from families, service providers and other key stakeholders and data collector training;
- Collecting outcome and demographic data from different administrative data systems (e.g., SACWIS, AFCARS, and NCANDS);
- Analyzing and reporting on evaluation data;
- Convening annual meetings of evaluation liaisons from all grantees;
- Conducting an annual review of grantee benchmark data;
- Conducting a cross-site implementation study (including an organizational readiness survey, implementation case studies, an implementation driver assessment survey, and an implementation quotient tracker) and analysis of administrative data;
- Conducting a cross-site cost study (including the collection of financial reports and the collection of staff time associated with treatment activities using staff focus groups and web-based activity logs);
- Producing OMB clearance materials and securing IRB approvals; and
- Disseminating outcomes and lessons learned to policymakers, practitioners, and researchers concerned with permanency outcomes for children in long-term foster care.

One example of a PII grantee is the state of Illinois. Westat is leading a statewide evaluation of a trauma-focused model in Illinois to improve permanency outcomes for youth with placement instability and/or mental health symptoms. The intervention, Trauma Affect Regulation: Guide for Education and Therapy (TARGET), intends to address three key barriers to permanence for foster children, including (1) children's need to improve emotional regulation and reduce symptom severity, particularly disruptive behaviors; (2) biological parents' skills in regulating their emotions so they are better able to complete services and address the underlying issues related to their involvement in the child welfare system; and (3) foster parents skills in understanding and addressing the needs and disruptive behaviors of the children in their care with trauma histories. Westat

worked closely with project staff and community stakeholders to design an experimental evaluation of TARGET and identify appropriate trauma-related measures to examine the impact of the intervention on client functioning, such as the Trauma Symptoms Checklist for Children (TSCC), the Abbreviated Dysregulation Inventory (ADI), and the Child and Adolescent Needs and Strengths (CANS) database, and child welfare outcomes. Westat is currently collecting administrative data on key distal outcomes and leading the collection of primary data on proximal outcomes from youth and their biological and foster parents.

Project Point of Contact:

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**Wisconsin Subsidized Guardianship Waiver Evaluation
Wisconsin Department of Children and Families
2005 to 2010**

Summary: Under contract to the Division of Children and Family Services (DCFS), Wisconsin Department of Health and Family Services, Westat worked with two subcontractors—the Children and Family Research Center, University of Illinois, and the Institute for Research on Poverty, the University of Wisconsin—to evaluate the Wisconsin Subsidized Guardianship Initiative. The goal of the Initiative was to improve permanency outcomes for children and families. Under current Title IV-E regulations, relatives who are licensed as foster care providers for their kin can receive foster care payments and support from DCFS. In addition, the providers can receive an adoption subsidy if they adopt their kin but not if they assume guardianship. Under Title IV-E Waiver authority, the state used Federal funds to test whether the introduction of a subsidized guardianship benefit would result in an increase of permanence for children and an improvement in child outcomes. The evaluation was a longitudinal study of the status and outcomes of the children and families. The study included a treatment group (eligible for subsidized guardianship) and a control group (not eligible for subsidized guardianship). This study involved three components: (1) an outcome evaluation to estimate the impact of the subsidized guardianship option on permanency, safety, stability, and child well-being; (2) a process evaluation to understand the context in which outcomes

exist; and (3) a cost analysis to estimate the overall savings accrued by the subsidized guardianship option.

Project Goal: The goal of the evaluation was to examine the effectiveness of the Initiative in improving permanency outcomes for children in out-of-home care, describe the implementation of the Initiative, and assess the overall savings of the subsidized guardianship option.

How We Met the Project Goal: Westat lead the administrative data work and caregiver interviews. Caregivers were interviewed at the time of enrollment to obtain information about demographics, case history characteristics, household composition, social integration, services received, role of biological parents, legal and other issues, attachment status, and attitudes toward subsidized guardianship and the placement in general. Administrative data were also collected on child welfare outcomes, case history characteristics, and case planning. Westat contributed to the development of deliverables including interim and final reports of the findings from the outcome evaluation. The results were used to develop state policy on subsidized guardianship.

Project Point of Contact:

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A(d). Vendor Response to Q(d):

Official Recommendation Statement from Client

The Michigan Department of Human Services has provided an official statement about our work on Michigan's Protect MiFamily Title IV-E Waiver Demonstration project, which is provided on the next page as Exhibit 1.

Exhibit 1. Official recommendation statement



RICK SNYDER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF HEALTH AND HUMAN SERVICES
LANSING

NICK LYON
DIRECTOR

May 18, 2105

Michigan Department of Health and Human Services
Children's Services Agency
235 S. Grand Avenue
Lansing, MI 48933

West Virginia Department of Administration
Purchasing Division
2019 Washington Street East
Post Office Box 50130
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To Whom It May Concern:

The Michigan Department of Health and Human Services is pleased to write a recommendation for Westat as an evaluator of Michigan's Federal IVE waiver project. Michigan's demonstration project, called Protect MiFamily, operates in three counties, and consists of prevention, preservation, and support services provided to families with at least one household child under six-years-old, determined by Children's Protective Services (CPS) to be at high or intensive risk for maltreatment. By design, the Protect MiFamily project model allows flexibility in the type and intensity of direct worker interventions and community services provided to each family. When appropriate, evidence-based service utilization is prioritized.

DHHS contracted with Westat to carry out a rigorous evaluation of Michigan's demonstration project. The evaluation team's activities involve developing the evaluation plan and methodology and performing the evaluation. The evaluation includes random assignment, statistical measurements, and outcome analysis methodologies designed to evaluate the demonstration's success on established outcomes. The team leads the process and outcome evaluations, collects primary and administrative data, provides outcome measurement and analysis, performs cost-benefit and cost-effectiveness analysis, and prepares necessary reports.

After 20 months of working with Westat, DHHS could not be more pleased with the result. We have found Westat to be more than competent in their approach and implementation of the Evaluation Plan. Westat adheres to timelines and provides information timely. The Westat staff is very dedicated to the project. They have been a true joy to work with and have become real partners with DHHS and our service contractors on many aspects of the project. Their willingness to participate in a variety of meetings and calls addressing data, model fidelity, etc. is exemplary. Westat's technical assistance to central office staff and the involved sites is extremely helpful. They make themselves available to problem-solve and offer objective and experienced advice as the project is implemented.

Protect MiFamily is making a difference in the lives of many families. Westat shares responsibility with DHHS for each success. Westat guides all aspects of our project with their expertise in providing technical assistance on the intervention and evaluation and in addressing both known and unforeseen issues. Westat's expertise in monitoring implementation of Protect MiFamily contributes to its success. Michigan DHHS highly recommends Westat as an evaluator for a Federal IVE waiver project. If you have any questions, please contact me at Chalimanm2@michigan.gov.

Sincerely,

Mary Chaliman
Protect MiFamily Project Manager

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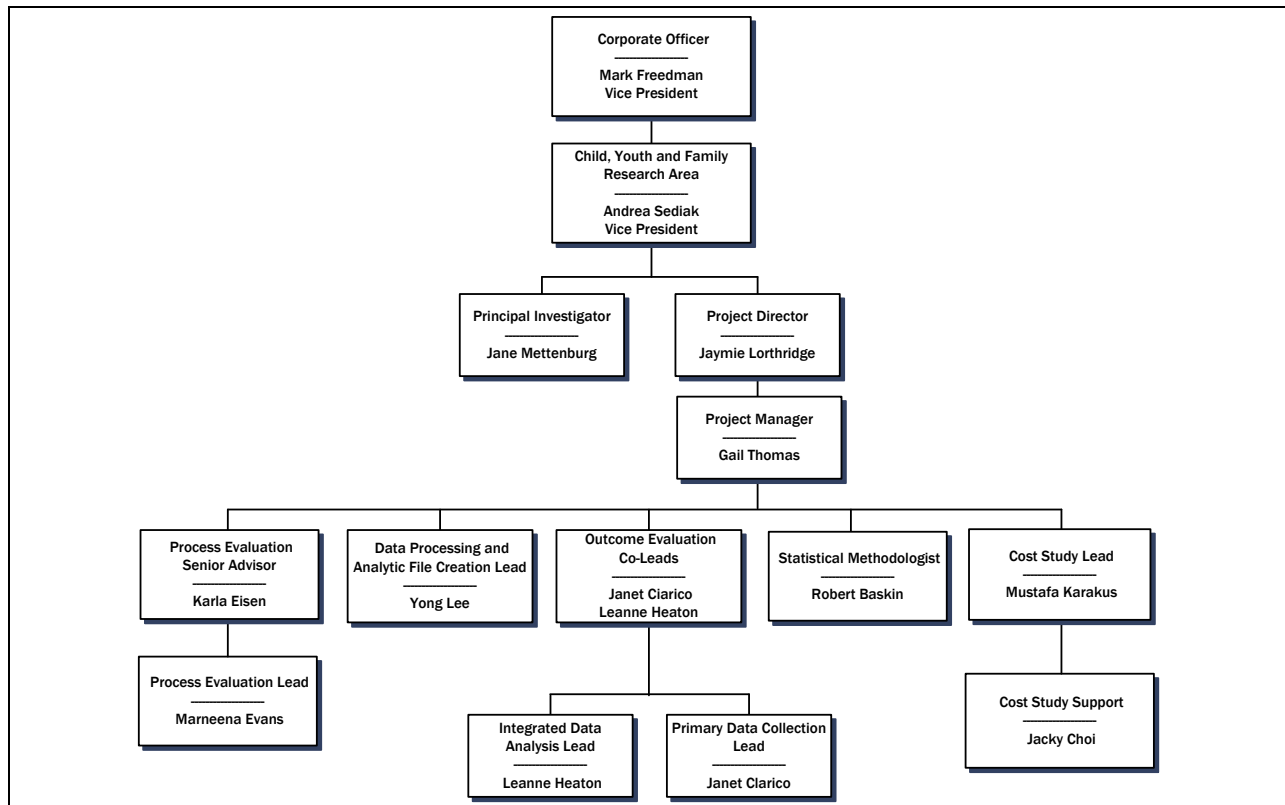
A(e). Vendor Response to Request for a Staff Planning:

Proposed Staffing Plan

Below is a summary of key personnel roles and responsibilities and their qualifications. All proposed project staff are full-time personnel. The job description for each person is presented first and is followed by his or her qualifications. Resumes for each proposed staff member follow this section.

Figure 1 provides our organizational chart.

Figure 1. Organizational chart



The evaluation team is available immediately upon the contract start date. Any vacancies in the team throughout the contract will be filled through existing high-quality, qualified staff or through a job search. Westat maintains a large, high-quality and versatile staff, and anticipate being able to fill any vacancies that occur during the contract with existing staff. The Bureau for Children and Families project manager will be informed of all anticipated changes in staffing.

Principal Investigator

Ms. Jane Mettenburg, a Westat Senior Study Director, will serve as principal investigator (PI). As PI, Ms. Mettenburg will provide scientific direction to design and methodology decisions. She will contribute her vast knowledge of child welfare to the evaluation, advising on all aspects of the project and contributing to analysis and reporting.

Ms. Mettenburg has more than 35 years of experience in the child welfare field. She is currently the project director for the **Michigan Title IV-E Waiver Evaluation** and the **Phase III Ohio IV-E Waiver Evaluation’s Participant Outcome Analysis**. For the **Third National Incidence Studies of Missing, Abducted, Runaway, and Thrownaway Children**, Ms. Mettenburg is the task leader for the development of the household survey instruments and for the evaluative coding of study data. For the **Evaluation of the Permanency Innovations Initiative (PII)**, she directed the data mining tasks identifying the target populations and directs the administrative data site specific outcome analysis. As a senior consultant at the **National Resource Center for Child Welfare Data and Technology**, she provided states with training and technical assistance on National Child Abuse and Neglect Data System (NCANDS), the Adoption and Foster Care Analysis and Reporting System, and Child and Family Service Reviews data indicators. For **Fourth National Incidence Study of Child Abuse and Neglect (NIS-4)**, Ms. Mettenburg directed recruitment of 126 child protective services (CPS) agencies, electronic submissions of CPS data, and evaluative coding of main study data, contributed to the Report to Congress, and directed a comparison of the NIS-4 to the NCANDS. She directed the development of an evaluation database for the Arizona Community Substance Abuse Prevention and Treatment Program using administrative data from state child welfare, TANF/JOBS, and health agencies. In addition, she served as administrative data manager for the **Evaluation of the Illinois Subsidized Guardianship Waiver Demonstration** and the **National Evaluation of Family Preservation and Reunification Programs**. She co-authored the report “Estimating Child Welfare Service Costs: Methods Developed for the Evaluation of Family Preservation and Reunification Programs” for the Assistant Secretary for Planning and Evaluation, Department of Health and Human Services. She worked for the Texas child welfare system for 23 years where she analyzed and monitored every facet of child welfare service delivery using administrative data—intake/ investigation, family preservation, foster and substitute care, reunification, long-term foster care, adoption, guardianship, runaways, and contract private provider services. She worked on the design team for the building of the Texas SACWIS. She directed the development and analyses of child welfare performance and outcome measures for the State agency, oversaw random-moment workload and IV-E time studies, and performed cost of services analyses for the performance-based budgeting process. In her budget role, she developed a

system for monitoring foster care providers' level of care determinations. Ms. Mettenburg was responsible for child welfare and Medicaid federal reporting and state reporting at the unit, county, and regional levels using the multiple client-level administrative databases at the agency.

Project Director

Dr. Jaymie Lorthridge, a Westat Senior Study Director, will serve as project director.

Dr. Lorthridge will oversee and direct all project work, ensuring that all tasks are completed in a timely manner and on budget. She will maintain ongoing communication with the Bureau for Children and Families (BCF) project manager to review project progress and receive guidance from the BCF project manager in solving any problems, real or anticipated, that may arise.

Dr. Lorthridge has more than 10 years of experience in the evaluation of community-based programs aimed at improving outcomes for families and children. She is currently the RISE evaluation lead for the **Permanency Innovations Initiative**. The RISE site uses a wraparound approach to serving youth ages 11 to 17 years. She also serves as program manager for the Hilton Foster Youth Strategic Initiative, which targets transition age youth, and is the fidelity assessment task leader for the **Michigan IV-E Waiver Evaluation**, which requires consideration of fidelity's impact on the process and outcomes evaluation. Before joining Westat, Dr. Lorthridge worked with the Los Angeles Department of Children and Family Services/Casey Family Programs and at the University of Southern California School of Social Work where she was part of multidisciplinary team that evaluated family preservation, child abuse prevention, and child care training programs and conducted research in areas such as health disparities and family strengthening factors.

Dr. Lorthridge worked within a team to assess barriers and facilitators affecting fidelity to strategies for the **Los Angeles County Evaluation of Title IV-E Strategies project**. She conducted research in Los Angeles County Early Childhood Education Centers exploring implementation of the **Strengthening Families Approach**. During the **Partnerships for Families** project, a maltreatment prevention initiative targeting children 0 to 5, she provided theoretical research that guided revision of the process evaluation plan and drafted the family satisfaction survey.

Project Manager

Ms. Gail Thomas, a Westat Senior Study Director, will serve as project manager. Ms. Thomas will conduct day-to-day project management and will assist the project director in ensuring that all tasks are completed in a timely manner and on budget.

Ms. Thomas has more than 15 years of experience managing and conducting multimode process and outcome evaluations involving at-risk youth, clergy, and the elderly. Ms. Thomas has helped develop and test instruments, trained and directed field staff for quantitative and qualitative studies, and advanced data collection quality and production. She served as field director for both the **Assessment and Evaluation of the Tennessee Subsidized Guardianship Waiver Demonstration Project and the Assessment and Evaluation of the Wisconsin Subsidized Guardianship Initiative**. She is currently a task leader for the Association of American Universities Campus Climate Survey on Sexual Assault and Sexual Misconduct and provides service data analysis for the process evaluation of the Michigan IV-E Waiver Evaluation, Protect MiFamily.

Process Evaluation Senior Advisor

Ms. Karla Eisen, a Westat Senior Study Director, will serve as the senior advisor for the process evaluation. She will advise on the development of the process evaluation plan, the analysis plan, and the development of any relevant data collection instruments. She will also oversee the analysis of qualitative data for the process study.

Ms. Eisen has more than 20 years of experience in research and program evaluation as well as direct service provision with a wide variety of social service programs. Her areas of expertise include qualitative approaches to data collection and analysis as well as survey operations. She has experience in program evaluation, case studies, ethnographic methods, instrument design, and field data collection. Ms. Eisen also uses computer-assisted qualitative data analysis software, primarily NVivo, in her analytic work and has presented on the subject at conferences nationally and internationally. She is currently the process evaluation lead for the **Evaluation of Michigan's Title IV-E** program. She is responsible for the evaluation plan, family satisfaction survey, and development of on-site data collection and analysis of focus group and interview data. She served as the cross-site evaluation coordinator for Office of Juvenile Justice and Delinquency Prevention's **Safe Kids Safe Streets project** for the Sault Saint Marie Tribe of Chippewa Indians site that included interfacing with both the tribal and Michigan state child welfare agencies. She was

responsible for site visits, qualitative data collection and analyses, case study reports as well as providing evaluation technical assistance. She also served as the lead evaluator for the Arizona site on the **Evaluation of the Permanency Innovations Initiative** (PII) project. In her role on the PII project, she designed a rigorous evaluation of an intervention, involving child advocates and family search and engagement techniques, designed to address barriers to permanency for children at risk of remaining in foster care long term.

Process Evaluation Lead

Ms. Marneena Evans, a Westat research analyst, will serve as lead for the process evaluation. In her role as process evaluation lead, she will direct the development of the process evaluation plan, the analysis plan, and the development of any relevant data collection instruments. She will also lead the analysis of qualitative data for the process study.

Ms. Evans has more than 14 years of experience in child welfare and juvenile justice research and evaluation, qualitative analysis, training and technical assistance, and product development and dissemination. She currently conducts qualitative data collection and analysis for the evaluation of the Michigan Protect MiFamily IV-E waiver demonstration project, the evaluation of the Permanency Innovations Initiative, and the evaluation of the Hilton Foundation's Foster Youth Initiative. Ms. Evans also serves as the data collection manager for the Survey of Juveniles Charged in Adult Criminal Courts and a writer and analyst for the Capacity Building Center for Tribes. Ms. Evans previously conducted administrator interviews for the National Survey of Youth in Custody, conducted site visits (including focus groups with staff, youth, and caregivers), a case manager survey, and qualitative analysis for an evaluation of the Wisconsin Subsidized Guardianship Initiative IV-E waiver demonstration; worked with county child welfare agencies on administrative data issues for the ProtectOhio IV-E waiver evaluation; coordinated with county child welfare agencies for the North Carolina Family Finding Evaluation; conducted analysis and product development for the National Resource Center for Child Welfare Data and Technology; and conducted program reviews for a New York City Center for Economic Opportunity Program Evaluation.

Outcome Evaluation Co-Leads

Primary Data Collection Lead

Ms. Janet Ciarico, a Westat senior research analyst, will serve as the outcome evaluation co-lead with responsibility for gathering administrative data for the study. She will also co-lead the outcome analyses using the state's administrative and primary data.

Ms. Ciarico has 19 years of experience in survey and evaluation research. She has conducted research and evaluation in the areas of child abuse and neglect, foster care, family preservation and reunification programs, subsidized guardianship, and youth aging out of foster care. Ms. Ciarico has expertise in the development of analysis plans and in conducting quantitative and qualitative analysis using complex primary and administrative data sets. Ms. Ciarico currently serves as the primary data collection and outcome analysis task leader for the **Michigan Title IV-E Waiver Evaluation**. She also serves as senior research analyst for the **Evaluation of the Permanency Innovations Initiative** and the **Ohio IV-E Waiver Evaluation**. Ms. Ciarico served as a senior research analyst for the **Illinois Permanency for Older Wards Waiver Study**, the **Evaluation of the Illinois Subsidized Guardianship Waiver Demonstration**, the **Fourth National Incidence Study of Child Abuse and Neglect (NIS-4)** and the **First National Survey of Youth in Custody (NSYC-1)**.

Integrated Data Analysis Lead

Dr. Leanne Heaton, a Westat Senior Study Director, will serve as a co-lead for the outcome evaluation and will also lead the integrated data analysis.

Dr. Heaton is a licensed clinical social worker and a Westat Senior Study Director with more than 20 years of experience in research, evaluation, and clinical practice experience with adults, children, and families. She has conducted research in the areas of child welfare, juvenile justice, and mental health. At Westat, she works with investigators and collaborators on the design, implementation, and analysis of a wide range of studies, including the National Survey of Youth in Custody-2 and a Bureau of Justice Statistics study on rape and sexual assault. She has experience analyzing large, complex national surveys and developing detailed analytic plans. Dr. Heaton also teaches social work practice at the Virginia Commonwealth University School of Social Work. In previous work, Dr. Heaton served as a researcher, clinical research interviewer, and collaborator on several studies for

the National Institute of Mental Health (NIMH), including the National Comorbidity Survey of Adolescents, the child segment of the Hurricane Katrina Study, and research on neurodevelopmental genomics and familial transmission of mental disorders. Dr. Heaton has also conducted extensive program evaluations on behalf of the Fairfax County Department of Family Services and the Virginia Department of Social Services.

Statistical Methodologist

Dr. Robert M. Baskin will serve as statistical methodologist for the project. He will lead the development of a detailed research design and monitor the implementation of the research design. He will also conduct statistical procedures for the major analyses integrating both the primary and administrative data.

Dr. Baskin is a senior statistician with more than 25 years of experience in conducting and managing statistical research. During his time at Westat (2001 to 2003), he carried out nonresponse adjustments and raking for development of weights for the National Youth Anti-Drug Media Campaign NYAMC, and conducted propensity analysis for the development of longitudinal weights. He conducted research on sample allocation and control overlap for the sample redesign of the Drug Abuse Warning Network and identified use of SPC control charts for purposes of data quality control. Dr. Baskin continues to serve as an internal consultant at Westat. More recently, at the Agency for Healthcare Research and Quality (AHRQ), Dr. Baskin was responsible for conducting a broad range of statistical research and analyses and providing expert statistical and methodological consultation to support AHRQ's intramural and extramural research efforts. Dr. Baskin provided expert statistical consultation for a broad range of statistical issues within AHRQ relating to health care policy. He has provided expert statistical consultation to other government agencies on complex study designs and analytical techniques.

Data Processing and Analytic File Creation Lead

Mr. Yong Lee, a Westat senior systems analyst, will serve as the data processing and analytic file creation lead for the evaluation. Mr. Lee will oversee the data processing and management activities for both survey and analytic tasks.

Mr. Lee has 25 years of experience working with large data systems and performing statistical analyses to include sampling, weighting, and imputations. His current responsibilities include overseeing project deliverables, reviewing the work of his team, and programming in SAS. He works with SAS on PCs running Windows and Linux. He also supervises web data collection applications development and maintenance on SQL Server/ASP.NET platforms. Mr. Lee currently supervises the data analysis work on the Ohio's Title IV-E Waiver Demonstration Project, working with Ohio's SACWIS data. Mr. Lee also works on many task order contracts administered by the U.S. Department of Education. Mr. Lee currently supervises the data collection and analysis work on the Integrated Evaluation of ARRA Funding, Implementation, and Outcomes, the Evaluation of the DC Opportunity Scholarship Program, and the Personnel Preparation Performance Reporting Support contracts. He has also supervised the analysis work on Follow-up Evaluation of the Gaining Early Awareness and Readiness for Undergraduate Programs (GEAR UP), Technical Assistance in Data Collection, Analysis, and Report Preparation (IDEA data), and Impact Evaluation of the DC Choice Program.

Cost Study Lead

Dr. Mustafa Karakus, a Westat Senior Study Director and health economist, will lead the cost study. Dr. Karakus will be responsible for conducting all cost analyses for the evaluation, including examining service costs, conducting a cost-effectiveness analysis and supporting BCF with cost-neutrality calculations.

Dr. Mustafa C. Karakus is a health economist with a strong background in applied microeconomics, health economics, and econometrics and with training in micro simulations modeling and cost-effectiveness analysis. At Westat, Dr. Karakus has conducted economic analysis and evaluation of data for projects funded by New York City and the following federal agencies: U.S. Department of Health and Health Services; HHS agencies, Centers for Disease Control and Prevention and the Substance Abuse and Mental Health Administration (SAMHSA); U.S. Department of Labor; U.S. Social Security Administration; and the Veterans Benefit Administration. His work has centered on all aspects of economic evaluations, including cost-effectiveness, cost-benefit, and decision-making analysis in programs involving subpopulations such as people with serious mental illness, ex-offenders, drug court clients, the chronically homeless. He is leading the cost study evaluation of Title IV-E waiver in Michigan. He has previously led multi-site cost evaluation of SAMHSA grantees in the of drug court initiation and/or enhancement grants. Dr. Karakus' research papers have been published in *PharmacoEconomics*, *Applied Economics*, *Atlantic Economic Journal*,

Journal of Behavioral Health Services and Research, Administration and Policy in Mental Health and other reputable public policy and health care financing journals. He recently served as the guest editor of a special section on “Affordable Care Act and Behavioral Health Services” for the Journal of Behavioral Health Services and Policy that came out in fall 2014. He also has presented scientific papers at numerous national and international conferences.

Cost Study Support Staff

Mr. Jacky Choi will serve as cost study support to Dr. Karakus.

Mr. Choi is a research assistant with experience in health education, research, and project development. At Westat, he assists senior-level staff in conducting literature reviews; performing geocoding; developing, editing, and revising survey content; annotating and coding surveys; drafting recruitment materials; and writing proposals and client reports. Mr. Choi has served as a liaison among various stakeholders on health-related projects or activities. He offers health communication skills, as well as experience in social science research and writing.

Staff Resumes

Jane A. Mettenburg

Summary

Jane Mettenburg is a Westat Senior Study Director with more than 35 years of experience in child welfare. She is project director for the Michigan IV-E Waiver Evaluation and for the Phase III Ohio IV-E Waiver Evaluation—Participant Outcome Analysis; all analytic files are produced using Ohio SACWIS data. For the Third National Incidence Studies of Missing, Abducted, Runaway, and Thrownaway Children, she is task leader for the development of household survey instruments and for evaluative data coding. As a senior consultant at the National Resource Center for Child Welfare Data and Technology, Ms. Mettenburg provided states with training and technical assistance on National Child Abuse and Neglect Data System (NCANDS), the Adoption and Foster Care Analysis and Reporting System (AFCARS), and Child and Family Service Reviews data indicators. She directs data mining tasks and site-specific administrative data analysis for the Permanency Innovation Initiative. For the Fourth National Incidence Study of Child Abuse and Neglect (NIS-4), Ms. Mettenburg directed recruitment of 126 child protective services (CPS) agencies, electronic submission of CPS data, and evaluative coding of main study data and contributed to the Report to Congress. She directed a comparison analysis between the NIS-4 to the NCANDS. For the NIS-4 Planning Project, she led the review and mapping of state child abuse and neglect laws and definitions used to enhance NIS-4 maltreatment definitions. Ms. Mettenburg also directed development of an evaluation database for the Arizona Community Substance Abuse Prevention and Treatment Program, using administrative data from state child welfare systems, TANF/JOBS, and health agencies. In addition, she contributed to Westat's evaluation of the Illinois Subsidized Guardianship Waiver Demonstration Program and to the National Evaluation of Family Preservation and Reunification Programs. She coauthored the report *Estimating Child Welfare Service Costs: Methods Developed for the Evaluation of Family Preservation and Reunification Programs* for ASPE. During her 23 years as a staff director in a state human service agency that included a child welfare agency, Ms. Mettenburg was responsible for management and planning of data analysis, systems development, development and monitoring of performance and outcome measures, compliance with Federal and state regulations and reporting requirements (including NCANDS and AFCARS), and research and evaluation for human services programs. She was a member of the State Technical Advisory Groups for NCANDS (1991 through 1997), the Multi-State National Foster Care Data Archive Project (1992 through 1997), and the Foster Care Longitudinal Event History Evaluation Project (1993 through 1997).

Education

B.A., Sociology, University of Texas, Austin, 1975

Relevant Project Experience

Westat (1997 to Present)

Michigan Title IV-E Waiver Demonstration Project, Protect MiFamily

Client: Michigan Department of Human Services

Project Overview: Michigan's Protect MiFamily Program provides an innovative array of prevention services to families with young children who are at high or intensive risk for maltreatment as determined by child protective services. The demonstration is being implemented by private agencies in Kalamazoo, Macomb, and Muskegon Counties. The Children's Bureau of the U.S. Department of Health and Human Services mandates an independent evaluation of each waiver demonstration project. Westat's activities involve evaluation plan and methodology development, including random assignment, statistical measurement, and analysis methodologies; implementation of process and outcome evaluations; primary and administrative data collection; outcome measurement and analysis; cost-benefit and cost-effectiveness analysis; and preparation of reports.

Responsibilities: Project director evaluation.

Extension of the Evaluation of Ohio's Title IV-E Waiver Demonstration

Client: Ohio Department of Job and Family Services

Project Overview: As a subcontractor, Westat is responsible for participant outcomes analysis to examine the continued impact of ProtectOhio on children and families. The 5-year contract includes studies to investigate the impact of new waiver services such as family visitation, family team conferencing, and enhanced kinship services. Westat annually captures and conducts secondary analysis of administrative data for participants in 14 participating and 14 comparison counties. Analyses will include competing risk survival analysis and counterfactual imputation methodologies to look at foster care length of stay, as well as trajectory analysis to examine service pathways. A data audit and ongoing data committee will examine the local use of statewide data sources, enabling comparative analysis of multiple sources of longitudinal records. Westat is now involved in phase III of the evaluation; phases I and II ran from 1998 to 2010.

Responsibilities: Project director (phase III)/administrative data manager (phases I and II). Ms. Mettenburg manages project staffing and budget, prepares progress reports, and contributes to interim and final evaluation reports. Throughout the study, she has coordinated delivery and analysis using administrative data from Ohio's SACWIS; conducts site visits as necessary to understand the data; works with state and county staff and other project staff on data use, analysis, and interpretation; and directs research and systems staff in data preparation and development of programming specifications for analytic projects using the evaluation data.

Third National Incidence Studies of Missing, Abducted, Runaway, and Thrownaway Children (NISMART-3)

Client: Office of Juvenile Justice and Delinquency Prevention, U.S. Department of Justice (DOJ)

Project Overview: The Rockville Institute, Westat's nonprofit affiliate, and its partner, the Crimes Against Children Research Center at the University of New Hampshire, are conducting NISMART-3 to provide updated information on the national incidence of missing children, their characteristics, and the events that cause them to become missing and to measure changes since the last NISMART cycle. Like the last cycle, NISMART-3 includes four national studies: a household survey of parents and other primary caretakers, a household survey of youth, a survey

of juvenile residential facilities, and a law enforcement study. Together, these studies assess the incidence of episodes that cause children to become missing: family abductions, nonfamily abductions (including stereotypical kidnappings), runaway/throwaway events, lost or injured situations, and benign missing misunderstandings. The study also identifies the incidence of children who qualify as missing and the numbers recovered.

Responsibilities: Task leader for household instrument development/evaluative coding. Ms. Mettenburg directed development of adult and child screeners for each type of episode (family abduction, non-family abduction, runaway/throwaway, and general missing). She oversaw programming of each instrument for administration via web and CATI. As task leader for evaluative coding, Ms. Mettenburg directs coding of data to determine child countability and specifies programming code for the automated child countability determination.

Planning and Design Options for Evaluation of the Long-Term Foster Care Initiative (Permanency Innovations Initiative)

Client: Administration for Children and Families, U.S. Department of Health and Human Services (HHS)

Project Overview: Under this 5-year initiative, the Children's Bureau funded six grantees to develop and implement innovative interventions in their state or county child welfare systems to reduce long-term foster care and improve outcomes for children who experience serious barriers to permanency. During this planning year, Westat and its subcontractors designed a comprehensive evaluation plan for the initiative. The evaluation team coordinated with grantees to formulate site-specific evaluation plans (including identifying their target populations, interventions, comparison groups, and outcome measures; conducting evaluability assessments of these plans; developing instruments; and obtaining necessary IRB clearances). Additionally, the evaluation team designed a cross-site evaluation plan and generated resource estimates for evaluation activities during future years of the initiative.

Responsibilities: Administrative data expert.

Fourth National Incidence Study of Child Abuse and Neglect (NIS-4)

Client: Administration for Children and Families, U.S. Department of Health and Human Services (HHS)

Project Overview: The NIS-4 gathered data on all children investigated by the child protective services (CPS) agencies in a nationally representative sample of 122 counties, as well as on children identified by nearly 10,800 professional staff in almost 1,100 other community agencies. These other agencies included county sheriff's offices; county departments of juvenile probation, health, and public housing; municipal police departments; hospitals; public schools; daycare centers; shelters; and voluntary social services and mental health agencies. Study cases were reviewed to eliminate duplicates, evaluated to ensure that they met the study's standardized definitions of abuse and neglect, and weighted to represent all maltreated children in the nation. The NIS-4 also included several allied surveys to enhance the quality and interpretability of the main study's findings and to examine how the NIS results relate to National Child Abuse and Neglect Data System (NCANDS) statistics.

Responsibilities: Director of CPS recruitment and evaluative coding. Ms. Mettenburg supervised recruitment of 126 CPS agencies that were offered the option of providing data electronically. She supervised the staff who worked with state and county personnel to map child abuse and neglect data elements to the NIS-4 data elements, to facilitate electronic submissions. Ms. Mettenburg supervised evaluative coding, which involved coding case details into a uniform format and deciding the countability of each child using standard definitions of abuse and

neglect. She also contributed to data analysis and writing of the Report to Congress. Ms. Mettenburg directed a comparison/cross-validation of the NIS and the NCANDS.

Assessment of the Chafee Foster Care Independence Program (CFCIP)

Client: Children's Bureau, Administration for Children and Families, U.S. Department of Health and Human Services (HHS)

Project Overview: As part of the Foster Care Independence Act of 1999, Congress mandated a performance assessment system for independent living programs funded under the CFCIP. This system, the National Youth in Transition Database, was envisioned as a comprehensive system integrating information about youth served, services delivered, and outcomes achieved. Westat and a subcontractor assisted in developing outcomes and performance measures to assess state CFCIP performance. The project involved an extensive consultation process to identify outcomes and measures, including stakeholder discussion groups in the 10 HHS Regions and at national conferences and involvement of a standing work group of policymakers, researchers, public child welfare agency staff, and private providers.

Responsibilities: Focus group leader. Ms. Mettenburg led discussion groups in developing a national set of outcome measures for the Independent Living Program.

Evaluation of the Illinois Subsidized Guardianship Waiver Demonstration

Client: Illinois Department of Children and Family Services

Project Overview: Westat evaluated a demonstration program that enables the state to subsidize the cost of care by relative caregivers and foster parents who assume guardianship responsibilities for foster children in their homes. The 5-year study provided estimates of the impact of subsidized guardianship on permanency outcomes, subsequent abuse and neglect allegations, family functioning, and child well-being. The project included (1) a hypothesis-testing evaluation to assess the effect of subsidized guardianship on the outcomes of children and their families and (2) a process evaluation to describe the implementation of guardianship and the context in which it operates. Westat synthesized the findings from both components to develop program and policy recommendations. Children and their caregivers were interviewed at two points in time by Westat staff and specially trained agency staff; children were interviewed using ACASI interviewing, and caregiver interviews made use of CAPI interviewing.

Responsibilities: Administrative data manager. Ms. Mettenburg coordinated delivery and analysis using administrative data, conducted site visits, and arranged for the delivery of appropriate and necessary administrative data.

Arizona Community Substance Abuse Prevention and Treatment Program (Arizona Families FIRST)

Client: Arizona Department of Economic Security and Department of Health

Project Overview: Westat was a subcontractor for this evaluation of Arizona First, which develops community partnerships and programs to address the needs of families in the child welfare system, as well as families who participate in the Temporary Aid for Needy Families and the Job Opportunities and Basic Skills Training programs. The project involved outcome and cost-effectiveness measures and process evaluations of operational issues to evaluate the success of provider services. Westat's major role was to build the evaluation database that will house all data necessary for the evaluation and cost reporting, perform data analysis, and prepare reports on clients' assessments, services, and outcomes.

Responsibilities: Project director and database manager. Ms. Mettenburg directed design, development, and maintenance of an evaluation database; data collection from state human

services databases and service providers; development of outcome measures; data analysis; design and preparation of reports; and technical assistance to service providers.

National Head Start Impact Study

Client: Administration for Children and Families, U.S. Department of Health and Human Services (HHS)

Project Overview: As part of the 1998 reauthorization of Head Start, Congress mandated this national longitudinal study to assess (1) how Head Start participation affects school readiness and (2) under what conditions and for which children the program works best. Working as part of a team, Westat conducted the pilot study and a full-scale study involving a nationally representative sample of 83 grantees/delegate agencies. Assessment data were collected for approximately 5,000 3- and 4-year-olds, who were followed through the spring of their first-grade year. Children were randomly assigned to either a treatment group that participated in Head Start or a non-Head Start control group. The project also included interviews with parents/primary caregivers, surveys of program staff/other care providers and elementary school teachers, assessments of the quality of care settings, and abstracting of administrative records.

Responsibilities: Administrative data manager. Ms. Mettenburg coordinated and ensured delivery and availability of data for all aspects of the study. Her responsibilities included management of databases and project management systems, construction of analysis files and web sites, and incorporation of all linked data sources.

Comprehensive Qualitative Review of the Safety, Permanency, and Well-Being of DCFS Wards

Client: Illinois Department of Child and Family Services (DCFS)

Project Overview: This study determined current levels of child well-being in the domains of safety, permanency, physical and mental health, education, developmental well-being, social functioning, and transition into adulthood. Westat provided and maintained an ACASI interview to collect study data and to prepare the analytical file.

Responsibilities: Project director. Ms. Mettenburg directed the design and development of an ACASI interview for various foster care populations, oversaw the development of statistical files for the analysis of interview and service data, and trained interviewers to use ACASI.

Assessing the Context of Permanency and Reunification in the Foster Care System

Client: U.S. Department of Health and Human Services (HHS)

Project Overview: Working with a subcontractor, Westat reviewed reunification policy and practice at the state, county, and local levels in response to the implementation of the Adoption and Safe Families Act. Project activities included developing a conceptual model of permanency and reunification, documenting patterns of reunification and re-entry through analyses of data from the Adoption and Foster Care Analysis and Reporting System (AFCARS) and the Foster Care Data Archive, examining caseworkers' decisionmaking processes for permanency, and developing a matrix of reunification programs. Data collection included telephone discussions with program administrators and site visits to reunification programs.

Responsibilities: Research interviewer. Ms. Mettenburg assisted in identifying data sources for analysis and interviewed state and provider program staff delivering reunification services to children and their families.

New York City Center for Economic Opportunity (CEO) Program Evaluation

Client: Center for Economic Opportunity/New York City Human Resources Administration

Project Overview: Westat is evaluating initiatives of the CEO Program, New York City's effort to move economically disadvantaged New Yorkers out of poverty. The initiatives are focused on young adults, poor working adults, and families with young children (<5 years). The Westat team is examining approximately 35 programs to determine which can best be evaluated, developing an evaluation design, and working with the selected programs to systematically collect information for evaluating impact, program implementation, and cost-benefit.

Responsibilities: Data manager. Ms. Mettenburg is directing development of a database to store information about clients and the services they receive from the 42 program agencies involved in the CEO. The data will be used to create services performance measures and client outcomes for evaluating program impact in reducing poverty.

Evaluation of Ohio's Title IV-E Waiver Demonstration Project "ProtectOhio"

Client: Ohio Department of Job and Family Services

Project Overview: Westat was a subcontractor for an evaluation of the ProtectOhio demonstration project, which adopts a managed care approach in order to reduce out-of-home placement, increase reunification and permanency for children, and improve family functioning. Westat conducted a participant outcomes analysis to examine the impact of ProtectOhio on children and families. Westat annually captured and conducted secondary analysis of administrative data on all families in 14 demonstration and 14 control counties to examine the mix of services provided and the families' resulting outcomes. A survey was conducted with a sample of 1,000 caseworkers to examine patterns of service utilization by children and families.

Responsibilities: Administrative data manager. Ms. Mettenburg coordinated delivery and analysis using administrative data, conducted site visits, and arranged for the delivery of appropriate and necessary administrative data.

Evaluation of Family Preservation and Reunification Services

Client: Assistant Secretary for Planning and Evaluation, U.S. Department of Health and Human Services (HHS)

Project Overview: Under a 5-year contract, Westat and two subcontractors assisted HHS in describing and evaluating the impact of four selected family preservation programs and one reunification program. For the first major component, an impact evaluation, up to 500 families in each program were randomly assigned to receive family preservation/reunification services (the treatment group) or usual child welfare services (the control group); Westat conducted three rounds of in-person interviews with the family's primary caretaker and two rounds of interviews with the caseworker. Other data collection efforts included an accounting of services provided by caseworkers and self-administered staff questionnaires. The second study was conducted to describe program operations; Westat interviewed child welfare and agency staff, reviewed policy and program materials, and examined administrative data systems and case records. Other activities included monitoring fieldwork, processing data, and preparing analyses and reports. A followup analysis to the reunification study looked at the status of initiatives that use managed care in child welfare efforts.

Responsibilities: Administrative data manager. Ms. Mettenburg coordinated delivery and analysis of administrative data, conducted site visits, and arranged for delivery of appropriate and necessary administrative data. She established mechanisms to link case interview data with administrative data case records. Ms. Mettenburg also coordinated completion of the cost analysis

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report and coauthored *Estimating Child Welfare Service Costs: Methods Developed for the Evaluation of Family Preservation and Reunification Programs*.

Texas Department of Protective and Regulatory Services (currently the Texas Department of Family and Protective Services), Austin, TX (1992 to 1997)

As director of the Forecasting and Program Statistics Division, Ms. Mettenburg directed the staff responsible for providing, forecasting, analyzing, and ensuring ready availability of client services data on child welfare, adult protective services, and daycare and foster/adoptive home licensing for and to state office and regional program and budget staff, the legislature, DHHS and other Federal agencies, other state agencies, the Governor's Office, HHSC, contractors, consultants, auditors, attorneys, reporters, private agencies, advocacy organizations, and the general public.

Ms. Mettenburg's work on the analysis of administrative data included the development and utilization of client/service outcome measurement for program performance, budgeting, and cost analysis. She also served on several teams involved in the design and development of the Texas Statewide Automated Child and Adult Protective Services System.

Ms. Mettenburg supervised preparation of data submissions to meet the reporting requirements of the National Child Abuse and Neglect Data System (NCANDS) and the Adoption and Foster Care Analysis and Reporting System (AFCARS). She represented the state child welfare agency for AFCARS, NCANDS, the Multi-State National Foster Care Data Archives Project, the Foster Care Longitudinal Event History Evaluation Project, the National Association for Welfare Research and Statistics, and the American Human Services Association Management Reporting Committee.

Texas Department of Human Services, Austin, TX (1974 to 1992)

Ms. Mettenburg was responsible for information for the Protective Services for Families and Children, Aged and Disabled Services, and Medicaid programs. She was responsible for data analysis and statistical information for Child Welfare and Child Protective Services, Adult Protective Services, and Child Care Licensing. She served as Section Leader, Program Statistics for Protective Services; Director, Program Information Section for Protective Services for Children, Aged and Disabled, and Medicaid (1987 to 1989); Director, Data Access Unit for Protective Services for Children, Aged and Disabled, and Medicaid (1984 to 1987); Director, Management Reporting Unit, Office of Programs Budget and Statistics (1980 to 1984); Director, Data Analysis Unit, Data Control and Analysis Division (1977 to 1980); and Statistical Clerk II, Social Services Budget Section, Budget Control and Analysis Division (1974 to 1977).

Awards and Professional Achievements

Federal Interagency Forum on Child and Family Statistics, 2008-present
Technical Advisory Group, Foster Care Longitudinal Event History Evaluation Project, 1993-1997
Technical Advisory Group, AFCARS

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Technical Advisory Group, Multi-State National Foster Care Data Archives Project, 1992-1997
Technical Advisory Work Group, NCANDS, 1991-1997
Board of Directors (1985-1997), President (1994), and Program Chairman (1986), National Association for Welfare Research and Statistics
Management Committee (1987-1989), Federal Reporting Committee (1980-1986), and Technical Advisor to Children, Family, and Adult Services Committee (1989-1991), American Public Welfare Association
Roundtable on Outcome Measures in Child Welfare Services (1993-2002)

Child and Adult Protective Services System (CAPS) Design Teams, Architectural Steering Committee, Management Report Design Committee
Adult Protective Services Workload Evaluation Time Study
Annie E. Casey Foundation Mental Health Initiative for Urban Children
Medicaid Systems Quality Review Team
Developmental Disability Council
Child Protective Service Welnet and Regional Database Committee
Performance Measurement Improvement Project for Child Protective and Aged and Disabled Services
Resource Outcome Modeling Project for Protective Services
Provider Information System Design Committee
SSMS Redesign Committee and Database Development Team
Social Services Block Grant, National Foster Care and Adoption System, and National Child Abuse and Neglect System

Publications, Technical Reports, and Presentations

Technical Reports

- Sedlak, A.J., Mettenburg, J., Basena, M., Petta, I., McPherson, K., Greene, A., and Li, S. (2010). *Fourth National Incidence Study of Child Abuse and Neglect: Report to Congress*. Washington, DC: Administration for Children and Families, U.S. Department of Health and Human Services.
- Sedlak, A., Mettenburg, J., Winglee, M., Ciarico, J., Basena, M., Rust, K., Shapiro, G., Goksel, H., Hartge, J., Park, K., and Clark, J. (2010). *Fourth National Incidence Study of Child Abuse and Neglect: Analysis report* (for Administration for Children and Families, U.S. Department of Health and Human Services). Rockville, MD: Westat.
- Sedlak, A., Gragg, F., Mettenburg, J., Ciarico, J., Winglee, M., Shapiro, G., Hartge, J., Li, S., Greene, A., and McPherson, K. (2008). *Design and methods summary* (for Administration for Children and Families, U.S. Department of Health and Human Services). Rockville, MD: Westat.
- Sedlak, A., Mettenburg, J., Schultz, D., and Cook, R. (2003). *NIS definitions review* (for Administration for Children and Families, U.S. Department of Health and Human Services). Rockville, MD: Westat.

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Westat, Inc., and James Bell and Associates. (2002). Estimating child welfare service costs: Methods developed for the Evaluation of Family Preservation and Reunification Programs. *Evaluation of Family Preservation and Reunification Programs*. Washington, DC: Assistant Secretary for Planning and Evaluation, U.S. Department of Health and Human Services. Available at: <http://aspe.hhs.gov/hsp/fampres02..>

Presentations

Mettenburg, J., Brown, J., Ciarico, J., and McInturf, J. (2010). *Enhancing analytic capacity: What do you need to help drive performance?* 13th National Child Welfare Data and Technology Conference, Bethesda, MD.

Sedlak, A.J., Mettenburg, J., Schultz, D., and Cook, D. (2005, April). *Refining maltreatment definitions for the Fourth National Incidence Study of Child Abuse and Neglect (NIS-4)*. Biennial Meeting of the Society for Research in Child Development, Atlanta, GA.

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Jaymie Lorthridge, Ph.D.

Summary

Dr. Jaymie Lorthridge is a Westat Senior Study Director with more than 10 years of experience in the evaluation of community-based programs aimed at improving outcomes for families and children. At Westat, she is the evaluation lead for a site participating in the Permanency Innovations Initiative; she has contributed to evaluation plan development, created materials such as institutional review board applications and a logic model, and collaborated with site partners and child welfare departments to obtain administrative data. In previous work with the Los Angeles Department of Children and Family Services/Casey Family Programs and at the University of Southern California School of Social Work, Dr. Lorthridge was part of multidisciplinary teams that evaluated family preservation, child abuse prevention, and child care training programs and conducted research in areas such as health disparities and family strengthening factors. She also gained valuable experience in the field through a clinical internship at a child and family clinic, and through her work as a police officer in Atlanta, GA.

Education

Ph.D., University of Southern California School of Social Work, 2014
M.S.W., Community Organization, Planning, and Administration, University of Southern California School of Social Work, 2006
B.A., Psychology, Spelman College, 1998

Relevant Project Experience

Westat (2012 to Present)

Foster Youth Strategic Initiative

Client: Conrad N. Hilton Foundation

Project Overview: Westat is joined by two subcontractors to develop and implement an evaluation plan for the Foster Youth Initiative. The initiative promotes an environment of success for older foster youth by (1) increasing the self-sufficiency of transition-age youth through improved college and career readiness, stronger caregivers, and special services for high-risk youth; (2) strengthening collaboration and alignment throughout systems influencing foster youth outcomes; and (3) developing and disseminating knowledge for the field. The Westat team is evaluating progress toward the initiative's objectives by identifying and tracking systems-level outcomes. Data collection also includes review of grantee documents, analysis of program and system-specific administrative data, interviews with key decisionmakers and stakeholders, focus groups, and surveys, including a social network survey.

Responsibilities: Project manager. Dr. Lorthridge is responsible for day-to-day project management, including coordinating the work of the internal team and subcontractors, and completion and submission of deliverables. She led development and implementation of the work plan, prepared the initial logic model, and completed background research to inform the

initial evaluation plan. She developed and submitted the initial IRB package and amendments for Westat, and lead the writing of the first annual report for the client, and for the public, and contractually obligated progress report, and was responsible for development of the dashboard tool that is used by the client to assess achievement of project goals. Dr. Lorthridge also developed, with the support of a technical expert, a social network analysis survey for the project.

Michigan Title IV-E Waiver Demonstration Project, Protect MiFamily

Client: Michigan Department of Human Services

Project Overview: Michigan's Protect MiFamily Program provides an innovative array of prevention services to families with young children who are at high or intensive risk for maltreatment as determined by child protective services. The demonstration is being implemented by private agencies in Kalamazoo, Macomb, and Muskegon Counties. The Children's Bureau of the U.S. Department of Health and Human Services mandates an independent evaluation of each waiver demonstration project. Westat's activities involve evaluation plan and methodology development, including random assignment, statistical measurement, and analysis methodologies; implementation of process and outcome evaluations; primary and administrative data collection; outcome measurement and analysis; cost-benefit and cost-effectiveness analysis; and preparation of reports.

Responsibilities: Fidelity assessment task leader. Dr. Lorthridge was responsible for development and revision of the fidelity assessment instrument, assessment of interrater reliability, and creation of the analysis plan, as well as the design and delivery of fidelity data collection training. She oversees fidelity data collection and data quality assurance activities. She leads the cleaning, assessment, and reporting of fidelity data.

Evaluation of the Permanency Innovations Initiative (PII)

Client: Administration for Children and Families, U.S. Department of Health and Human Services (HHS)

Project Overview: Under the 5-year PII, the Children's Bureau has funded six grantees to develop and implement innovative interventions in their state or county child welfare systems to reduce long-term foster care and improve outcomes for children who experience serious barriers to permanency. Under a task order, Westat and its subcontractors are conducting cross-site and site-specific evaluations of the interventions. Activities include completing the designs of rigorous site-level evaluations (using randomized control groups wherever feasible), implementing the evaluations (monitoring the fidelity of the interventions and collecting primary data on proximal outcomes from treatment and comparison cases), collecting and analyzing administrative data on distal outcomes (children's exit from foster care and permanent placement), studying the implementation process, and conducting a cost study to assess the resource requirements of grantees' interventions. Two sites are in California.

Responsibilities: Evaluation lead for the RISE site. Dr. Lorthridge worked with RISE leaders based at the Los Angeles Gay and Lesbian Center and with project managers, the client, and the training and technical assistance partner to develop a summative evaluation plan for the organizational component of the intervention and to further develop a formative evaluation plan for the child and family component of the intervention, Care Coordination Team (CCT) services. RISE's multi-level interventions aim to reduce foster care placement and length of placement for gay, lesbian, bisexual, transgender, and gender-nonconforming children and youth in Los Angeles. As evaluation site lead Dr. Lorthridge created and refined the qualitative protocol initially used with minor participants, created and updated supporting materials such as a logic model, and participated in data collector hiring and development of training materials. Because of

the target population, RISE's evaluation procedures require extensive regulatory review. Dr. Lorthridge has created numerous IRB packages and amendments, court petitions, and child welfare agency research requests featuring complex assent and consent procedures. In addition, Dr. Lorthridge collaborated with local site partners and child welfare departments to secure administrative data and developed administrative data exchange procedures. She also coordinated forums to facilitate project collaboration and developed strategies for achieving evaluation buy-in by child welfare departments. Dr. Lorthridge oversees data collection, ensuring that the site adheres to pre-established quality standards, and is conducting a site-level case study to document implementation context.

Los Angeles Department of Children and Family Services (DCFS) and First 5 LA, Los Angeles, CA (2005 to 2012)

Process and Outcome Evaluation of the Partnerships for Families Initiative – Working with DCFS and First 5 LA, Dr. Lorthridge was part of a multidisciplinary team selected to evaluate a child maltreatment prevention initiative. She conducted a literature review for the year 1 process evaluation report, as well as theoretical research to guide revision of the evaluation plan. She also reviewed standardized assessment instruments and recommended instruments for use in the outcome evaluation, secured permission to use standardized instruments for the family survey, developed the survey for participating families, and created a survey script for interviewers.

Family Preservation Outcome Evaluation – Dr. Lorthridge was part of a multidisciplinary team evaluating one of the largest service pathways for the Los Angeles County child welfare system. She led content analysis and reporting of open-ended items from an employee survey and supported the analysis and reporting of programmatic costs.

Process and Outcome Evaluation of the Point of Engagement/Prevention Initiative Demonstration Project (PIDP) – Dr. Lorthridge prepared the IRB application, which served as the research protocol; refined the protocol for extracting PIDP data from DCFS case files; and planned tasks for and managed M.S.W. students during data extraction, ensuring quality control. In support of the Up Front Assessment (UFA), she developed a logic model, extracted data from interview transcripts using a grounded theory approach, and interpreted and reported findings to stakeholders involved with the county child welfare system. As part of a team, Dr. Lorthridge developed and pilot tested data collection instruments for multiple levels of staff. She was involved in developing a multimedia team training curriculum. In addition, she conducted staff interviews and focus groups, coordinated M.S.W. student participation in interviews and focus groups, provided notetaking support, transcribed and interpreted the data, and validated data through countywide evaluation meetings. She also provided a narrative translation of data for the final report, using a grounded theory approach; delivered oral and written presentations of findings to stakeholders; and prepared manuscripts for peer-reviewed publications.

University of Southern California School of Social Work, Los Angeles, CA (2006, 2010)

Preparing for Child Maltreatment Prevention: Identifying Community Assets and Parental Protective Factors – As part of her doctoral work, Dr. Lorthridge conducted a study

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of three communities in Los Angeles County and their public preschool population, using the Strengthening Families protective factors approach. She revised the standardized Protective Factors Survey (PFS) for use with a Spanish-speaking sample and then pilot tested, refined, and implemented the English and Spanish versions of the PFS. Using public data, she examined the quality of community assets in the areas of health care, local services such as grocery stores and transportation, employment, housing, mental health services, child care, schools, and recreation.

Analysis of Building Understanding Data: A Study of Transracial and Inracial Adoptive Families – For a graduate social work course, Dr. Lorthridge used secondary data to study the ethnic identity of transracially and inracially adopted children. She created a subsample database in SPSS, derived variables, analyzed data, and prepared a final paper.

Contract Researcher, Los Angeles/Pasadena, CA (2005 to 2007, 2008 to 2009)

LEGACY – Dr. Lorthridge joined a multidisciplinary team that had developed a public health intervention targeting disparities in prenatal and birth outcomes among African American women. The research team partnered with a faith-based institution to deliver a psychoeducational program and conduct a congregation-wide survey. Dr. Lorthridge was responsible for survey database maintenance, including codebook updating, data entry, derivation of variables, and data analysis.

Child Care Training Institute Evaluation, Los Angeles County Office of Education – In support of 2006 and 2007 outcome evaluations, Dr. Lorthridge created an SPSS database, entered survey data, derived variables, and provided analysis and interpretation. She edited the 2006 evaluation report and drafted the 2007 report.

Other Professional Experience

Intercommunity Child Guidance Center, Whittier, CA, 2004-2005 – As a clinical intern Dr. Lorthridge used assessment tools to document the presence of DSM classifiable issues along with clients' needs, and strengths. She then used the assessments to guide interventions for juvenile clients and their families based on cognitive behavioral techniques, advised school administrators and teachers on behavioral interventions, educated parents about developmental stages, tasks and needs of their children, facilitated agreements with parents and educational personnel in regards to appropriate disciplinary tactics and preventative measures.

City of Los Angeles Workforce Investment Board, Los Angeles, CA (2003 to 2004) – As a project program specialist supporting the city's Health Careers Ladder Program, Dr. Lorthridge created and maintained a participant database; developed, edited, and delivered the multimedia program curriculum; and presented oral and written reports to the Workforce Investment Board, the city council, and a project taskforce. She disseminated academic information to case managers, and coordinated and ran program orientations for participants and case managers. As part of the multidisciplinary project management team, Dr. Lorthridge oversaw daily program operations, which included immediate response to requests for information from funders and stakeholders. She worked with the taskforce workgroup to evaluate participants' future academic and remedial needs and to conduct a needs assessment to determine the financial aspects of

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remediation, the desired qualifications of remedial staff, locations for remediation, and alignment of vendor needs with budget forecasts.

Atlanta Police Department, Atlanta, GA (1998 to 2002) – Working as a police officer, Dr. Lorthridge responded to 911 calls for service and to citizen-initiated requests. She also assisted in obtaining goods and services for citizens in need of concrete supports.

Awards and Professional Achievements

Doris Duke Fellow for the Prevention of Child Abuse and Neglect, 2011-2012

Casey Family Programs Doctoral Scholar, 2010-2012

Grant Reviewer, W.M. Keck Foundation and California Community Foundation, 2011

Consultant Pool Member, First 5 LA, 2010-2011

Publications, Technical Reports, and Presentations

Publications

McCroskey, J., Pecora, P.J., Franke, T., Christie, C.A., and Lorthridge, J. (2012). Strengthening families and communities to prevent child abuse and neglect: Lessons from the Los Angeles Prevention Initiative Demonstration Project. *Child Welfare*, 91(2), 39-59.

Lorthridge, J., McCroskey, J., Pecora, P., Chambers, R., and Fatemi, M. (2012). Strategies for improving child welfare services for families of color: First findings of a community-based initiative in Los Angeles. *Children and Youth Services Review*, 34, 281-288.

McCroskey, J., Pecora, P.J., Franke, T., Christie, C., and Lorthridge, J. (2012). Can public child welfare help to prevent child maltreatment? Promising findings from Los Angeles. *Journal of Family Strengths*, 12(1), 1-23.

Technical Reports

McCroskey, J., Yoo, J., Lorthridge, J., Chambers, R., Carter-Williams, S., and Cienfuegos-Mercado, Y. (2010). *Improving child welfare practice in Los Angeles County: Implementing Point of Engagement and other Title IV-E waiver strategies* (for Los Angeles County Board of Supervisors and Department of Children and Family Services). Los Angeles, CA/Seattle, WA: Los Angeles County Department of Children and Family Services/Casey Family Programs.

McCroskey, J., Franke, T., Christie, T., Pecora, P.J., Lorthridge, J., Fleischer, D., and Rosenthal, E. (2010). *Prevention Initiative Demonstration Project: Year two evaluation report volume 1* (for Los Angeles County Board of Supervisors and Department of Children and Family Services). Los Angeles, CA/Seattle, WA: Los Angeles County Department of Children and Family Services/Casey Family Programs.

- McCroskey, J., Lorthridge, J., Kim, J., Chen, G., Fleischer, D., and Pecora, P.J. (2010). *Prevention Initiative Demonstration Project: Year two evaluation report volume 2: Profiles of PIDP networks* (for Los Angeles County Board of Supervisors and Department of Children and Family Services). Los Angeles, CA/Seattle, WA: Los Angeles County Department of Children and Family Services/Casey Family Programs.
- McCroskey, J., Christie, T., Lorthridge, J., Chambers, R., Pecora, P.J., Azzam, T., Fleischer, D., Rosenthal, E., Weisbart, A., Custodio, C., Franke, T., Nunn, P., Carter, S., Yoo, J., Bowie, P., and Wold, C. (2009). *Prevention Initiative Demonstration Project year one evaluation* (for Los Angeles County Board of Supervisors and Department of Children and Family Services). Los Angeles, CA/Seattle, WA: Los Angeles County Department of Children and Family Services/Casey Family Programs.
- Pecora, P.J., McCroskey, J., Lorthridge, J., Chambers, R., Franke, T., Christie, T., Azzam, T., Fleischer, D., and Carter Williams, S. (2009). *Midcourse lessons learned from the Los Angeles County Prevention Initiative Demonstration Project: Early successes, partnerships, and the challenges that lie ahead* (for Los Angeles County Board of Supervisors and Department of Children and Family Services). Los Angeles, CA/Seattle, WA: Los Angeles County Department of Children and Family Services/Casey Family Programs.

Presentations

- Brodowski, Boller, Lorthridge, J., and Rauner. (2012, September). *After you graduate: Opportunities outside the academy* (panel presentation). Doris Duke Fellowship for the Promotion of Child Well-Being Annual Meeting, Chapin Hall at the University of Chicago, Chicago, IL.
- Lorthridge, J., McCroskey, J., and Simon, J. (2011, August). *Involving front-line staff in child welfare research*. National Child Welfare Evaluation Summit, Washington, DC.
- McCroskey, J., Pecora, P., Franke, T., and Lorthridge, J. (2011, August). *The role of evaluation in fostering innovation* (panel presentation). National Child Welfare Evaluation Summit, Washington, DC.
- Pecora, P., Garrison, M., Armstrong, B., and Lorthridge, J. (2011). *Community-based approaches to strengthening families: The Prevention Initiative Demonstration Project (PIDP)*. Education and Learning Committee Meeting, LA Partnership for Early Childhood Investment, Los Angeles, CA.
- Lorthridge, J. (2011, February). *Identification of community and parental protective factors: A step towards preventing maltreatment in early childhood*. Project ABC National Conference, Strive to Thrive: Building Systems That Care for Birth to Fives, Los Angeles, CA.
- Pecora, P., McCroskey, J., Armstrong, B., and Lorthridge, J. (2010). *Community-based prevention of child abuse and neglect: The Los Angeles Prevention Initiative Demonstration Project (PIDP)* (invited). Casey Family Programs and the University of Washington School of Social Work, Seattle, WA.

McCroskey, J., Christie, C., Chambers, R., Azzam, T., and Lorthridge, J. (2009, November). *Findings from the first year evaluation of LA County's Prevention Initiative Demonstration Project (PIDP)*. A New Beginning for Partnerships for Children and Families in Los Angeles County, 14th Annual Partnerships Conference, Los Angeles, CA.

McCroskey, J., Chambers, R., and Lorthridge, J. (2009, November). *Multiple stakeholder evaluation: An essential component for transforming child welfare systems*. Council on Social Work Education 55th Annual Program Meeting, San Antonio, TX.

McCroskey, J., Azzam, T., Christie, C., Icenhower, K., Lorthridge, J., and Marts, E. (2009). *A new approach to preventing child abuse and neglect*. Chadwick Center for Children and Families at Rudy Children's Hospital—San Diego International Conference on Child and Family Maltreatment, San Diego, CA.

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Gail M.L. Thomas

Summary

Gail Thomas is a Westat Senior Study Director with 15 years of experience managing and conducting multimode process and outcome data collections involving at-risk youth, clergy, and the elderly. Ms. Thomas has helped develop and test instruments, trained and directed field staff for quantitative and qualitative studies, and advanced data collection quality and production. She served as field director for both the Assessment and Evaluation of the Tennessee Subsidized Guardianship Waiver Demonstration Project and the Assessment and Evaluation of the Wisconsin Subsidized Guardianship Initiative. Currently, she is a task leader for the Association of American Universities Campus Climate Survey on Sexual Assault and Sexual Misconduct and provides service data analysis for the process evaluation of the Michigan IV-E Waiver Evaluation, Protect MiFamily. Since 2010, she has been the field director for Spirited Life, the Clergy Health Initiative's multiyear health and wellness program and behavioral health study for pastors, a project of the Divinity School of Duke University. Ms. Thomas was the project director for the Clergy Health Initiative Longitudinal Study in 2010, 2012, and 2014. In 2013, she was project director for the Congregational Decision-Making About Clergy Compensation Study for Duke University's School of Sociology and the Lilly Endowment. She also served as field director for the Family Finding Evaluation. Ms. Thomas has helped develop and test instruments, trained and directed field staff for quantitative and qualitative studies, and provided oversight of data collection quality and production.

Education

M.A., Human Sciences, Hood College, 2014

Postbaccalaureate Certificate, International Business, Georgetown University, 1993

B.A., News-Editorial Journalism, University of Wisconsin, 1976

Relevant Project Experience

Westat (2000 to Present)

AAU Campus Climate Survey on Sexual Assault and Sexual Misconduct

Client: Association of American Universities (AAU)

Project Overview: AAU is supporting its member universities in developing their own coordinated responses to preventing and responding to sexual misconduct on campus by sponsoring the development of a survey that measures the incidence and prevalence of sexual misconduct and the campus "climate" around it. Westat is assisting AAU by developing this web-based survey, promoting and administering it at participating universities, and analyzing the data. The survey is being tested with samples of students at several AAU member universities before full implementation.

Responsibilities: Responsible for obtaining Federal NIH Certificate of Confidentiality for Westat and the 27 participating universities. Task manager for survey promotion, co-led

development of customizable promotion campaign materials for schools, including poster images, radio spots and social media. Campaign materials were tailored to address a range of attitudes toward survey subject.

Michigan Title IV-E Waiver Demonstration Project, Protect MiFamily

Client: Michigan Department of Human Services

Project Overview: Michigan's Protect MiFamily Program provides an innovative array of prevention services to families with young children who are at high or intensive risk for maltreatment as determined by child protective services. The demonstration is being implemented by private agencies in Kalamazoo, Macomb, and Muskegon Counties. The Children's Bureau of the U.S. Department of Health and Human Services mandates an independent evaluation of each waiver demonstration project. Westat's activities involve evaluation plan and methodology development, including random assignment, statistical measurement, and analysis methodologies; implementation of process and outcome evaluations; primary and administrative data collection; outcome measurement and analysis; cost-benefit and cost-effectiveness analysis; and preparation of reports.

Responsibilities: Ms. Thomas plans, reports, and provides analysis of service data for the process evaluation area of the demonstration. She set up the e-Deca and Protective Factors Database and trained site liaisons to use these applications. She also developed social worker guidelines for administering study instruments.

Clergy Health Initiative Survey

Client: Duke Divinity School

Project Overview: The purpose of the Clergy Health Initiative is to assess, track, and improve the physical, spiritual, and emotional health of United Methodist Church (UMC) clergy in North Carolina. As a subcontractor, Westat conducted a longitudinal, multimode survey of all UMC clergy in North Carolina. Findings from the 2008 baseline survey led to the creation of Spirited Life, a multiyear health and wellness program and behavioral health study for UMC pastors. The survey was repeated in 2010, 2012, and 2014.

Responsibilities: Deputy project director (2008) and project director (2010, 2012, and 2014).

Clergy Health Initiative Data Collection and Tracking

Client: Duke Divinity School

Project Overview: The Clergy Health Initiative is testing the impact of Spirited Life, a multiyear health coaching and wellness program, on the health and well-being of United Methodist ministers in North Carolina. Approximately 350 pastors have been randomly assigned to participate in each cohort (2011, 2012, or 2013), with the later cohorts serving as a control for the first cohort. Data collection includes web surveys and health screenings every 9 months. Westat tracks participant progress in fulfilling program requirements, prompts participants to complete surveys and sign up for health screenings and workshops, tracks blood collection, and cleans and merges participant and medical provider data. Westat also designed a case management system that Duke health coaches use to track pastors' progress in meeting health goals.

Responsibilities: Field director.

Congregational Decision-Making About Clergy Compensation

Client: Lilly Endowment

Project Overview: Westat assisted the Duke University School of Sociology in surveying Protestant pastors and lay leaders about clergy compensation in their churches. The survey was

first conducted in 2011 with a sample of 100 congregations from 14 Protestant denominations in three North Carolina counties. In 2013, a second site (Allen County, IN) was added, with a sample of 85 congregations in 15 Protestant denominations. Within each church, Westat conducted in-person interviews with the head clergy member, as well as telephone interviews with lay leaders formally involved in clergy compensation decisions. The surveys were qualitative and all interviews were recorded.

Responsibilities: Field director/acting project director (2011) and project director (2013). Ms. Thomas was involved in all aspects of preparing the project for the field and was responsible for all aspects of project performance.

Data Collection for the Family Finding Evaluation

Client: Duke Endowment

Project Overview: From 2009 to 2013, Westat assisted in evaluating Family Finding, an intensive family search program that tries to reconnect children in foster care with blood relatives. Westat conducted in-person interviews with youth (aged 14-22) who were in, or had recently exited, foster care and who were randomly assigned to either the Family Finding treatment group or a control group. Westat field interviewers used a CAPI interview with an ACASI component to interview youth 12 and 24 months after random assignment. The instrument collected youth outcome data in the domains of social support, mental and physical health, education, employment, and risk behaviors.

Responsibilities: Field director.

Assessment and Evaluation of the Tennessee Subsidized Guardianship Waiver

Demonstration Project

Client: Tennessee Department of Children's Services

Project Overview: Under Title IV-E Waiver authority, Tennessee used Federal funds to test whether a subsidized guardianship benefit would increase permanence for children and improve child outcomes. Working as a subcontractor, Westat randomly assigned children to treatment (eligible for subsidized guardianship) and control groups and administered a telephone survey in which caregivers were asked about the factors influencing their permanence decisionmaking. The project included an outcome evaluation to estimate impact on permanence, safety, stability, and child well-being; a process study; and a cost analysis.

Responsibilities: Field director. Ms. Thomas directly supervised field staff in all aspects of data collection. She managed sample release to the field and oversaw productivity and data quality.

Assessment and Evaluation of the Wisconsin Subsidized Guardianship Initiative

Client: Wisconsin Department of Health and Family Services

Project Overview: Under Title IV-E Waiver authority, Wisconsin used Federal funds to test whether a subsidized guardianship benefit would increase permanence for children and improve child outcomes. Westat and two subcontractors conducted a longitudinal study of the status and outcomes of children and families, using a treatment group (eligible for subsidized guardianship) and a control group. The contractors interviewed caregivers at enrollment and collected administrative data on outcomes, case history, and case planning. The study included an outcome evaluation to estimate the impact on permanency, safety, stability, and child well-being; a process evaluation to understand the context in which outcomes exist; and a cost analysis to estimate savings accrued by subsidized guardianship.

Responsibilities: Field manager. Ms. Thomas directly supervised field interviewers. She wrote the field manual and co-led the training. She oversaw productivity, sample release, and data collection quality.

Study of Services for Children and Families in Palm Beach County

Client: Palm Beach County (FL) Children's Services Council

Project Overview: Westat worked with Chapin Hall Center for Children on this longitudinal study, which followed 500 families over a 5-year period. Mothers were recruited in the four neediest target geographic areas soon after they gave birth. Westat conducted annual in-person interviews for 5 years, as well as intermediate 6-month telephone interviews. Interviews were conducted in English, Spanish, and Creole.

Responsibilities: Field director. Ms. Thomas worked closely with field staff, overseeing productivity and the work quality of individual interviewers and managing sample releases.

Program Evaluation Activities and Related Services

Client: Corporation for National and Community Service (CNCS)

Project Overview: The purposes of this task order contract were to conduct policy evaluations and descriptive studies and to provide analytic and technical support services for CNCS. Westat undertook more than 40 tasks. This work included web-based and telephone surveys of program participants, full-scale program evaluations, case studies, database quality assessments, and other activities to evaluate CNCS programs such as AmeriCorps, Senior Corps, Retired and Senior Volunteer Program, Foster Grandparents, and VISTA. Westat also analyzed CNCS's field management organizational structure and helped CNCS develop program performance objectives required under GPRA.

Responsibilities: Operations manager. Ms. Thomas coordinated and directed the administration of three PAPI surveys [The Independent Living Survey (2005, 2006); The Mentoring Children Survey (2005)] by telephone to service recipients of two Senior Corps' programs. Ms. Thomas collaborated on instrument development for the surveys, identifying key issues and writing questions. She developed survey protocols and acted as lead trainer for the surveys.

Neighborhood Survey for the Duke Endowment Child Abuse Prevention Initiative

Client: Duke Endowment

Project Overview: The Duke Endowment funded two projects (the Durham Family Initiative in North Carolina and the Strong Communities project in South Carolina) that implemented strategies to change attitudes toward children and families at the individual, community, and policy levels. As part of the evaluation of the projects, Westat completed a 2004 baseline household survey of a random sample of community residents in the two intervention counties and in comparison counties. In 2007, Westat conducted a followup survey in these neighborhoods to measure change over time.

Responsibilities: Field director. Ms. Thomas directly supervised the field supervisor and 25 field interviewers. She wrote the field manual, co-led the training, and oversaw productivity and data collection quality.

Awards and Professional Achievements

Outstanding Graduate Student Award for the Human Sciences Program, Hood College, 2014-2015

Publications, Technical Reports, and Presentations

Publications

Schneider, S., Burke-Garcia, A., and Thomas, G. (2015). Facebook as a tool for respondent tracing. *Survey Practice*, 8(2). doi:<http://www.surveypractice.org/index.php/SurveyPrac>

Technical Reports

Thomas, G. (2014). *Report on the 2014 Clergy Health Initiative Survey, Round 4* (for Duke Divinity School). Rockville, MD: Westat.

Thomas, G. (2013). *Report on round 2 field data collection for Child Trends' Evaluation of the North Carolina Family Finding Program* (for Child Trends). Rockville, MD: Westat.

Thomas, G. (2012). *Report on baseline field data collection for Child Trends' Evaluation of the North Carolina Family Finding Program* (for Child Trends). Rockville, MD: Westat.

Thomas, G. (2012). *Report on the 2012 Clergy Health Initiative Survey, Round 3* (for Duke Divinity School). Rockville, MD: Westat.

Thomas, G. (2012). *Report on baseline field data collection for Child Trends' Evaluation of the North Carolina Family Finding Program* (for Child Trends). Rockville, MD: Westat.

Thomas, G. (2011). *Report on a Survey of the Thriving Rural Communities Initiative and Thriving Latino/Hispanic Communities Initiative* (for Center for Assessment and Policy Development). Rockville, MD: Westat.

Thomas, G. (2011). *Report on the 2010 Clergy Health Initiative Survey, Round 2* (for Duke Divinity School). Rockville, MD: Westat.

Thomas, G., Silva, P., Kline, A., and Thomas, C. (2005). *Public report on the results of the 2005 Mentoring Children Survey of the Foster Grandparents Program* (for Corporation for National Service). Rockville, MD: Westat.

Thomas, G., Silva, P., Kline, A., and Thomas, C. (2005). *Public report on the results of the 2005 Independent Living Survey of the Senior Companion Program* (for Corporation for National Service). Rockville, MD: Westat.

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Karla Eisen

Summary

Karla Eisen is a Westat Senior Study Director with more than 20 years of experience in research and program evaluation as well as direct service provision for civilian, Native American Indian, juvenile justice, military, and social service programs. Her areas of expertise include qualitative approaches to data collection and analysis as well as survey operations. She has experience in program evaluation, case studies, ethnographic methods, instrument design, and field data collection. Ms. Eisen also uses computer-assisted qualitative data analysis software, primarily NVivo, in her analytic work and has presented on the subject at conferences nationally and internationally. In addition, she has significant content matter expertise on a wide variety of social issues. Some of the content areas in which she has worked include child welfare systems, child abuse and neglect; juvenile justice; Indian Country corrections, treatment and prevention of alcohol, tobacco, and other drug abuse; and maternal and child health care. Ms. Eisen also has direct clinical experience as a social worker in family-centered health care and substance abuse treatment programs for pregnant and parenting women and children at risk for HIV/AIDS. She was involved in public education, training, and technical assistance for personnel working with these populations.

Education

M.P.H., Johns Hopkins School of Hygiene and Public Health, 1994

M.S.W., Hunter College School of Social Work, 1988

B.A., Human Development and Social Relations, Earlham College, 1986

Relevant Project Experience

Westat (1999 to Present)

National Child Welfare Capacity Building Center for Tribes (CBCT)

Client: Administration for Children and Families, U.S. Department of Health and Human Services (HHS)

Project Overview: A service of the Children's Bureau, CBCT serves as the focal point for coordinated and culturally competent training and technical assistance to Title IV-B and IV-E programs in American Indian and Alaska Native Nations. CBCT works collaboratively with other supported initiatives to support tribes in achieving sustainable, systemic change that results in greater safety, permanency, and well-being for children, youth, and families. As a subcontractor, Westat is primarily responsible for developing tools, processes, and data management systems that reflect Constant Quality Improvement for tribes receiving services from the Center.

Responsibilities: Ms. Eisen serves as the project director. She is responsible for managing all aspects of the work and serves on the Executive Steering Committee and the Cross Center Collaborative teams.

Michigan Title IV-E Waiver Demonstration Project, Protect MiFamily

Client: Michigan Department of Human Services

Project Overview: Michigan's Protect MiFamily Program provides an innovative array of prevention services to families with young children who are at high or intensive risk for maltreatment as determined by child protective services. The demonstration is being implemented by private agencies in Kalamazoo, Macomb, and Muskegon Counties. The Children's Bureau of the U.S. Department of Health and Human Services mandates an independent evaluation of each waiver demonstration project. Westat's activities involve evaluation plan and methodology development, including random assignment, statistical measurement, and analysis methodologies; implementation of process and outcome evaluations; primary and administrative data collection; outcome measurement and analysis; cost-benefit and cost-effectiveness analysis; and preparation of reports.

Responsibilities: Process Evaluation Lead. Ms. Eisen Process evaluation lead. Ms. Eisen leads the process evaluation, which includes a fidelity assessment of the program model, a family satisfaction survey, service data analysis, review of agency documentation and on site data collection and analysis of interview and focus group data. leads the process evaluation which includes a fidelity assessment of the program model, a family satisfaction survey, service data analysis, review of agency documentation and on site data collection and analysis of interview and focus group data.

Tasks to Assess Mental Health Care Provided to Veterans of Iraq and Afghanistan

Client: U.S. Department of Veterans Affairs (VA)

Project Overview: As a subcontractor to the Institute of Medicine, Westat is conducting a project to assess the quality of mental health care provided to veterans of Iraq and Afghanistan (Operation Enduring Freedom, Operation Iraqi Freedom, and Operation New Dawn). Westat is (1) designing and administering a survey to assess barriers to VA mental health services, by comparing veterans who have used the VA system for mental health care with VA-eligible veterans who have not, and (2) designing and conducting site visits to all 21 Veterans Integrated Service Networks (VISNs) to determine the quality of the mental health care provided and learn why some eligible veterans are not seeking these services. Westat is responsible for sampling frame development and sample selection; survey development, deployment, and tracking; site visit and focus group development and coordination; and data processing, analysis, and reporting.

Responsibilities: Site visit team leader. Ms. Eisen is conducting site visits to four VISNs. She will conduct an environmental scan to identify community services and providers, conduct interviews with community providers and Veterans Administration staff, and run focus groups with veterans. Ms. Eisen will provide briefings to the IOM as necessary and develop analytic reports of each visit.

Evaluation of the Permanency Innovations Initiative (PII)

Client: Administration for Children and Families, U.S. Department of Health and Human Services (HHS)

Project Overview: Under the 5-year PII, the Children's Bureau has funded six grantees to develop and implement innovative interventions in their state or county child welfare systems to reduce long-term foster care and improve outcomes for children who experience serious barriers to permanency. Under a task order, Westat and its subcontractors are conducting cross-site and site-specific evaluations of the interventions. Activities include completing the designs of rigorous site-level evaluations (using randomized control groups wherever feasible), implementing the evaluations (monitoring the fidelity of the interventions and collecting primary data on proximal

outcomes from treatment and comparison cases), collecting and analyzing administrative data on distal outcomes (children's exit from foster care and permanent placement), studying the implementation process, and conducting a cost study to assess the resource requirements of grantees' interventions. Two sites are in California.

Responsibilities: Evaluation site lead. Using a randomized controlled design, Ms. Eisen is developing an evaluation plan for a multiprong intervention aimed at reducing foster care placement and length of placement for children. She assisted in designing data collection instruments, logic models, IRB applications, and quality assurance tools. Ms. Eisen worked with the site to secure administrative data and is conducting a site-level case study to document the implementation context. She collaborates with project staff and training and technical assistance partners in reviewing implementation plans and protocols.

Survey of Jails in Indian Country

Client: Bureau of Justice Statistics (BJS)

Project Overview: For the 2007 to 2011 Surveys of Jails in Indian Country, Westat collected data from more than 80 correctional facilities operated by tribal authorities or BIA. Westat is also the data collector for the 2012 and 2015 surveys. Westat is working with BJS to ensure that all facilities are listed, conducting the mail surveys, holding meetings with tribal leaders and stakeholders to discuss ways of improving the survey, and preparing written recommendations for improvement. Project staff also conduct analyses comparing Indian jails to similar rural jails on key factors such as capacity and staffing.

Responsibilities: Project director. Ms. Eisen oversees data collection, validation, and data tracking. She supervised development of validation reports. As data manager for the 2009 collection, she assisted with these tasks.

American Community Survey (ACS) Cognitive Testing

Client: U.S. Census Bureau

Project Overview: The American Community Survey and Puerto Rico Community Survey are conducted by the U.S. Census Bureau and provide a rich source of information for Federal agencies and for state and local governments. Under an R&D task order contract with the Census Bureau, Westat will test updated questions on cohabitation/domestic partnership, race and Hispanic origin, health insurance premiums and subsidies, telephone service, computer and Internet use, commuting mode, time of arrival at work, number of weeks worked, class of worker, industry and occupation, and retirement income. Westat and a subcontractor will conduct more than 400 cognitive interviews in English and Spanish over three rounds of testing, summarize and analyze the interviews, and report the findings from each round of testing.

Responsibilities: Database manager and analyst. Ms. Eisen was responsible for constructing and managing the data base for large volumes of qualitative data using the NVivo software, importing and linking quantitative attributes, merging databases routinely from multiple coders, coding data, and producing analytic reports. She assisted in the development of codable note templates, thematic coding structures, training coders, and providing technical assistance on use of the software and coding.

Understanding Urban American Indians' Interactions with ACF Services and Programs

Client: Office of Research, Policy, and Evaluation and Administration for Native Americans, Administration for Children and Families (ACF), U.S. Department of Health and Human Services (HHS)

Project Overview: This exploratory study was conducted to better understand the context for family self-sufficiency among low-income Alaska Natives and American Indians living in urban areas and their interactions with services and programs offered by ACF. Westat reviewed current literature on urban American Indians, convened a technical working group to provide input on the research design, and completed in-depth telephone interviews with directors of 34 Urban Indian Centers across the United States. Project deliverables included a comprehensive review of current literature and a report summarizing findings and recommendations from the in-depth interviews.

Responsibilities: Ms. Eisen conducted interviews and assisted in the thematic analysis of the data.

Planning and Design Options for Evaluation of the Long-Term Foster Care Initiative (Permanency Innovations Initiative)

Client: Administration for Children and Families, U.S. Department of Health and Human Services (HHS)

Project Overview: Under this 5-year initiative, the Children’s Bureau funded six grantees to develop and implement innovative interventions in their state or county child welfare systems to reduce long-term foster care and improve outcomes for children who experience serious barriers to permanency. During this planning year, Westat and its subcontractors designed a comprehensive evaluation plan for the initiative. The evaluation team coordinated with grantees to formulate site-specific evaluation plans (including identifying their target populations, interventions, comparison groups, and outcome measures; conducting evaluability assessments of these plans; developing instruments; and obtaining necessary IRB clearances). Additionally, the evaluation team designed a cross-site evaluation plan and generated resource estimates for evaluation activities during future years of the initiative.

Responsibilities: Site team leader for a grantee. Ms. Eisen oversaw evaluability assessment, developed evaluation plans, and provided evaluation technical assistance.

National Evaluation of the Safe Kids/Safe Streets Program

Client: Office of Juvenile Justice and Delinquency Prevention, U.S. Department of Justice (DOJ)

Project Overview: Under this grant, Westat conducted a process and impact evaluation of five sites funded under the Safe Kids/Safe Streets Initiative. The evaluation examined the strategies undertaken to build comprehensive community collaboratives; to plan, implement, and sustain large system reform initiatives; to examine outcomes of such reforms at the community, system, agency, family, and child level; and to ensure successful programs. Project staff provided technical assistance to local evaluators and stakeholders to improve the capability and utility of local data systems and to develop the capacity of program sites to evaluate what works in their communities. The methodologies used included a case study approach to document program experiences and results and cross-site approaches to measure results through interviews with key informants, stakeholders, and agency personnel; the collection of administrative data; and abstracting of outcome data on child abuse cases in the records of multiple agencies.

Responsibilities: Senior research associate. Ms. Eisen served as site coordinator for two sites, including a Native American Indian/Tribal Nation site. She was responsible for data collection, annual case studies, and evaluation technical assistance. For the key informant task, she designed interviews, trained interviewers, and was responsible for analysis and report writing. She presented study findings at national conferences.

Effects of Multiple Deployments on Military-Dense Communities

Client: Institute of Medicine (IOM), National Academy of Sciences

Project Overview: IOM is undertaking a large study to determine the physical and mental health and other readjustment needs of members and former members of the Armed Forces who were deployed in Operation Enduring Freedom (OEF) or Operation Iraqi Freedom (OIF) and of their families and communities. Westat was involved in the Community Subgroup component, which used qualitative methods to understand what issues had emerged in these communities as a result of multiple deployments, how the communities responded to the changes, what emerging challenges were most problematic for these communities, and what, if any, assistance they needed to move forward. The ethnographic data collection strategy included site visits to six communities near large military bases from which service members were deployed multiple times in support of OIF/OEF.

Responsibilities: Site lead. Ms. Eisen served as senior ethnographer on one site visit and assisted in writing the site report.

Tribal Crime Data Collection, Analysis, and Estimation Project

Client: Bureau of Justice Statistics, U.S. Department of Justice (DOJ)

Project Overview: The lack of tribal crime data in the FBI's Uniform Crime Reporting program means that tribes are unable to receive direct grant awards under the Edward Byrne Memorial Justice Assistance Grant program, which supports state and local activities to prevent and control crime and improve the criminal justice system. Westat established and met with tribal advisory groups, collaborated with the FBI and other branches of law enforcement to establish data requirements, and provided training and technical assistance to improve data reporting.

Responsibilities: Senior research associate. Ms. Eisen assisted with and participated in two training conferences on Uniform Crime Reporting tailored to representatives of tribal law enforcement and justice systems.

Analyses and Use of Qualitative Survey Responses

Client: TRICARE Management Activity (TMA), U.S. Department of Defense (DOD)

Project Overview: Westat reviewed, coded, and analyzed respondent data provided in open-ended and free-text format on surveys of participants in the military health system. Deliverables included quarterly and final summative project reports, executive-level briefings, and recommended action plans for TMA.

Responsibilities: Ms. Eisen worked with a team of analysts to review, code, and analyze open-ended comments on TRICARE surveys. She also managed an NVivo qualitative database and produced reports.

Upper Columbia River Tribal Use and Consumption Survey

Client: U.S. Environmental Protection Agency (EPA)

Project Overview: This project was conducted by EPA and the Colville Confederated Tribes (CCT) to quantify exposures to local resources (foods, medicines, and materials used to produce clothing, ornaments, and infrastructure). Westat was responsible for overall study development, including study design and sampling strategies, data collection instruments, forms and procedures, and training of CCT interviewers. Data collection involved up to five in-person visits, with up to four administrations of a dietary recall assessment. Under a more recent contract, Westat continues to revise and refine the final report and databases, after input from all interested parties.

Responsibilities: Field director. Ms. Eisen oversaw development of data collection procedures, automated data tracking systems, training of field supervisor and field interviewers, and ongoing data monitoring.

Comprehensive Review to Assess the Don't Ask, Don't Tell (DADT) Rule

Client: U.S. Department of Defense (DOD)

Project Overview: Westat administered an extensive review of the DADT policy, a law that barred openly gay soldiers from the military. This review obtained the views of 400,000 military personnel and 150,000 spouses from surveys, town hall meetings, focus groups, and confidential communications. Westat developed a comprehensive coding scheme and conducted analysis using NVivo 8. Westat provided a final report describing methods and analytic results.

Responsibilities: Senior research associate. Ms. Eisen worked on the qualitative analysis team, primarily as the manager of the NVivo database. She set up databases from a variety of qualitative sources (focus groups, online chat sessions, and emails) and tied them into quantitative attribute data. She structured and ran reports for the analytic team and also assisted in developing the coding scheme and interpreting findings.

Fourth National Incidence Study of Child Abuse and Neglect (NIS-4)

Client: Administration for Children and Families, U.S. Department of Health and Human Services (HHS)

Project Overview: The NIS-4 gathered data on all children investigated by the child protective services (CPS) agencies in a nationally representative sample of 122 counties, as well as on children identified by nearly 10,800 professional staff in almost 1,100 other community agencies. These other agencies included county sheriff's offices; county departments of juvenile probation, health, and public housing; municipal police departments; hospitals; public schools; daycare centers; shelters; and voluntary social services and mental health agencies. Study cases were reviewed to eliminate duplicates, evaluated to ensure that they met the study's standardized definitions of abuse and neglect, and weighted to represent all maltreated children in the nation. The NIS-4 also included several allied surveys to enhance the quality and interpretability of the main study's findings and to examine how the NIS results relate to National Child Abuse and Neglect Data System (NCANDS) statistics.

Responsibilities: As senior recruiter, Ms. Eisen gained the cooperation of state and county CPS agencies. She explained complex research and sample design issues and facilitated full compliance in all study activities from multiple agency levels over a multiyear period. She also completed applications to state and agency IRBs as needed to ensure their participation. In addition, Ms. Eisen was the senior interviewer for the Study of Screening Practices survey, which involved in-depth structured telephone interviews to identify CPS screening criteria. She was also part of the team responsible for developing a pilot test of data collection forms during the NIS-4 planning project.

Inventory and Evaluation of Clinical Research Networks

Client: National Center for Research Resources, National Institutes of Health (NIH)

Project Overview: This project was part of the NIH Roadmap initiative to improve the speed and effectiveness with which basic scientific discoveries are translated into clinical products and practices that improve health care. Westat (1) oversaw development of an inventory and database of all clinical research networks sponsored by the Federal Government, industry, foundations, and other governments, for posting on the web; (2) designed and conducted surveys of a sample of networks to describe existing practices and described these practices; (3) coordinated the

nomination and selection of network best practices; and (4) planned and facilitated a National Leadership Forum for 500 invited participants, to review project findings. Westat maintained the inventory of networks and funded small grants related to network collaboration.

Responsibilities: Ms. Eisen was part of the team responsible for identifying clinical research networks for the inventory and conducting in-depth descriptive interviews with network leaders both nationally and internationally. Using NVivo software, she served as the senior qualitative analyst of open-ended survey data. Ms. Eisen contributed to the analysis plan and coding structure and developed reports of qualitative data. Based on her experience, she coauthored a paper on the use of NVivo software for the analysis of in-depth interviews.

Evaluation of the HHS National Network of Tobacco Cessation Quitlines Initiative

Client: National Cancer Institute (NCI)

Project Overview: NCI and CDC are collaborating with state tobacco control programs and other partners to implement the National Network of Tobacco Cessation Quitlines, an HHS initiative to ensure access to quitline services for all Americans. Westat conducted a process evaluation and designed an outcome evaluation of this initiative. Contract activities included refining a logic model and evaluation plan, designing and conducting primary and secondary analyses of implementation data, and designing a detailed plan for a multiphase outcome evaluation. Westat also conducted a case study of the early planning and development phases of the initiative.

Responsibilities: Ms. Eisen was the senior qualitative interviewer and analyst for the case study. She conducted in-depth interviews with key informants representing government and private agencies. Ms. Eisen developed thematic categories, used NVivo software to analyze interview data, and wrote key analytic sections of the case study report. She also conducted in-depth structured interviews with senior staff involved in tobacco control as part of the process evaluation.

New York Prevalence Study of Sexually Exploited Youth

Client: New York State Office of Children and Family Services

Project Overview: The objectives of the prevalence study were to identify the number of commercially exploited children and their unique needs, examine the types of programs and services that best meet those needs, and review the capacity of the current children's service system. Using a prospective research design, Westat collected data from agencies most likely to come into contact with commercially sexually exploited children, including municipal and county law enforcement agencies, congregate foster care facilities, child advocacy centers, detention centers, probation offices, runaway and homeless youth programs, shelters, street outreach agencies, and other youth-serving agencies. Data were collected for a 2-month reference period and examined to ensure that cases fit the study definition. Data were then weighted to represent New York City and the sampled upstate counties and a full year.

Responsibilities: Ms. Eisen conducted qualitative interviews with agency staff, analyzed qualitative data, and summarized results for the final report.

Medicare Advantage CAHPS

Client: Centers for Medicare & Medicaid Services (CMS)

Project Overview: For 9 years, Westat was the prime contractor for the Medicare Advantage CAHPS, which annually collects information from approximately 190,000 beneficiaries enrolled in and recently disenrolled from Medicare Advantage plans. The survey provided information on members' experiences with various aspects of the plans. The survey component was conducted

by mail with telephone followup. Westat and a subcontractor conducted the survey, processed the results, and prepared consumer reports. The contract also included work on adjusting the survey results to account for demographic differences in plan enrollment, developing reporting materials for group purchasers, and analyzing survey results by population subgroup.

Responsibilities: Ms. Eisen contributed to two qualitative studies on the experiences of Medicare managed care enrollees. For a study to explore California Medicare Advantage (MA) enrollees' relatively low rating of their plans, the project team conducted cognitive interviews involving items on the MA CAHPS instrument, but within the context of a small group of beneficiaries. Ms. Eisen's responsibilities included project design, site selection, instrument development, data collection and analysis, and final report preparation. Ms. Eisen was co-task leader on the second study, which explored in greater depth the influence of community context on MA enrollees' satisfaction with their plans at four sites. Using rapid ethnographic assessment techniques (including in-depth interviews and focus groups with beneficiaries and caregivers), the study team examined medical and support services at each site, the extent to which enrollees were aware and made use of services, and community factors that impeded or facilitated efforts to receive medical care.

Survey of Youth in Residential Placement (SYRP)

Client: Office of Juvenile Justice and Delinquency Prevention, U.S. Department of Justice (DOJ)

Project Overview: Westat conducted the first national SYRP, which involved interviews with youth in residential facilities under juvenile justice authority. This survey was the first to apply ACASI interviewing in a group context by administering the ACASI to groups of up to 10 youth in order to complete a substantial number of interviews during relatively short facility visits. Westat revised the ACASI instrument developed under its earlier SYRP planning and design project and refined the sampling plan and study procedures for this national implementation. Over a 12-week period, interviews were completed with over 7,000 youth in more than 200 facilities nationwide, obtaining their self-reports about their backgrounds, offenses, needs (emotional, substance abuse, educational, health), services received, conditions of confinement, and experiences in custody.

Responsibilities: Ms. Eisen was the senior recruiter responsible for gaining the cooperation of state and county juvenile justice agencies. She explained complex research and sample design issues and facilitated full compliance with all study activities from multiple agency levels.

Evaluation of the Youth Opportunity (YO) Grant Initiative

Client: Employment and Training Administration, U.S. Department of Labor (DOL)

Project Overview: Westat was part of the team that conducted a 5-year study to evaluate the YO Grant Initiative, a program that provides a comprehensive range of services for in-school and out-of-school youth aged 14 to 21. The project included surveys in 36 YO areas to examine employment, educational attainment, and other factors in each community at program implementation and at subsequent points; process analyses of each area's program to document the service delivery process, including an analysis of management information systems data; analyses of data from the Decennial Census and the American Community Survey to define comparison areas and track changes in those areas between 2000 and 2003-2004; and ethnographic studies of community well-being in each area. As a key subcontractor, Westat conducted three waves of area surveys, participated in the process analysis, and provided staff for process and ethnographic site visits. Westat was also responsible for mapping, sampling, data preparation, and database development.

Responsibilities: Ms. Eisen was part of the process evaluation team and conducted several site visits in the final year of the project.

Communications and Social Marketing Support Services: Program Information for Persons Who Are Homeless

Client: Centers for Medicare & Medicaid Services (CMS)

Project Overview: The objectives of this task order were to compile information about basic eligibility requirements for various Federal programs and to make this information understandable and accessible to homeless people, service providers, and CMS Regional Office staff. Westat and two other contractors conducted an environmental scan and exploratory consumer research, developed and tested materials, prepared a dissemination plan and an evaluation plan, provided dissemination technical assistance, and prepared a final report.

Responsibilities: Task leader. Ms. Eisen supervised the environmental scan and interviews with key informants and also developed content concepts for products to be disseminated.

Parent and Family Strengthening Prevention Interventions: A Dissemination of Innovations Initiative

Client: Center for Substance Abuse Prevention (CSAP) and Office of Juvenile Justice and Delinquency Prevention (OJJDP)

Project Overview: Under a subcontract, Westat provided technical assistance on effective dissemination practices, customer service satisfaction measurement, and a process and outcome evaluation design for the Parent and Family Strengthening Prevention Intervention Project. The project was designed to (1) increase the capacity of communities to deliver best practices in effective parenting and family programs in order to reduce or prevent substance abuse, (2) document decisionmaking processes for the selection and testing of effective interventions in community settings, and (3) determine the impact of the interventions on target families in the study.

Responsibilities: Ms. Eisen assisted in reviewing and modifying the analysis plan, evaluation questions, and overall analysis schemata. She reviewed phase II evaluation data, conducted content analysis, developed coding schemes, and developed spreadsheets that could be imported into the existing database and combined with phase I data. She also wrote sections of the analysis report.

Planning the Survey of Youth in Residential Placement (SYRP) and the Educational Assessment Survey of Youth in Residential Placement (EASYRP)

Client: Office of Juvenile Justice and Delinquency Prevention, U.S. Department of Justice (DOJ)

Project Overview: Westat planned the SYRP, a survey designed to guide policymakers and practitioners in developing appropriate systems of accountability-based sanctions and operating systems of residential placement that meet the treatment needs of juveniles. Westat developed the survey instrument, formulated the methodology, and designed the sample for a periodic national survey of youth in residential facilities. The project team conducted a large field test to demonstrate the survey's utility and refine the design before implementing it nationally. Westat also planned the EASYRP, designed to assess the reading and mathematics abilities of juveniles who are in residential facilities because of offenses. Westat identified appropriate existing instruments, developed additional interview questions, and pilot tested the instruments in several facilities.

Responsibilities: Research associate. Ms. Eisen was part of the team responsible for developing the ACASI, field test design, and implementation procedures. She oversaw recruitment of

juvenile justice facilities for the survey, developed a recruitment database, and convened a practitioner advisory group.

Caliber Associates, Fairfax, VA (1994 to 1999)

National Evaluation Data and Technical Assistance Center (NEDTAC) – Ms. Eisen was a key staff member in the development of NEDTAC, which was funded by HHS’s Center for Substance Abuse Treatment (CSAT). She worked on national cross-site evaluations of the Residential Women and Children and Pregnant and Postpartum Women, HIV/AIDS Outreach, and Criminal Justice Networks. Ms. Eisen served as deputy project manager on a study of sustainability among grantees, which involved developing the research design, conducting an advisory panel meeting, developing data collection protocols and database formats, conducting interviews, and supervising and training other team members. She was involved in developing several technical assistance products to provide grantees with practical evaluation assistance. She also conducted needs assessments and focus groups and developed technical assistance, training, and knowledge development materials for grantees.

As task leader, Ms. Eisen managed collection and analysis of service delivery unit (SDU), project-level, and system-level data from hundreds of local projects. She had lead responsibility for developing the instruments and tailoring them to the needs of the populations of interest. Ms. Eisen supervised the creation of the database and analytic files and conducted qualitative and quantitative analysis. The SDU data reports developed by NEDTAC were the first program-wide statistical profiles of CSAT-funded SDUs that provided a comparative analysis of all projects participating in the cross-site evaluation.

Installation Status Report (ISR) Part III, Services – Ms. Eisen served as deputy project director and then technical director for this performance measurement and decision support system for the U.S. Army. The ISR III presented performance-based assessments of installation services provided by Government and contract employees. Ms. Eisen analyzed and synthesized prototype ISR III data and revised prototype instruments based on input from test installations worldwide. She helped develop beta test surveys, interviewed key personnel on Army installations, and briefed senior-level personnel at Army Headquarters. Ms. Eisen assisted with orientation and training briefings for military and civilian personnel and worked extensively with subject-matter experts and Headquarters proponents to develop performance standards for installation services. She assisted in preparing technical materials and facilitated small working groups at Tiger Team meetings. In addition, Ms. Eisen supervised creation of relational databases and development of a web-based data collection site that used Cold Fusion technology. She was responsible for software testing and the review of computer-based training modules.

Spouse Abuse in the Armed Services – Ms. Eisen was the deputy project director for this congressionally mandated study. She was responsible for development of a research plan for using case studies to evaluate program effectiveness, survey design, on-site data collection, qualitative data analysis, briefing preparation, and technical report writing, editing, and production. She coordinated the efforts of points of contact at military installations and designed and implemented site visit protocols.

Army Family Team Building – Ms. Eisen participated in the evaluation of a training program designed to increase the self-sufficiency of Army family members. She trained local volunteers to conduct focus groups with installation populations and conducted focus groups with civilian employees at several installations.

U.S. Navy Family Advocacy Program – Ms. Eisen was a key staff member on a team working to develop a strategic plan for the Family Advocacy Program, which is concerned with child and spouse abuse. She analyzed focus group data, prepared meeting agendas, facilitated small working groups, and wrote the draft strategic plan.

Target Cities and Rural, Remote, and Culturally Distinct Programs Multi-project Analyses – As task leader, Ms. Eisen coordinated data collection. She designed data collection forms, conducted in-depth interviews with local project directors and evaluators, and developed a data collection and data submission plan with both Native American Indian grantees and grantees located in large urban areas. She was responsible for interpreting qualitative data, preparing reports, and making presentations at grantee workshops.

Sociometrics, Inc., Silver Spring, MD (1994)

Army Family Advocacy Program – Ms. Eisen served as team leader for an evaluation of this program. She collected data at Army installations throughout the United States, prepared briefings, wrote reports, coordinated with installation points of contact, trained other team leaders, and consulted on the site visit protocol.

Johns Hopkins School of Hygiene and Public Health, Baltimore, MD (1993 to 1994)

Ms. Eisen worked with Johns Hopkins University's Eastern Shore Center for Public Health Research and Training, which was funded by HRSA. She conducted needs assessments, collected interview and survey data, and recruited an advisory board from rural health departments on the Eastern Shore of Maryland.

For the Health Program Alliance Council on Linkages Between Academia and Public Health Practice, Johns Hopkins University, Ms. Eisen developed and conducted an evaluation of the educational, training, and practice linkages between schools of public health, community-based organizations, and governmental agencies.

Thomas Jefferson University, Philadelphia, PA (1989 to 1993)

As a clinical supervisor at the Family Center, Ms. Eisen had research, administrative, and clinical responsibilities. In her research role, she worked on a national treatment demonstration project, funded by NIDA, comparing treatment outcomes and cost-effectiveness of residential and outpatient programs for cocaine-abusing pregnant women and their children. She developed data collection instruments, oversaw clinician training, and implemented the research protocol in the clinical setting.

In her administrative role, Ms. Eisen supervised daily clinic operations for high-risk pregnant and postpartum substance-abusing women and their children, developed programming and reporting

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mechanisms in accordance with Federal and state guidelines, provided clinical supervision for master's-level therapists, and coordinated staff development and training. She was also responsible for marketing the program throughout the medical and social service community and advocating for women's health care. In her clinical role, Ms. Eisen provided counseling and psychotherapy, case management, psychosocial evaluations, HIV counseling, and inpatient and outpatient medical social work functions within an urban hospital setting.

New York State Psychiatric Institute/HIV Center for Clinical and Behavioral Studies, St. Luke's-Roosevelt Hospital, New York, NY (1988 to 1989)

Ms. Eisen was the project social worker for a study of the sequelae of prenatal HIV infection in children. She designed and administered data collection instruments, developed systems to integrate the research protocol into the clinical setting, recruited and enrolled women and children at high risk for HIV infection, and tracked participants. Ms. Eisen's clinical responsibilities included case management, psychosocial evaluations, HIV counseling, and inpatient and outpatient medical social work functions.

Gay Men's Health Crisis, New York, NY (1987 to 1988)

Ms. Eisen worked on the first CDC-funded study of HIV and AIDS risk reduction education. She designed and administered data collection instruments, designed program interventions for diverse populations (including gay and bisexual men, criminal justice populations, and substance abusers), provided outreach, recruited field sites, trained and supervised group facilitators, and led an HIV/AIDS educational prevention program with recovering drug users in a residential treatment facility.

Publications, Technical Reports, and Presentations

Publications

Gragg, F., Cronin, R., and Eisen, K. (2007). Effective collaboration development and system reform: The Safe Kids/Safe Streets Experience. *The Link: Connecting Juvenile Justice and Child Welfare (Child Welfare League of America)*, 6(1).

Silverman, N.C., Kim, M., and Eisen, K. (1992). HIV knowledge among substance-addicted pregnant women. *American Journal of Gynecologic Health*, 6(4).

Technical Reports

Grady, M., Taylor, K., Eisen, K., and Carusi, C. (2007). *The Evaluation of the HHS National Network of Tobacco Cessation Quitlines Initiative case study report* (for National Cancer Institute). Rockville, MD: Westat.

Gragg, F., Petta, I., Bernstein, H., Eisen, K., and Quinn, L. (2007). *New York Prevalence Study of Sexually Exploited Youth: Final report* (for New York State Office for Children and Families). Rockville, MD: Westat.

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- Robins, C., and Eisen, K. (2005). *How context affects beneficiaries' experiences with Medicare Advantage: Findings from a four-site ethnographic community assessment* (for Centers for Medicare & Medicaid Services). Rockville, MD: Westat.
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- Roberts, T., Camarena, M., Dickson, L., and Eisen, K. (1997). *Client and child data report for the Residential Women and Children and Pregnant and Postpartum Women Demonstration Projects (April 1995-March 1996)* (for Center for Substance Abuse Treatment, U.S. Department of Health and Human Services). Fairfax, VA: Caliber Associates.
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- Coolbaugh, K., Gimbel, C., Eisen, K., and Wright, M. (1996). *Final report on the Study of Spousal Abuse in the Armed Forces* (for Office of the Under Secretary of Defense, Personnel and

Readiness, Personnel Support, Families and Education, Family Policy Support and Services). Fairfax, VA: Caliber Associates.

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Bishop, S., Wang, Z., Laxton, G., Opanga, M., and Eisen, K. (1995). *Aggregate quarterly report data for linkage of community based health care grantees FY94 summary* (for Center for Substance Abuse Treatment, U.S. Department of Health and Human Services). Fairfax, VA: Caliber Associates.

Presentations

Eisen, K., and Berkowitz, S. (2009, April). *A hands-on guide to analyzing qualitative data using NVivo software: Dos, don'ts, and lessons learned* (workshop). Eastern Evaluation Research Society Annual Meeting, Absecon, NJ.

Eisen, K., Zandberg, I., and Berkowitz, S. (2006, September). *Using NVivo software as part of a multi team analysis of in depth interview data in a mixed methods evaluation*. Conference on Strategies in Qualitative Research Using QSR Software, Durham, U.K.

Robins, C., Eisen, K., and Heller, A. (2005, October). *Government funding for ethnographic approaches in research* (panel presentation). Annual Meeting of the American Evaluation Association, Toronto, ON, Canada.

Robins, C., and Eisen, K. (2005, June). *Understanding Medicare managed care through surveys and ethnographic methods*. Academy Health Annual Research Meeting, Boston, MA.

Gragg, F., Eisen, K., and Schultz, D. (2005, April). *Leadership through comprehensive community collaboratives: The Safe Kids/Safe Streets experience*. 15th National Conference on Child Abuse and Neglect, Boston, MA.

Gragg, F., Schultz, D., Eisen, K., and Delany-Shabazz, R. (2004, November). *Community collaborative and system reform: Findings from Safe Kids/Safe Streets Demonstration Program*. Annual Meeting of the American Society of Criminology, Denver, CO.

Marneena L. Evans

Summary

Marneena Evans is a research analyst with more than 13 years of experience in child welfare and juvenile justice research and evaluation, qualitative analysis, training and technical assistance, and product development and dissemination. She currently conducts qualitative data collection and analysis for the evaluation of the Michigan Protect MiFamily IV-E waiver demonstration project, the evaluation of the Permanency Innovations Initiative, and the evaluation of the Hilton Foundation's Foster Youth Initiative. Ms. Evans also serves as the data collection manager for the Survey of Juveniles Charged in Adult Criminal Courts and a writer and analyst for the Capacity Building Center for Tribes. Previously, Ms. Evans conducted administrator interviews for the National Survey of Youth in Custody, conducted site visits (including focus groups with staff, youth, and caregivers), a case manager survey, and qualitative analysis for an evaluation of the Wisconsin Subsidized Guardianship Initiative IV-E waiver demonstration; worked with county child welfare agencies on administrative data issues for the ProtectOhio IV-E waiver evaluation; coordinated with county child welfare agencies for the North Carolina Family Finding Evaluation; conducted analysis and product development for the National Resource Center for Child Welfare Data and Technology; and conducted program reviews for a New York City Center for Economic Opportunity Program Evaluation.

Education

B.S., Foreign Service, Georgetown University, 2000

Relevant Project Experience

Westat (2000 to Present)

National Child Welfare Capacity Building Center for Tribes (CBCT)

Client: Administration for Children and Families, U.S. Department of Health and Human Services (HHS)

Project Overview: A service of the Children's Bureau, CBCT serves as the focal point for coordinated and culturally competent training and technical assistance to Title IV-B and IV-E programs in American Indian and Alaska Native Nations. CBCT works collaboratively with other supported initiatives to support tribes in achieving sustainable, systemic change that results in greater safety, permanency, and well-being for children, youth, and families. As a subcontractor, Westat is primarily responsible for developing tools, processes, and data management systems that reflect Constant Quality Improvement for tribes receiving services from the Center.

Responsibilities: Writer and analyst. Ms. Evans develops universal products for Tribal capacity building.

Michigan Title IV-E Waiver Demonstration Project, Protect MiFamily

Client: Michigan Department of Human Services

Project Overview: Michigan's Protect MiFamily Program provides an innovative array of prevention services to families with young children who are at high or intensive risk for maltreatment as determined by child protective services. The demonstration is being implemented by private agencies in Kalamazoo, Macomb, and Muskegon Counties. The Children's Bureau of the U.S. Department of Health and Human Services mandates an independent evaluation of each waiver demonstration project. Westat's activities involve evaluation plan and methodology development, including random assignment, statistical measurement, and analysis methodologies; implementation of process and outcome evaluations; primary and administrative data collection; outcome measurement and analysis; cost-benefit and cost-effectiveness analysis; and preparation of reports.

Responsibilities: Ms. Evans conducts qualitative analysis for the process evaluation. She also conducted site visits to CPS and private agency offices at demonstration sites.

Foster Youth Strategic Initiative

Client: Conrad N. Hilton Foundation

Project Overview: Westat is joined by two subcontractors to develop and implement an evaluation plan for the Foster Youth Initiative. The initiative promotes an environment of success for older foster youth by (1) increasing the self-sufficiency of transition-age youth through improved college and career readiness, stronger caregivers, and special services for high-risk youth; (2) strengthening collaboration and alignment throughout systems influencing foster youth outcomes; and (3) developing and disseminating knowledge for the field. The Westat team is evaluating progress toward the initiative's objectives by identifying and tracking systems-level outcomes. Data collection also includes review of grantee documents, analysis of program and system-specific administrative data, interviews with key decisionmakers and stakeholders, focus groups, and surveys, including a social network survey.

Responsibilities: Ms. Evans serves as an evaluation site liaison and conducts qualitative analysis of grantee activity.

Evaluation of the Permanency Innovations Initiative (PII)

Client: Administration for Children and Families, U.S. Department of Health and Human Services (HHS)

Project Overview: Under the 5-year PII, the Children's Bureau has funded six grantees to develop and implement innovative interventions in their state or county child welfare systems to reduce long-term foster care and improve outcomes for children who experience serious barriers to permanency. Under a task order, Westat and its subcontractors are conducting cross-site and site-specific evaluations of the interventions. Activities include completing the designs of rigorous site-level evaluations (using randomized control groups wherever feasible), implementing the evaluations (monitoring the fidelity of the interventions and collecting primary data on proximal outcomes from treatment and comparison cases), collecting and analyzing administrative data on distal outcomes (children's exit from foster care and permanent placement), studying the implementation process, and conducting a cost study to assess the resource requirements of grantees' interventions. Two sites are in California.

Responsibilities: Ms. Evans conducts qualitative analysis and reporting, manages the dissemination approval and tracking processes between PII grantees and the client, and helped develop the dissemination plan. She also developed and administers the evaluation's SharePoint

site, which is used by Federal staff, grantees, and the training/technical assistance and evaluation teams.

2009 Survey of Juveniles Charged in Adult Criminal Courts (SJCACC)

Client: Bureau of Justice Statistics, U.S. Department of Justice (DOJ)

Project Overview: The 2009 SJCACC is collecting information about the criminal case processing of juveniles in adult criminal courts across the country. This study will provide the first available data on how many youth are charged in criminal court, the characteristics of these youth, the pathways that lead them to criminal court, and the final disposition of their cases. Westat and a subcontractor are responsible for designing a sampling methodology to obtain reliable national estimates of juveniles charged as adults, collecting data on up to 12,000 cases through electronic records extraction and a hard-copy survey, and preparing a public use data set.

Responsibilities: Data collection manager.

Colorado Consortium for Differential Response

Client: Colorado State University

Project Overview: The Colorado Consortium for Differential Response was one of three demonstration projects selected through the Quality Improvement Center for Differential Response project of HHS Children's Bureau. As a subcontractor, Westat participated in a rigorous program evaluation, designed and monitored random assignment procedures and methodology, conducted surveys with parents and caregivers, and conducted quantitative analysis, including survival analysis and multiple regression.

Responsibilities: Ms. Evans contributed to the final evaluation report.

National Resource Center for Child Welfare Data and Technology (NRCCWDT)

Client: Children's Bureau, Administration for Children and Families, U.S. Department of Health and Human Services (HHS)

Project Overview: The goals of the NRCCWDT are to assist state and tribal child welfare agencies in (1) developing and improving information management systems related to child welfare; (2) building capacity in using data from statewide child welfare information systems and other sources; (3) developing and improving use of new technologies; and (4) promoting and assisting in the exchange of data between child welfare agencies and the family and juvenile courts, to better integrate policy and practice and improve service delivery and outcomes for children and families. As a subcontractor, Westat is responsible for providing technical assistance to states and tribes, developing and maintaining the NRCCWDT web site, participating in the NRCCWDT annual conference, and evaluating NRCCWDT activities.

Responsibilities: Content manager. Ms. Evans leads communications planning for the NRCCWDT and regularly contributes to the development and writing of technical assistance documents, specializing in emerging technologies and social media. She has overseen the NRCCWDT web site, has contributed to web site redesign, and serves on the web site team.

Annual Surveys of Probation and Parole, 2011-2014

Client: Bureau of Justice Statistics (BJS)

Project Overview: The Annual Probation Survey and the Annual Parole Survey (the P&P surveys) are two separate data collections through which BJS annually obtains summary counts of the number of adults under probation and parole supervision at the beginning and end of each calendar year, as well as information on selected characteristics of the year-end population. The surveys also collect information on the number and characteristics of adults entering and exiting

probation and parole supervision during the year. The P&P data are obtained from administrative sources maintained by state probation and/or parole agencies; municipal, county, or court agencies; and the Federal system. Westat is administering both surveys for 4 years and will also redesign the survey to use a core survey and supplement approach.

Responsibilities: Ms. Evans conducted pretests for supplements to the annual survey. She also conducted nonresponse followup and refusal conversion with agencies for the annual survey.

First and Second National Survey of Youth in Custody (NSYC-1 and -2)

Client: Bureau of Justice Statistics (BJS), U.S. Department of Justice (DOJ)

Project Overview: These surveys have been conducted in response to the Prison Rape Elimination Act of 2003, which requires BJS to report annually on the incidence and effects of prison rape, including statistical data aggregated at the Federal, state, prison, and prison system levels. BJS initially awarded Westat a grant to develop survey instrumentation and methodology for the survey. Subsequently, Westat received a grant to conduct the first national implementation, which sampled and gathered data from adjudicated youth in 198 facilities in all 50 states and the District of Columbia. In 2012, Westat completed the second implementation of the survey, this time gathering data in 330 facilities.

Responsibilities: Ms. Evans conducted postsite visit debriefings with all facility administrators. She also coordinated interviewer travel arrangements throughout the data collection period.

Data Collection for the Family Finding Evaluation

Client: Duke Endowment

Project Overview: From 2009 to 2013, Westat assisted in evaluating Family Finding, an intensive family search program that tries to reconnect children in foster care with blood relatives. Westat conducted in-person interviews with youth (aged 14-22) who were in, or had recently exited, foster care and who were randomly assigned to either the Family Finding treatment group or a control group. Westat field interviewers used a CAPI interview with an ACASI component to interview youth 12 and 24 months after random assignment. The instrument collected youth outcome data in the domains of social support, mental and physical health, education, employment, and risk behaviors.

Responsibilities: Ms. Evans served as a field manager and coordinated with the county child welfare agencies to contact youth respondents.

Assessment and Evaluation of the Wisconsin Subsidized Guardianship Initiative

Client: Wisconsin Department of Health and Family Services

Project Overview: Under Title IV-E Waiver authority, Wisconsin used Federal funds to test whether a subsidized guardianship benefit would increase permanence for children and improve child outcomes. Westat and two subcontractors conducted a longitudinal study of the status and outcomes of children and families, using a treatment group (eligible for subsidized guardianship) and a control group. The contractors interviewed caregivers at enrollment and collected administrative data on outcomes, case history, and case planning. The study included an outcome evaluation to estimate the impact on permanency, safety, stability, and child well-being; a process evaluation to understand the context in which outcomes exist; and a cost analysis to estimate savings accrued by subsidized guardianship.

Responsibilities: Research assistant. Ms. Evans coordinated the case manager web survey, conducted focus groups and interviews with stakeholders and agency staff, and wrote several sections of the interim and final evaluation reports.

Evaluation of the New York City Justice Corps

Client: John Jay College of Criminal Justice, City University of New York

Project Overview: The New York City Justice Corps is a civic justice re-entry program serving New York City young adults (18-24) who are or were recently involved in the criminal justice system. The program goal is to reduce poverty and recidivism through paid training and services over approximately 6 months. The model includes involvement in a community service project to increase community engagement. Westat and a subcontractor conducted a process and outcome evaluation that examined program startup and implementation, young adult outcomes (recidivism, employment, and civic engagement), and outcomes for the communities in which the program operates. Program applicants were randomly assigned to either receive Justice Corps training and services or be referred to other community services. The evaluation followed these young adults for 30 months.

Responsibilities: Ms. Evans conducted recruitment and data collection activities at both New York City sites.

New York City Center for Economic Opportunity (CEO) Program Evaluation

Client: Center for Economic Opportunity/New York City Human Resources Administration

Project Overview: Westat is evaluating initiatives of the CEO Program, New York City's effort to move economically disadvantaged New Yorkers out of poverty. The initiatives are focused on young adults, poor working adults, and families with young children (<5 years). The Westat team is examining approximately 35 programs to determine which can best be evaluated, developing an evaluation design, and working with the selected programs to systematically collect information for evaluating impact, program implementation, and cost-benefit.

Responsibilities: Program manager. Ms. Evans worked on a program review team for the initial phase of the evaluation. She also coordinated and edited program review reports from all teams. She tracked budget expenditures for all task orders and prepared monthly and quarterly progress and budget reports for the client.

Third Grade Followup to the Head Start Impact Study (HSIS)

Client: Administration for Children and Families, U.S. Department of Health and Human Services (HHS)

Project Overview: Since fall 2000, Westat has conducted the HSIS to assess the impact of Head Start on school readiness, parental practices that contribute to school readiness, and the nature and quality of children's early care and program experiences. The study involves 84 nationally representative Head Start grantees and approximately 5,000 3- and 4-year-olds who were randomly assigned to either a group that had access to Head Start services or a group that could enroll in community non-Head Start services. The Third Grade Followup involves the collection and analysis of data from children, families, teachers, and schools for sample members in their third grade year.

Responsibilities: Research assistant. Ms. Evans coordinated district and school recruitment, updated the training manual, and assisted in trainings.

Extension of the Evaluation of Ohio's Title IV-E Waiver Demonstration

Client: Ohio Department of Job and Family Services

Project Overview: As a subcontractor, Westat is responsible for participant outcomes analysis to examine the continued impact of ProtectOhio on children and families. The 5-year contract includes studies to investigate the impact of new waiver services such as family visitation, family team conferencing, and enhanced kinship services. Westat annually captures and conducts

secondary analysis of administrative data for participants in 14 participating and 14 comparison counties. Analyses will include competing risk survival analysis and counterfactual imputation methodologies to look at foster care length of stay, as well as trajectory analysis to examine service pathways. A data audit and ongoing data committee will examine the local use of statewide data sources, enabling comparative analysis of multiple sources of longitudinal records. Westat is now involved in phase III of the evaluation; phases I and II ran from 1998 to 2010.

Responsibilities: Research assistant. Ms. Evans participated in the county data committee and analyzed data from the audit of county data sources.

Other Professional Experience

Howard University School of Divinity, Washington, DC (1998 to 2000) – As administrative assistant to the dean, Ms. Evans designed and produced a weekly bulletin; arranged travel for the dean, professors, and guests; organized and maintained scheduling and filing systems; and responded to the dean's correspondence.

School for Summer and Continuing Education, Georgetown University, Washington, DC (1995 to 1998) – As an office assistant, Ms. Evans copyedited the continuing education catalog, responded to correspondence from students, installed and upgraded software, and registered students and faculty. In 1996, she administered the Theological Studies Certificate Program.

Office of U.S. Senator Dennis DeConcini, Tucson, AZ (1993) – As an intern, Ms. Evans answered correspondence from constituents and the press and maintained mailing lists.

Adult Loss of Hearing Association, Tucson, AZ (1992) – On a volunteer basis, Ms. Evans copyedited a monthly newsletter, was responsible for telephone reception and TDD/TTY, responded to client information requests, and registered students for and assisted with sign language courses.

Publications, Technical Reports, and Presentations

Technical Reports

Winokur, M., Ellis, R., Orsi, R., Rogers, J., Gabel, G., Brenwald, S., Holmquist-Johnson, H., and Evans, M. (2014). *Program evaluation of the Colorado Consortium on Differential Response: Final report*. Fort Collins, CO: Social Work Research Center, School of Social Work, Colorado State University.

Testa, M.F., Slack, K.S., Gabel, G., Evans, M., and Cohen, L. (2010). *Subsidized Guardianship Assessment and Evaluation: Final evaluation report* (for Wisconsin Department of Health and Family Services). Rockville, MD: Westat.

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Janet L. Ciarico

Summary

Janet Ciarico is a senior research analyst and Westat Senior Study Director with more than 19 years of experience in survey and evaluation research. She has conducted research and evaluation in the areas of child abuse and neglect, foster care, family preservation and reunification programs, subsidized guardianship and adoption, youth aging out of foster care, youth in residential placement and custody, and Head Start. Ms. Ciarico has expertise in research design, survey design and development, development of analysis plans and specifications, quantitative and qualitative data collection, analysis using complex primary and administrative data sets, and dissemination of research findings. She is skilled in analyzing data using WesVar.

Education

M.A., Political Science (with a concentration in Public Policy), George Washington University, 1994
B.A. (magna cum laude), Political Science, San Francisco State University, 1991

Relevant Project Experience

Westat (1995 to Present)

Michigan Title IV-E Waiver Demonstration Project, Protect MiFamily

Client: Michigan Department of Human Services

Project Overview: Michigan's Protect MiFamily Program provides an innovative array of prevention services to families with young children who are at high or intensive risk for maltreatment as determined by child protective services. The demonstration is being implemented by private agencies in Kalamazoo, Macomb, and Muskegon Counties. The Children's Bureau of the U.S. Department of Health and Human Services mandates an independent evaluation of each waiver demonstration project. Westat's activities involve evaluation plan and methodology development, including random assignment, statistical measurement, and analysis methodologies; implementation of process and outcome evaluations; primary and administrative data collection; outcome measurement and analysis; cost-benefit and cost-effectiveness analysis; and preparation of reports.

Responsibilities: Senior research analyst. Ms. Ciarico leads primary data collection and outcomes analysis.

Extension of the Evaluation of Ohio's Title IV-E Waiver Demonstration

Client: Ohio Department of Job and Family Services

Project Overview: As a subcontractor, Westat is responsible for participant outcomes analysis to examine the continued impact of ProtectOhio on children and families. The 5-year contract includes studies to investigate the impact of new waiver services such as family visitation, family team conferencing, and enhanced kinship services. Westat annually captures and conducts

secondary analysis of administrative data for participants in 14 participating and 14 comparison counties. Analyses will include competing risk survival analysis and counterfactual imputation methodologies to look at foster care length of stay, as well as trajectory analysis to examine service pathways. A data audit and ongoing data committee will examine the local use of statewide data sources, enabling comparative analysis of multiple sources of longitudinal records. Westat is now involved in phase III of the evaluation; phases I and II ran from 1998 to 2010.

Responsibilities: Senior research analyst. Ms. Ciarico develops the data files from the State's SACWIS system to perform the trajectory analyses to examine children's service pathways.

Evaluation of the Permanency Innovations Initiative (PII)

Client: Administration for Children and Families, U.S. Department of Health and Human Services (HHS)

Project Overview: Under the 5-year PII, the Children's Bureau has funded six grantees to develop and implement innovative interventions in their state or county child welfare systems to reduce long-term foster care and improve outcomes for children who experience serious barriers to permanency. Under a task order, Westat and its subcontractors are conducting cross-site and site-specific evaluations of the interventions. Activities include completing the designs of rigorous site-level evaluations (using randomized control groups wherever feasible), implementing the evaluations (monitoring the fidelity of the interventions and collecting primary data on proximal outcomes from treatment and comparison cases), collecting and analyzing administrative data on distal outcomes (children's exit from foster care and permanent placement), studying the implementation process, and conducting a cost study to assess the resource requirements of grantees' interventions. Two sites are in California.

Responsibilities: Senior research analyst. Ms. Ciarico developed variables for data mining and modeling to assist states in finalizing intervention plans. She works with grantees and state agencies to coordinate submission of administrative data. Using state agency SACWIS data, she has conducted analyses for the formative and summative evaluation phases. She is also a member of the cross-site evaluation team.

National Child Welfare Capacity Building Center for Tribes (CBCT)

Client: Administration for Children and Families, U.S. Department of Health and Human Services (HHS)

Project Overview: A service of the Children's Bureau, CBCT serves as the focal point for coordinated and culturally competent training and technical assistance to Title IV-B and IV-E programs in American Indian and Alaska Native Nations. CBCT works collaboratively with other supported initiatives to support tribes in achieving sustainable, systemic change that results in greater safety, permanency, and well-being for children, youth, and families. As a subcontractor, Westat is primarily responsible for developing tools, processes, and data management systems that reflect Constant Quality Improvement for tribes receiving services from the Center.

Responsibilities: Senior research analyst. Ms. Ciarico provides tribes with technical assistance on a variety of data-related issues, including data-driven management, continuous quality improvement, and issues related to meeting Adoption and Foster Care Reporting System submission requirements. Additionally, she will facilitate peer learning opportunities and prepare technical briefs and materials on promising practices and lessons learned for data-related topics.

Illinois Permanency for Older Wards Waiver Study

Client: Illinois Department of Children and Family Services

Project Overview: Westat evaluated the extension of the Illinois Subsidized Guardianship Waiver Demonstration, to test whether offering transition services to wards aged 14 and older who were eligible for guardianship or adoption would increase the number of older youth entering into permanent placements. Under the randomized experimental design, eligible youth were assigned to a treatment group (who received enhanced transition services after guardianship or adoption) or a control group (who received standard services but were eligible to enter subsidized guardianship or adoptive placements). Data collection included analysis of administrative data, interviews with youth and caregivers at two points in time, focus groups with agency and court personnel, and collection of additional information through administrative case reviews.

Responsibilities: Senior research analyst. Ms. Ciarico developed the work plan, created youth and caregiver consent forms, and designed and developed the caregiver data collection instrument. She analyzed caregiver survey data and contributed to the interim and final reports.

Evaluation of the Illinois Subsidized Guardianship Waiver Demonstration

Client: Illinois Department of Children and Family Services

Project Overview: Westat evaluated a demonstration program that enables the state to subsidize the cost of care by relative caregivers and foster parents who assume guardianship responsibilities for foster children in their homes. The 5-year study provided estimates of the impact of subsidized guardianship on permanency outcomes, subsequent abuse and neglect allegations, family functioning, and child well-being. The project included (1) a hypothesis-testing evaluation to assess the effect of subsidized guardianship on the outcomes of children and their families and (2) a process evaluation to describe the implementation of guardianship and the context in which it operates. Westat synthesized the findings from both components to develop program and policy recommendations. Children and their caregivers were interviewed at two points in time by Westat staff and specially trained agency staff; children were interviewed using ACASI interviewing, and caregiver interviews made use of CAPI interviewing.

Responsibilities: Research associate. Ms. Ciarico contributed to the analysis for the preliminary findings draft report. She helped develop the analysis plan, clean the database, and create specifications and record data for analysis and was primarily responsible for conducting data analyses.

National Resource Center for Child Welfare Data and Technology (NRCCWDT)

Client: Children's Bureau, Administration for Children and Families, U.S. Department of Health and Human Services (HHS)

Project Overview: The goals of the NRCCWDT are to assist state and tribal child welfare agencies in (1) developing and improving information management systems related to child welfare; (2) building capacity in using data from statewide child welfare information systems and other sources; (3) developing and improving use of new technologies; and (4) promoting and assisting in the exchange of data between child welfare agencies and the family and juvenile courts, to better integrate policy and practice and improve service delivery and outcomes for children and families. As a subcontractor, Westat is responsible for providing technical assistance to states and tribes, developing and maintaining the NRCCWDT web site, participating in the NRCCWDT annual conference, and evaluating NRCCWDT activities.

Responsibilities: Senior research analyst. Ms. Ciarico provides states with technical assistance on a variety of agency data-related issues, including mapping SACWIS data to meet National

Child Abuse and Neglect Data System (NCANDS) submission requirements, addressing problems with unduplicating clients in a SACWIS system, and using agency data to examine Federal compliance issues and for continuous quality improvement. Ms. Ciarico has written and coauthored technical briefs on the identification and resolution of duplicate clients in data systems, the use of data to address Fostering Connections, and promising practices and lessons learned about the youth consent process from initial National Youth in Transition Database (NYTD) site visits. She led and co-led state-level peer-to-peer working groups on managing data to improve child outcomes and using NYTD to improve outcomes for older youth. Additionally, she developed a framework to assist states in analyzing their data to drive case management practices and services. Ms. Ciarico served on the Children's Bureau's team that conducted a site visit in collaboration with Virginia's NYTD implementation team. She has attended NYTD technical meetings and NCANDS technical meetings and has delivered presentations at various professional conferences.

Fourth National Incidence Study of Child Abuse and Neglect (NIS-4)

Client: Administration for Children and Families, U.S. Department of Health and Human Services (HHS)

Project Overview: The NIS-4 gathered data on all children investigated by the child protective services (CPS) agencies in a nationally representative sample of 122 counties, as well as on children identified by nearly 10,800 professional staff in almost 1,100 other community agencies. These other agencies included county sheriff's offices; county departments of juvenile probation, health, and public housing; municipal police departments; hospitals; public schools; daycare centers; shelters; and voluntary social services and mental health agencies. Study cases were reviewed to eliminate duplicates, evaluated to ensure that they met the study's standardized definitions of abuse and neglect, and weighted to represent all maltreated children in the nation. The NIS-4 also included several allied surveys to enhance the quality and interpretability of the main study's findings and to examine how the NIS results relate to National Child Abuse and Neglect Data System (NCANDS) statistics.

Responsibilities: Senior research analyst. Ms. Ciarico led the unduplication of study data. She coauthored the design and methods summary and was a member of the CPS agency recruitment team.

Assessing the Context of Permanency and Reunification in the Foster Care System

Client: U.S. Department of Health and Human Services (HHS)

Project Overview: Working with a subcontractor, Westat reviewed reunification policy and practice at the state, county, and local levels in response to the implementation of the Adoption and Safe Families Act. Project activities included developing a conceptual model of permanency and reunification, documenting patterns of reunification and re-entry through analyses of data from the Adoption and Foster Care Analysis and Reporting System (AFCARS) and the Foster Care Data Archive, examining caseworkers' decisionmaking processes for permanency, and developing a matrix of reunification programs. Data collection included telephone discussions with program administrators and site visits to reunification programs.

Responsibilities: Senior research analyst. Ms. Ciarico developed the research design; guides for telephone discussions with state, county, and local administrators; and a site visit protocol for in-person visits. She completed an extensive literature and program review on reunification and permanency and conducted site visits to reunification programs. Ms. Ciarico collected and analyzed qualitative and quantitative data, cowrote several research papers, coordinated the collection of papers from authors, and edited and compiled the final compendium of papers.

Evaluation of Family Preservation and Reunification Services

Client: Assistant Secretary for Planning and Evaluation, U.S. Department of Health and Human Services (HHS)

Project Overview: Under a 5-year contract, Westat and two subcontractors assisted HHS in describing and evaluating the impact of four selected family preservation programs and one reunification program. For the first major component, an impact evaluation, up to 500 families in each program were randomly assigned to receive family preservation/reunification services (the treatment group) or usual child welfare services (the control group); Westat conducted three rounds of in-person interviews with the family's primary caretaker and two rounds of interviews with the caseworker. Other data collection efforts included an accounting of services provided by caseworkers and self-administered staff questionnaires. The second study was conducted to describe program operations; Westat interviewed child welfare and agency staff, reviewed policy and program materials, and examined administrative data systems and case records. Other activities included monitoring fieldwork, processing data, and preparing analyses and reports. A followup analysis to the reunification study looked at the status of initiatives that use managed care in child welfare efforts.

Responsibilities: Research associate. Ms. Ciarico assisted in preparing OMB clearance materials, analyzed state family preservation and reunification information, and cleaned and prepared data for analysis. She developed a manual and materials for the data tracking system, developed a site coordinator systems manual, and conducted training on the materials. She conducted site visits to obtain information about child welfare agency policies, practices, and procedures. Ms. Ciarico managed the collection of administrative and cost data from the sites and supervised field staff. She contributed to data collection and data analysis and was primarily responsible for writing Family Preservation Today, a report on the current status of family preservation in child welfare.

Assessing the Effectiveness of Discharge Planning to Prevent Subsequent Homelessness

Client: Assistant Secretary for Planning and Evaluation, U.S. Department of Health and Human Services (HHS)

Project Overview: The purpose of this project was to ascertain the evaluability of discharge planning in institutional and custodial settings treating people with mental and/or substance abuse disorders as a strategy to prevent subsequent homelessness. The goals of the evaluability assessment were (1) to determine if it is possible to conduct a rigorous objective evaluation, (2) to identify key evaluation questions by setting and across settings, and (3) to develop alternative evaluation designs. The project included a preliminary literature review and issue paper, ongoing input from a technical expert panel, identification of 20 exemplary discharge planning sites, development of logic models representative of those sites, site visits to 8 of the sites to refine site logic models, development of cross-setting logic models, a logic model report, and an evaluation design options report, final report, and briefing of ASPE staff.

Responsibilities: Senior research analyst. Ms. Ciarico conducted a site visit at a discharge planning program for youth leaving foster care and wrote a description of the program for the study report.

Survey of Youth in Residential Placement (SYRP)

Client: Office of Juvenile Justice and Delinquency Prevention, U.S. Department of Justice (DOJ)

Project Overview: Westat conducted the first national SYRP, which involved interviews with youth in residential facilities under juvenile justice authority. This survey was the first to apply ACASI interviewing in a group context by administering the ACASI to groups of up to 10 youth in order to complete a substantial number of interviews during relatively short facility visits. Westat revised the ACASI instrument developed under its earlier SYRP planning and design project and refined the sampling plan and study procedures for this national implementation. Over a 12-week period, interviews were completed with over 7,000 youth in more than 200 facilities nationwide, obtaining their self-reports about their backgrounds, offenses, needs (emotional, substance abuse, educational, health), services received, conditions of confinement, and experiences in custody.

Responsibilities: Member of the analysis team. Ms. Ciarico developed analysis plans and variables and conducted analyses on safety- and gang-related issues.

First and Second National Survey of Youth in Custody (NSYC-1 and -2)

Client: Bureau of Justice Statistics (BJS), U.S. Department of Justice (DOJ)

Project Overview: These surveys have been conducted in response to the Prison Rape Elimination Act of 2003, which requires BJS to report annually on the incidence and effects of prison rape, including statistical data aggregated at the Federal, state, prison, and prison system levels. BJS initially awarded Westat a grant to develop survey instrumentation and methodology for the survey. Subsequently, Westat received a grant to conduct the first national implementation, which sampled and gathered data from adjudicated youth in 198 facilities in all 50 states and the District of Columbia. In 2012, Westat completed the second implementation of the survey, this time gathering data in 330 facilities.

Responsibilities: Senior research analyst. For the NSYC-1, Ms. Ciarico developed variables and conducted analysis as part of the data validity and outlier identification process.

National Head Start Impact Study

Client: Administration for Children and Families, U.S. Department of Health and Human Services (HHS)

Project Overview: As part of the 1998 reauthorization of Head Start, Congress mandated this national longitudinal study to assess (1) how Head Start participation affects school readiness and (2) under what conditions and for which children the program works best. Working as part of a team, Westat conducted the pilot study and a full-scale study involving a nationally representative sample of 83 grantees/delegate agencies. Assessment data were collected for approximately 5,000 3- and 4-year-olds, who were followed through the spring of their first-grade year. Children were randomly assigned to either a treatment group that participated in Head Start or a non-Head Start control group. The project also included interviews with parents/primary caregivers, surveys of program staff/other care providers and elementary school teachers, assessments of the quality of care settings, and abstracting of administrative records.

Responsibilities: Senior research analyst. Ms. Ciarico coauthored the 2010 study report. She was involved in training, recruitment, data collection, and analysis. She visited Head Start programs to obtain cooperation for the study and conducted telephone surveys with Head Start grantees. Ms. Ciarico also conducted research on state and local community attributes and was responsible for designing, developing, and implementing a survey to capture data from local child care and Head Start program directors. She was a member of the workgroup that developed a descriptive and

impact analysis of children's experiences and outcomes. She also led the team in preparing restricted use files and documentation.

Policy Analysis, Program Assessments, Evaluation, and Data Analysis: Disability-Related Database Development and Data Analysis

Client: Office of the Assistant Secretary for Planning and Evaluation (OASPE), U.S. Department of Health and Human Services (HHS)

Project Overview: Westat was awarded a master agreement for a task order contract to assist OASPE and other HHS agencies in responding to policy-related questions that arise in the area of disability. The contract could be used as a contracting vehicle by any agency in HHS. Westat's activities included the design of evaluations of disability-related programs and support for issues analysis.

Responsibilities: Research associate. Ms. Ciarico participated in a task to conduct secondary analyses of data from the National Study of Protective, Preventive, and Reunification Services Delivered to Children and Their Families. She conducted and delivered to the client a series of analyses for use in reports to Congress on kinship foster care, substance abuse, and child protection services, required by the Adoption and Safe Families Act of 1997. The analyses, performed using WesVarPC, included bivariate analysis and multivariate linear and logistic regression analysis.

National Study of Protective, Preventive, and Reunification Services Delivered to Children and Their Families

Client: U.S. Department of Health and Human Services (HHS)

Project Overview: The purposes of this study were to determine the number and percentage of children and families receiving services and to obtain national data on the number, types, and dynamics of services provided. Westat conducted retrospective telephone interviews with the caseworkers for a nationally representative sample of 2,500 children and their families who received social services over a 12-month period. During the second phase of the study, caseworkers were interviewed by telephone to collect information about current service delivery and casework discussions over the previous 6 months. An extensive pilot study was completed to test sampling and data collection procedures.

Responsibilities: Research associate. Ms. Ciarico analyzed the database and contributed to the final report as a writer and editor.

Institute for Law and Justice, Alexandria, VA (1995)

As a researcher and technical writer, Ms. Ciarico represented the institute at the 1995 Conference on Criminal Justice Research and Evaluation, sponsored by the Office of Juvenile Justice and Delinquency Prevention. She synthesized panel discussions and research results into summaries for publication in the DOJ conference summary.

Kay Lawson, San Francisco, CA (1991 to 1992)

As a research assistant, Ms. Ciarico performed detailed research for the political science text *The Human Polity*, 3rd edition.

Public Research Institute, San Francisco State University, San Francisco, CA (1990)

As a research intern, Ms. Ciarico trained with the institute director and office manager in research design, survey instrument development, and data input and analysis. She also designed project flow charts and participated in strategy conferences with staff and clients.

Other Professional Experience

San Francisco State University, San Francisco, CA (1990) – As a teaching assistant, Ms. Ciarico conducted lectures and discussion groups, proctored and graded examinations and class assignments, assisted with lesson plans, and counseled students on assignments and examinations.

Awards and Professional Achievements

Recipient, Wasserman Award for Best Paper by an Undergraduate in the Political Science Department, San Francisco State University, 1991

Publications, Technical Reports, and Presentations

Technical Reports

Puma, M., Bell, S., Cook, R., Heid, C., Shapiro, G., and Broene, P. (2010). *Head Start Impact Study: Final report* (for U.S. Department of Health and Human Services). Rockville, MD: Westat.

Quinn, L., MacAllum, C., Ciarico, J., and Rogers, J. (2009). *Illinois Permanence for Older Ward Waiver: Final evaluation report* (for Illinois Department of Children and Family Services). Rockville, MD: Westat.

Sedlak, A., Gragg, F., Mettenburg, J., Ciarico, J., Winglee, M., Shapiro, G., Hartge, J., Li, S., Greene, A., and McPherson, K. (2008). *Design and methods summary* (for Administration for Children and Families, U.S. Department of Health and Human Services). Rockville, MD: Westat.

Ciarico, J., and Quinn, E. (2005). *Site visit report contributing to the evaluability assessment of discharge planning and the prevention of homelessness: Final report* (for Office of the Assistant Secretary for Planning and Evaluation, U.S. Department of Health and Human Services). Rockville, MD: Westat.

Ciarico, J. (2001). *Permanency and reunification trends in 25 states* (for U.S. Department of Health and Human Services). Rockville, MD: Westat.

Ciarico, J., and MacAllum, C. (2001). *Caseworker decision-making* (for U.S. Department of Health and Human Services). Rockville, MD: Westat.

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Cook, R., Schuerman, J., Ciarico, J., MacAllum, C., Hill, R., and Harden, A. (2001). *Permanency, a balancing act* (for U.S. Department of Health and Human Services). Rockville, MD: Westat.

Cook, R., Schuerman, J., Ciarico, J., MacAllum, C., Hill, R., and Harden, A. (2001). *Assessing the context of permanency and reunification in the foster care system* (for U.S. Department of Health and Human Services). Rockville, MD: Westat.

Presentations

Bennett, P., Wieczorek, K., and Ciarico, J. (2012). *Are we counting what counts?* 18th National Conference of the Office of Child Abuse and Neglect, Children's Bureau, Washington, DC.

McInturf, J., Brown, L., Ciarico, J., and Haidi, A. (2011). *NYTD data analysis planning*. National Youth in Transition Database Technical Assistance Meeting, Washington, DC.

Mettenburg, J., Brown, L., Ciarico, J., and McInturf, J. (2010). *Enhancing analytic capacity: What do you need to help drive performance*. 13th National Child Welfare Data and Technology Conference, Bethesda, MD.

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Leanne L. Heaton, Ph.D.

Summary

Dr. Leanne L. Heaton is a licensed clinical social worker and a Westat Senior Study Director with more than 20 years of experience in research, evaluation, and clinical practice experience with adults, children, and families. She has conducted research in the areas of child welfare, juvenile justice, and mental health. At Westat, she works with investigators and collaborators on the design, implementation, and analysis of a wide range of studies, including the National Survey of Youth in Custody-2 and a BJS study on rape and sexual assault. She has experience analyzing large, complex national surveys and developing detailed analytic plans. Dr. Heaton also teaches social work practice at the Virginia Commonwealth University School of Social Work. In previous work, Dr. Heaton served as a researcher, clinical research interviewer, and collaborator on several studies for NIMH, including the National Comorbidity Survey of Adolescents, the child segment of the Hurricane Katrina Study, and research on neurodevelopmental genomics and familial transmission of mental disorders. Dr. Heaton has also conducted extensive program evaluations on behalf of the Fairfax County Department of Family Services and the Virginia Department of Social Services.

Education

Ph.D., Social Work, Virginia Commonwealth University, 2010

M.S.W., Social Work, University of Alabama, 1997

B.A., Social Work, University of Montevallo, 1993

Relevant Project Experience

Westat (2011 to Present)

First and Second National Survey of Youth in Custody (NSYC-1 and -2)

Client: Bureau of Justice Statistics (BJS), U.S. Department of Justice (DOJ)

Project Overview: These surveys have been conducted in response to the Prison Rape Elimination Act of 2003, which requires BJS to report annually on the incidence and effects of prison rape, including statistical data aggregated at the Federal, state, prison, and prison system levels. BJS initially awarded Westat a grant to develop survey instrumentation and methodology for the survey. Subsequently, Westat received a grant to conduct the first national implementation, which sampled and gathered data from adjudicated youth in 198 facilities in all 50 states and the District of Columbia. In 2012, Westat completed the second implementation of the survey, this time gathering data in 330 facilities.

Responsibilities: Lead analyst, NSYC-2 Second Report. Dr. Heaton is coordinating the NSYC-2 second report, focused on the correlates of sexual victimization of youth in juvenile facilities. She and the research team worked with the client to develop a detailed analysis plan that includes multivariate analyses such as ordinary least square regression and multilevel modeling techniques (e.g., hierarchical linear modeling), using complex survey data to identify key facility and youth

characteristics associated with victimization. As assistant field director, Dr. Heaton supervises the work of 5 to 7 field supervisors and 14 interviewers, including monitoring production, response rates, costs, and data quality and communicating with supervisors and the home office on a regular basis. She ensures that field teams pass the criminal background checks required by states and facilities. Dr. Heaton also ensure that field teams follow appropriate procedures for counseling and mandatory reporting. Since NSYC-2 data collection requires extensive travel, she ensures that the field team arranges lodging and transportation via Westat's Travel Office.

Evaluation of the Permanency Innovations Initiative (PII)

Client: Administration for Children and Families, U.S. Department of Health and Human Services (HHS)

Project Overview: Under the 5-year PII, the Children's Bureau has funded six grantees to develop and implement innovative interventions in their state or county child welfare systems to reduce long-term foster care and improve outcomes for children who experience serious barriers to permanency. Under a task order, Westat and its subcontractors are conducting cross-site and site-specific evaluations of the interventions. Activities include completing the designs of rigorous site-level evaluations (using randomized control groups wherever feasible), implementing the evaluations (monitoring the fidelity of the interventions and collecting primary data on proximal outcomes from treatment and comparison cases), collecting and analyzing administrative data on distal outcomes (children's exit from foster care and permanent placement), studying the implementation process, and conducting a cost study to assess the resource requirements of grantees' interventions. Two sites are in California.

Responsibilities: Operations manager. In addition, Dr. Heaton was part of working group that developed an interviewer-administered survey instrument to collect information about lesbian, gay, bisexual, and transgender foster youth experiences.

Testing Alternative Survey Methods to Collect Data on Rape and Sexual Assault

Client: Bureau of Justice Statistics, U.S. Department of Justice (DOJ)

Project Overview: The focus of this research is to develop, implement, and test survey methods for providing estimates of rape and sexual assault and to determine the feasibility of using these procedures in the National Crime Victimization Survey (NCVS) program. Westat is evaluating the estimates of rape and sexual assault from two designs and comparing them with estimates from the existing NCVS. The study has three key objectives: (1) to develop and pilot test an optimal design (e.g., using CAPI and ACASI) for collecting self-report data on rape and sexual assault; (2) to develop and pilot test a comparison design that uses RDD and allows for the sampling of cell phone-only households; and (3) to conduct a detailed analytic comparison of the two designs, examining the accuracy and quality of the estimates and the relative feasibility and costs of each design.

Responsibilities: Operations manager.

Genetic Epidemiology Branch, National Institute of Mental Health, Bethesda, MD (2004 to 2011)

Dr. Heaton collaborated with senior members of the research team to perform literature reviews, prepare manuscripts, conduct secondary analyses of data, and translate results in large public health data sets, including the National Comorbidity Survey–Reappraisal and the National

Comorbidity Survey of Adolescents Supplement. She used her knowledge of DSM criteria to write algorithms for analyses of psychiatric diagnoses.

As a clinical research interviewer manager for the Family Study of Affective and Anxiety Disorders (2004 to 2011), Dr. Heaton defined and directed clinical survey data collection from the development of initial diagnostic assessments to followup screening measures. She was responsible for the design, development, and implementation of clinical research instruments; administration of structured diagnostic interviews for adults and children and application of DSM criteria for mental disorders; and organization, implementation, and supervision of best-estimate diagnostic procedures. She supervised the day-to-day work of clinical research interview team members, including approximately five professional staff and two nonprofessional staff. She also generated monthly progress reports. Dr. Heaton actively participated in research collaborations and preparation of research papers. Her specific projects include those described below.

Neurodevelopmental Genomics: Trajectories of Complex Phenotypes, University of Pennsylvania – As an external collaborator, Dr. Heaton participated in the design, development, and implementation of clinical survey research instruments.

Hurricane Katrina Community Advisory Group Study–Reappraisal, Harvard University – Dr. Heaton oversaw the clinical reappraisal of the child segment of the study. She also administered Katrina KSADS to participants and generated weekly diagnostic data reports.

Harvard University National Comorbidity Survey of Adolescents – Reappraisal – Dr. Heaton conducted on-site reviews of clinical research data to assist with clinical validation. She also administered structured diagnostic interviews to adolescents and applied DSM criteria for mental disorders.

Fairfax County Department of Family Services, Fairfax, VA (2007)

Dr. Heaton conducted extensive program evaluations for two projects: an evaluation of the effectiveness and impact of Domestic Violence Unit services and a project evaluating factors leading to emergency removal affidavits in Child Protective Services (CPS). The domestic violence evaluation was guided by a logic model and included interviews with program staff, an assessment of policies and procedures, a review of agency intake and outcome data, and preparation of a comprehensive written summary and a brief oral summary of results. The CPS project used qualitative and quantitative methods and involved preparation of a comprehensive written summary of results for CPS staff, which resulted in policy revisions regarding emergency removals of children.

Virginia Department of Social Services, Richmond, VA (2006)

To support statewide policy revisions, Dr. Heaton compiled research from an extensive literature review and prepared a comprehensive report on successful adoption predictors and outcomes. For a second project, she conducted an extensive literature review and prepared an executive summary of current research on the dual licensure of foster and adoptive homes.

Other Professional Experience

Virginia Commonwealth University, School of Social Work, Alexandria, VA (2007 to Present) – As an adjunct faculty member, Dr. Heaton teaches Social Work Practice with Individuals, Families, and Groups I and II and Group Methods in Social Work Practice. She also teaches Clinical Social Work Practice with Individuals, Families, and Groups II.

Childhelp USA Children’s Center of Virginia, Fairfax, VA (2004 to 2005) – Dr. Heaton conducted monthly 3- to 4-hour seminars on child abuse recognition and response for elementary and secondary school teachers in Northern Virginia. She trained more than 1,500 teachers.

Child Protective Services/Department of Family Services, Fairfax, VA (2000 to 2005) – As a social worker, Dr. Heaton provided long-term protective supervision to families with court-adjudicated findings of child abuse or neglect. She provided ongoing and intensive crisis intervention to families using strength-based, brief therapy and cognitive-behavior therapy models. She developed and implemented family service plans and completed risk assessments while providing clinical case management to all family members. In addition, Dr. Heaton conducted investigations and assessments of suspected child abuse or neglect within birth families, foster homes, and daycare facilities; interviewed child victims, suspected perpetrators, and collateral contacts; and co-investigated criminal allegations with county, city, and state law enforcement agencies. She referred clients to medical forensic examiners, psychiatric and psychological examiners, legal advocates, and foster care case managers and secured placements for children within relative and foster care homes. Dr. Heaton coordinated and facilitated Comprehensive Services Act (CSA) case management to access community resources for at-risk children. She wrote affidavits and filed court documents, including petitions for emergency removals and protective supervision orders; testified in numerous civil and criminal court proceedings; and wrote case narratives and documented investigation outcomes in a statewide database. She participated in multidisciplinary meetings to create best practice standards, trained new staff on rapport building and interviewing, and presented community training programs on child abuse and neglect and the role of CPS.

Court-Appointed Special Advocate Program, Rockville, MD (1998 to 2000) – Dr. Heaton coordinated, developed, implemented, and facilitated six 40-hour preservice trainings for approximately 55 volunteers. She screened potential volunteers extensively, provided monthly supervision to approximately 20 volunteers, and coordinated volunteer assignments to child welfare clients. In addition, she maintained and recorded statistical data for fundraising purposes, attended court hearings, and wrote case summaries from court records.

Omni House Behavioral Health Services, Glen Burnie, MD (1998) – Dr. Heaton provided individual psychotherapy in an outpatient community mental health center, facilitated group psychotherapy in an outpatient and a partial hospitalization program, and developed and implemented individual treatment plans. She participated in multidisciplinary treatment planning, interviewed patients, and conducted comprehensive biopsychosocial assessments.

Gateway Family and Child Services, Birmingham, AL (1997 to 1998) – Dr. Heaton provided intervention and outpatient treatment for 12 foster care children with DSM-IV

diagnoses. She co-led group therapy, provided individual therapy, provided in-home support for foster parents, documented and evaluated current level of functioning, and wrote and implemented multidisciplinary treatment plans.

John Howard Pavilion, St. Elizabeth's Hospital, Washington, DC (1997) – As a graduate student, Dr. Heaton conducted biopsychosocial assessments for pretrial evaluations on a forensic inpatient unit, as well as comprehensive substance abuse assessments for the inpatient intensive treatment unit. She facilitated psychoeducational competency groups for patients awaiting competency hearings, co-facilitated social skills groups for patients re-entering the community, and participated in multidisciplinary diagnostic team evaluations for treatment planning.

Department of Human Resources, Birmingham, AL (1994 to 1996) – Dr. Heaton investigated and assessed reports of child abuse and neglect and provided case management services to at-risk families, using individualized service plans to access community services. She used community resources to reduce the number of foster care placements, conducted court-ordered home evaluations and made recommendations for custody placements, and participated in multidisciplinary staffings with local law enforcement agencies and hospitals to determine the disposition of child abuse and neglect cases. She coordinated other social service, law enforcement, and educational agencies to provide comprehensive services for populations served and directed crisis intervention for at-risk families.

Awards and Professional Achievements

Training Award, National Center on Child Abuse and Neglect Week-Long Summer Research Institute at Cornell University, 2011

Distinguished Performance Award, Kelly Government Solutions Management Team, 2009 and 2011

Graduate School Tuition Reimbursement Award, Virginia Commonwealth University, 2006-2007

Graduate School Fellowship and Tuition Reimbursement Award, Virginia Commonwealth University, 2005-2006

Rebuilding the Nest Award, Fairfax, VA, Court-Appointed Special Advocate Program Awards Dinner, 2005

Publications, Technical Reports, and Presentations

Publications

Merikangas, K.R., Zhang, J., Emsellem, H., Swanson, S., Vgontzas, A., Belouad, F., Blank, M. M., Chen, W., Einen, M., He, J. P., Heaton, L., Nakamura, E., Rooholamini, S., and Mignot, E. (2014). The Structured Diagnostic Interview for Sleep Patterns and Disorders: Rationale and Initial Evaluation. *Sleep Medicine*, 15, 530-535.

Merikangas, K.R., Cui, L., Heaton, L., Nakamura, E., Roca, C., Ding, J., Qin, H., Guo, W., Shugart, Y.Y., Zarate, C., and Angst, J. (2013). Independence of familial transmission of mania and depression: Results of the NIMH Family Study of Affective Spectrum Disorders. *Molecular Psychiatry*, 19(2), 214-219.

Lateff, T., Heaton, L., Cui, L., Nakamura, E., and Merikangas, K. (2013). Validation of a headache interview for children and adolescents. *Pediatrics*, 131(1), 96-102.

Merikangas, K.R., He, J.P., Burstein, M. E., Swendsen, J., Avenevoli, S., Case, B., Georgiades, K., Heaton, L., Swanson, S., and Olfson, M. (2011). Service utilization for lifetime mental disorders in U.S. adolescents: Results of the National Comorbidity Survey of Adolescent Supplement (NCS-A). *Journal of the American Academy of Child and Adolescent Psychiatry*, 50(1), 32-45.

Schmitz, A., Merikangas, K., Swendsen, H., Heaton, L., and Grillon, C. (2011). Measuring anxious responses to predictable and unpredictable threat in children and adolescents. *Journal of Experimental Child Psychology*, 110(2), 159-170.

Presentations

Smith, T., Heaton, L., Zack, S., and Cantor, D. (2014, May). *Obtaining assent from minors – Assessing comprehension in the National Survey of Youth in Custody*. 69th Annual Conference of the American Association for Public Opinion Research, Anaheim, CA.

Heaton, L., and O'Connor, M.K. (2011). *Paternal mental health and child neglect: The relevance to social work education* (roundtable). 57th Annual Program Meeting of the Council on Social Work Education, Atlanta, GA.

Zagar, K., and Heaton, L. (2011). *Assessing parenting capacity of sexually abusive youth* (workshop). Third Annual Multidisciplinary Child Abuse Conference, Children's Advocacy Centers of Virginia, Salem, VA.

Heaton, L.L., Cui, L., Burstein, M., He, J.P., and Merikangas, K.R. (2011). *Perceptions of child neglect on adulthood psychopathology*. 101st Annual American Psychopathological Association Meeting, New York, NY.

Calkins, M.E., Richard, J., Merikangas, K.R., Burstein, M., Heaton, L., Qiu, H., Mentch, F.D., Hermannsson, L., Connolly, J., Abrams, D.J., Chiavacci, R., Grundmeier, R.W., Sleiman, P.M., Loughhead, J., Gur, R.C., Hakonarson, H., and Gur, R.E. (2010). *Identification of children and adolescents at-risk for psychosis: Results of a screen for subpsychotic symptoms in a community sample*. American College of Neuropsychopharmacology 49th Annual Conference, Miami, FL.

Zagar, K. and Heaton, L. (2010). *Assessing parenting capacity of sexually abusive youth* (workshop). Association for the Treatment of Sexual Abusers 29th Annual Conference, Phoenix, AZ.

Patel, D., Keefe, K., Heaton, L., Cui, L., and Merikangas, K.R. (2010). *How accurate are adolescents in reporting parental mental health?* National Institutes of Health Summer Research Festival, Bethesda, MD.

He, J.P., Heaton, L., and Merikangas, K.R. (2008). *Association between mental disorders with marital status, functioning, and disability in a representative sample of U.S. adults: Results from the National*

Comorbidity Survey Replication Study (NCS-R). National Institute of Mental Health Intramural Research Festival, Gettysburg, PA.

Heaton, L., Hearn, J., and O'Connor, M.K. (2006). *Evidence-based practice when politics govern policy: A case for expedited permanency* (workshop). Influencing State Policy Conference, Washington, DC.

Heaton, L. (2006). *Religious-based child maltreatment: Legally sanctioned?* (workshop). Influencing State Policy Conference, Washington, DC.

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SUMMARY

Dr. Robert Baskin is a senior statistician with over 25 years of experience in conducting and managing statistical research. At the Agency for Healthcare Research and Quality (AHRQ), he is responsible for conducting a broad range of statistical research and analyses and providing expert statistical and methodological consultation to support AHRQ's intramural and extramural research efforts.

EDUCATION

Ph.D., Statistics, University of Florida, 1991

M.S., Mathematics, Oklahoma State University, 1979

B.A., Mathematics, University of Arkansas, Little Rock, 1976

B.S., Music Education, Arkansas Polytechnic College, 1972

EXPERIENCE AND ACCOMPLISHMENTS

Staff Service Fellow (Mathematical Statistician), Agency for Healthcare Research and Quality (2003 to Jan 2015)

- Identify and conduct research on statistical methods and use of statistics in survey design and in health services and health policy research.
- Carry out broad range of statistical projects including estimating random effects models, research on impact of imputation on variance estimation, and efficient subsampling in MEPS.
- Consult on the sample design, weighting, sample allocation and statistical estimation issues in the Insurance Component of the MEPS.
- Produce Bayesian models for small domain estimates of insurance coverage and expenditures using MEPS data.
- Provide expert statistical consultation for a broad range of statistical issues within AHRQ relating to health care policy.
- Provide expert statistical consultation to other government agencies on complex study designs and analytical techniques.

Senior Statistician, Westat (2001 to 2003)

- Carried out nonresponse adjustments and raking for development of weights for the National Youth Anti-Drug Media Campaign NYAMC. Carried out propensity analysis for development of longitudinal weights.
- Conducted research on sample allocation and control overlap for the sample redesign of the Drug Abuse Warning Network. Identified use of SPC control charts for purposes of data quality control.
- Conducted research on building a frame and stratification for sampling of aquaculture facilities for the Environmental Protection Agency.

Supervisory Mathematical Statistician and Mathematical Statistician, Bureau of Labor Statistics, Washington, D.C. (1992 to 2000)

- Supervised a staff of statisticians who supported statistical aspects of the Consumer Price Index (CPI)
- Conducted statistical research to meet long-term goals of quality improvement in the CPI.
- Conducted and directed broad range of statistical projects, including conversion to computer-aided data collection.

- Managed resources for monthly production and performed long-term planning for the 1998 revision of the CPI.
- Used SAS extensively on the mainframe, UNIX, and PC for database management and index estimation.
- Used C in the UNIX and DOS environments

Consultant, Environmental Services Permitting, Inc., Alachua, Florida (1991)

- Served as a SAS consultant for the management of a large water-management database.
- Designed SAS macros for statistical analysis and database management.

OTHER PROFESSIONAL EXPERIENCE

University of Florida, Gainesville, FL (1985-1991)

Full-time instructor (1990-1991).

- Taught the following courses: Introduction to Statistics for Social Scientists, Introduction to Mathematical Statistics, and Statistical Computing.

Graduate research assistant (1987 to 1990)

- Served as a statistical consultant to faculty and graduate students in the Center for Instructional and research Computing Activities.
- Interviewed prospective clients and designed sampling and experimental research.
- Analyzed data using SAS, SPSS, and BMDP as well as such specialized software as LIMDEP and GLIM. Consulted on statistical computing and tested new software.
- Prepared reports, documentation, and grant proposals.

Graduate teaching assistant (1985 to 1987)

- Taught Introduction to Statistics and Introduction to Sampling.

College of St. Benedict, St. Joseph, MN (1984 to 1985)

- Taught College Algebra, Calculus I, Introduction to Mathematical Statistics, and Introduction to Statistics.
- Directed independent studies on mathematical projects and advised actuarial students.
- Served as assistant mathematics club advisor, supervised teaching assistants, and led seminars for other mathematics faculty.
- Performed occasional consulting services.

Purdue University, West Lafayette, IN (1981 to 1984)

Graduate teaching assistant

- Taught College Algebra; Calculus I, II, and III; Honors Calculus I and II; Differential Equations; and Linear Algebra.
- Supervised other graduate teaching assistants during the summer session.

University of Illinois, Urbana, IL (1979 to 1981)

Lecturer

- Taught Trigonometry, Linear Algebra, Business Calculus, and Calculus I and II.

Oklahoma State University, Stillwater, OK (1976 to 1979)

Graduate teaching assistant

- Taught College Algebra, Trigonometry, and Calculus I and II.

PUBLICATIONS

Baskin, R. M. and Wun, L.M., “Subsampling the Medical Expenditure Panel Survey for High-Expenditure Cases”, Proceedings of the Survey Research Methods Section, American Statistical Association, 2013.

Baskin, R. M., and Thompson, M. S., “Anomalies under Jackknife Variance Estimation Incorporating Rao-Shao Adjustment in the Medical Expenditure Panel Survey Insurance Component”, Proceedings of the Fourth International Conference on Establishment Surveys, 2012

Baskin, R. M., Sangl, J. A., and Zodet, M. W., “Effect of Different Imputation Methods on Factor Analyses of CAHPS Nursing Home Survey”, Proceedings of the Federal Committee on Survey Methodology Conference, 2012

Baskin, R.M., Yu, W., and Machlin, S., “Evaluation of PPS Sampling for the Medical Expenditure Panel Survey”, Proceedings of the Survey Research Methods Section, American Statistical Association, 2009.

Baskin, R.M. and Fay, R.E., “Comparison of Imputation Adjustment Techniques on Variance Estimation in the Medical Expenditure Panel Survey”, Proceedings of the Survey Research Methods Section, American Statistical Association, 2009.

Baskin, R.M. and Sommers, J., “Comparison of Direct, Mixed Model, and Bayesian Metropolitan Statistical Area Estimates for the Insurance Component of the Medical Expenditure Panel Survey”, Proceedings of the Survey Research Methods Section, American Statistical Association, 2008.

Baskin, R.M., Zodet, M.W. and Ezzati-Rice, T.M., “Comparison of Imputation Adjustment Techniques for Variance Estimation in the Medical Expenditure Panel Survey”, Proceedings of the Survey Research Methods Section, American Statistical Association, 2008.

Wun, L.M., Ezzati-Rice, T.M., and Baskin, R.M., “Evaluation of the Prediction Model and Oversample of Low Income Persons the Medical Expenditure Panel Survey”, Proceedings of the Survey Research Methods Section, American Statistical Association, 2008.

Ezzati-Rice, T.M., Baskin, R.M., Goksel, H., Digaetano, R., and Rohde, F., “Investigation of the Impact of Imputation on Variance Estimation in the Medical Expenditure Panel Survey”, Proceedings of the Survey Research Methods Section, American Statistical Association, 2008.

Baskin, R.M. and Ghosh, M., “Investigation of Empirical Bayes Confidence Intervals for Expenditure Data in the Medical Expenditure Panel Survey”, Proceedings of the Survey Research Methods Section, American Statistical Association, 2007.

- Baskin, R.M., Sommers, J. and Ezzati-Rice, T.M., "Investigation of the Impact of Imputation on Variance Estimation in the Medical Expenditure Panel Survey", Proceedings of the Survey Research Methods Section, American Statistical Association, 2005.
- Baskin, R.M., Sommers, J. and Ezzati-Rice, T.M., "Investigation of the Impact of Imputation on Variance Estimation in the Medical Expenditure Panel Survey", Proceedings of the Survey Research Methods Section, American Statistical Association, 2005.
- Baskin, R.M. "Investigation of Variance Components in the Medical Expenditure Panel Survey", *Proceedings of the Biennial Meeting of the Federal Committee on Survey Methodology*, 2005.
- Baskin, R.M. "Dealing with Missing Survey Data in Longitudinal Data Analysis", Proceedings of the Statistics Canada Symposium, 2005.
- Baskin, R.M., Sommers, J. and Ezzati-Rice, T.M., "Investigation of the Impact of Imputation on Variance Estimation in the Medical Expenditure Panel Survey", Proceedings of the Survey Research Methods Section, American Statistical Association, 2005.
- Baskin, R.M., Saha, S. and Fleishman, J.M., "Investigation of Random Effects Models for Time Varying Variables with Missing Values in the Medical Expenditure Panel Survey", Proceedings of the Survey Research Methods Section, American Statistical Association, 2005.
- Baskin, R.M., Wun, L.M., Sommers, J., Zodet, M., Machlin, S.R., Ezzati-Rice, T.M., and Saha, S. "Investigation of the Impact of Imputation on Variance Estimation in the Medical Expenditure Panel Survey", Proceedings of the Survey Research Methods Section, American Statistical Association, 2004.
- Green, J. L., Baskin, R., Lee, K "Sample Redesign for the Drug Abuse Warning Network (DAWN)", Proceedings of the Survey Research Methods Section, American Statistical Association, 2001.
- Leaver, S., Johnson, W. H., Baskin, R., Scarlett, S., and Morse, R. "Commodities and Services Sample Redesign for the 1998 Consumer Price Index Revision", Proceedings of the Survey Research Methods Section, American Statistical Association, 1996.
- Baskin, R. and Johnson, W.H. "Estimation of Variance Components for Commodities and Services in the U.S. Consumer Price Index", Proceedings of the Survey Research Methods Section, American Statistical Association, 1995
- Baskin, R. "Imputation of Vacant Units in the Residential Rent Index of the U.S. Consumer Price Index", Proceedings of the Survey Research Methods Section, American Statistical Association, 1994
- Baskin, R. "Estimation of Variance Components for the U.S. Consumer Price Index Via Gibbs Sampling", Proceedings of the Survey Research Methods Section, American Statistical Association, 1993
- Baskin, R. "Hierarchical Bayes Estimation of Variance Components for the U.S. Consumer Price Index", Proceedings of the Survey Research Methods Section, American Statistical Association, 1992

PRESENTATIONS

- Baskin, R. Imputation for Missing Data. AHRQ Emerging Centers Intramural Research Seminar. February 3, 2003.
- Baskin, R. Bayesian Analysis versus Frequentist Analysis in Clinical Trials. AHRQ/CPTA Staff Meeting. April 2, 2003.
- Baskin, R. Applications of Propensity Scores in Health Surveys and in Case-Control Matching. Emerging Centers Intramural Research Seminar. June 26, 2003.
- Baskin, R. Statistical Issues in the National Healthcare Quality/Disparity Reports. Interagency Subcommittee on Disability Statistics Meeting. July 9, 2003.
- Baskin, R. Meta-Analysis and Bayesian Meta-Analysis. Emerging Centers Intramural Research Seminar. October 30, 2003.
- Fleishman, J. and Baskin, R. Random Effects Modeling Using MEPS Data. CFACT Seminar. October 9, 2003.
- Sridharan, S. and Baskin, R. Entropy, Capriciousness and Prosecutorial Certification Practice in the Virginia Juvenile System. WESTAT Brownbag Seminar. March 25, 2004.
- Baskin, R. Entropy, Disease Mapping: Likelihood and Bayesian Approaches to Disease Mapping with Examples. Thursday Morning Seminar Series. April 15, 2004.
- Baskin, R. Discussion of "Theory and Methods for Nonparametric Survey Regression Estimators". Federal Committee on Survey Methodology Funding Seminar. June 21, 2004.
- Baskin, R., et. al. Investigation of the Impact of Imputation on Variance Estimation in the Medical Expenditure Panel Survey. Joint Statistical Meetings. August 9, 2004.
- Baskin, R. Superiority versus non-Inferiority Hypothesis Tests. COE Journal Club. April 6, 2005.
- Baskin, R. A Technical Review of Fixed Effect versus Random Effect Statistical Models. Thursday Morning Seminar Series. July 7, 2005.
- Baskin, R., et. al. Investigation of Random Effects Models for Time Varying Variables with Missing Values in the Medical Expenditure Panel Survey. Joint Statistical Meetings. August 9, 2005.
- Baskin, R. Dealing with Missing Survey Data in Longitudinal Data Analysis. Statistics Canada Symposium 2005. October 25, 2005.
- Baskin, R. Weird Math Tricks I've Learned this Year, Part I: "Algebraic Statistics". Cfact Seminar. November 3, 2005.
- Baskin, R. Investigation of Variance Components in the Medical Expenditure Panel Survey. FCSM 2005. November 14, 2005.

Baskin, R. Discussion of: "Provider Profiling" by Racz and Sedransk. WSS 2006. June 4, 2006.

Baskin, R. A Review of Superiority and NonInferiorty Trials. CAG Evidence Forum. July 12, 2006.

Baskin, R. A Review of Superiority and NonInferiorty Trials, Part 2. CAG Evidence Forum. October 11, 2006.

Baskin, R. Introduction to R and WinBUGS. JPSM One Day Course. November 7, 2006.

Baskin, R., and Ghosh, M. Investigation of Empirical Bayes Confidence Intervals for Expenditure Data in the Medical Expenditure Panel Survey. Joint Statistical Meetings. August 2, 2007.

Baskin, R., and Sommers, J. Comparison of Direct State Estimates and Bayesian State Estimates for the Medical Expenditure Panel Survey. SAE 2009, Pisa Italy. September 3, 2007.

Baskin, R. Introduction to R and WinBUGS. JPSM Two Session Course. September 12 and December 7, 2008.

Baskin, R., and Sommers, J. Comparison of Direct, Mixed Model, and Bayesian Metropolitan Statistical Area Estimates for the Insurance Component of the Medical Expenditure Panel Survey. Joint Statistical Meetings. August 7, 2008.

Baskin, R., Zuvekas, S. and Ezzati-Rice, T, Proxy Pattern-Mixture Analysis of Missing Health Expenditure Variables in the Medical Expenditure Panel Survey. ITSEW, June 22, 2011

Baskin, R., Sangl, J., and Zodet, M "Effect of Different Imputation Methods on Factor Analyses of CAHPS Nursing Home Survey", FCSM 2012

Baskin, R., Owens, P., and Sroka, K "A Comparison of Small Area Models Used in the Quality Indicator Program Sponsored by Agency for Healthcare Research and Quality", FCSM 2013

Yong K. Lee

Summary

Yong Lee is a senior systems analyst with 26 years of experience supporting the analytic and programming needs of survey research. His specific areas of expertise include working with complex data systems and performing statistical analyses, sampling, weighting, and imputation. Mr. Lee also leads a team of programmers assigned to various analytic task order contracts. He prioritizes their work, develops and maintains schedules, and provides technical guidance as needed.

Education

B.S., Electrical Engineering, University of Maryland, 1987

Relevant Project Experience

Westat (1998 to Present)

Extension of the Evaluation of Ohio's Title IV-E Waiver Demonstration

Client: Ohio Department of Job and Family Services

Project Overview: As a subcontractor, Westat is responsible for participant outcomes analysis to examine the continued impact of ProtectOhio on children and families. The 5-year contract includes studies to investigate the impact of new waiver services such as family visitation, family team conferencing, and enhanced kinship services. Westat annually captures and conducts secondary analysis of administrative data for participants in 18 participating and 18 comparison counties.

Responsibilities: Mr. Lee supervises programmers providing support for the analysis of Ohio's SACWIS data. He plans the workload of the systems team and performs SAS programming to support data analysis. He has also provided support for the analysis of Ohio's FACSIS data for the project.

Evaluation of the DC Opportunity Scholarship Program

Client: Institute of Education Sciences, U.S. Department of Education (ED)

Project Overview: Westat and its research partners are conducting an evaluation of a program that provides need-based annual scholarships to DC children to attend a participating private school. The evaluation team is (1) providing technical assistance to the program operator, particularly with respect to the design and implementation of the random assignment of participants, and (2) conducting a 5-year impact evaluation. The study design includes student assessments; parent, student, and school surveys; and collection of information from school and program operator records.

Responsibilities: Mr. Lee leads a team of programmers in support of evaluation data collection, weighting, imputation, and analysis. He plans and schedules work to produce ad hoc reports and listings; analyze application, survey, and test data across cohorts; and prepare data/file deliverables. He is also (1) supervising development of web applications for parent and principal

surveys; (2) supervising programmers in developing SAS code to weight and impute analysis data, to produce ad hoc reports and listings and to analyze the impact data; and (3) supervising modifications and enhancements to the MS Access tracking system for collecting test data. Earlier, Mr. Lee supervised SAS and MS Excel programming support for the design and implementation of the applicant lottery. He also helped develop the user's guide.

Integrated Evaluation of ARRA Funding, Implementation, and Outcomes

Client: U.S. Department of Education (ED)

Project Overview: The 2009 American Recovery and Reinvestment Act (ARRA) awarded approximately \$100 billion in new education funding through a variety of programs. This evaluation is examining the potential role of ARRA programs in reform efforts and exploring the challenges educators have faced in implementing reforms. The study includes (1) review and use of extant data and (2) surveys of all 50 states and the District of Columbia, involving nationally representative samples of 1,700 districts and 3,800 schools.

Responsibilities: Mr. Lee supervises programmers providing technical support for the design, development, and maintenance of the SQL*Server/ASP.NET web-based data collection system for the ARRA surveys. He also supervises SAS programming support for sampling, weighting, analysis, and preparation of ad hoc reports.

2009 Residential Energy Consumption Survey (RECS): Energy Supplier Survey (ESS)

Client: Energy Information Administration (EIA)

Project Overview: RECS is EIA's instrument for collecting energy use data for households. The ESS collected cost and consumption data from companies that supplied electricity, natural gas, fuel oil, and propane to households in the RECS household survey. Approximately 1,500 suppliers were contacted in a multimode survey (mail, fax, telephone, and web) to collect information for approximately 21,000 customers.

Responsibilities: Mr. Lee supervised SAS programming support for data collection and analysis. He supervised programmers in developing SAS code to load varying MS Excel data into the database, produce reports, and update status flags for tracking data through the process.

Measures of Effective Teaching (MET)

Client: Bill and Melinda Gates Foundation (BMGF)

Project Overview: Westat provided a MET Service Center to serve as the intermediary between BMGF and six school districts participating in information collection activities aimed at developing measures of effective teaching. Westat also coordinated student assessment data collection activities, provided field management, and prepared post-data collection data file deliveries.

Responsibilities: Mr. Lee analyzed district-supplied class- and student-level data (using SAS and MS Excel) to identify relationships in the data and to other data sources. He also analyzed data consistency and cleanliness. In addition, Mr. Lee developed SAS code to match data sources by ID and/or name and presented them in Excel for continued data cleaning. He provided technical direction to the project programmer and filled in for the deputy project lead as necessary.

Personnel Preparation Performance Reporting Support

Client: Office of Special Education Programs (OSEP), U.S. Department of Education (ED)

Project Overview: Westat's primary activities under this contract are (1) to develop and maintain a web-based data collection system used by grantees funded under OSEP personnel preparation program, to report data on students in their programs; (2) to collect data annually on students trained under OSEP personnel preparation grants; (3) to provide grantees with technical assistance on data entry; and (4) to analyze student data reported by grantees.

Responsibilities: Mr. Lee supervised programmers in the design, development, and maintenance of a SQL*Server/ASP web-based data collection system for this project. He also supervised SAS programming support for data analysis and ad hoc reports.

Initial Technical and Random Assignment Support for the DC Choice Program

Client: Institute of Education Sciences (IES), U.S. Department of Education (ED)

Project Overview: Westat was awarded this contract to provide initial technical support to IES and the program operator for the reauthorized DC Choice Program by designing a rigorous applicant lottery. Westat and its subcontractor worked closely with IES to consider design options. A user's guide and programming code for the lottery were prepared.

Responsibilities: Mr. Lee supervised SAS and MS Excel programming support for the design and implementation of the applicant lottery. He also helped develop the user's guide.

Impact Evaluation of the DC Choice Program

Client: National Center for Education Evaluation and Regional Assistance, Institute of Education Sciences, U.S. Department of Education (ED)

Project Overview: The first federally funded U.S. voucher program includes a requirement that the program be rigorously evaluated using the strongest possible design. Westat and its partners were responsible for design of the analyses, data collection, and preparation of annual reports to Congress. Data collection included administration of a standardized test, parent and student surveys, and principal surveys each spring.

Responsibilities: Mr. Lee led a team of programmers in support of data collection, sampling, weighting, imputation, and analysis. He planned and scheduled work to produce ad hoc reports and listings and to analyze the application, survey, and test data across cohorts. He supervised programmers in (1) developing SAS code to randomly select scholarship winners, given the number of scholarship slots and applicants in multiple strata; (2) developing SAS code to randomly place scholarship winners into their preferred school, given the availability of seats in the school, by grade and sibling preference for the same school; (3) redesigning and modifying the MS Access/SQL Server data entry application; (4) developing SAS code to weight and impute the analysis data; and (5) developing Stata code to analyze the impact data. He also supervised development of an MS Access tracking system for collecting test data.

Followup Evaluation of the Gaining Early Awareness and Readiness for Undergraduate Programs (GEAR UP)

Client: U.S. Department of Education (ED)

Project Overview: Westat conducted a followup evaluation of GEAR UP, which is intended to increase postsecondary enrollment and success rates among disadvantaged students. The evaluation followed a sample of GEAR UP and comparison students who were studied through their middle school years. Data collection included web or CATI interviewing with students (according to their preference) at the end of high school and telephone interviews with parents 6 months later.

Responsibilities: Mr. Lee planned and scheduled SAS programming support for imputation and analyses of data from the National Education Longitudinal Study, the Education Longitudinal Study, and GEAR UP. He supervised production of restricted use data files for the client.

Technical Assistance in Data Collection, Analysis, and Report Preparation

Client: Office of Special Education Programs (OSEP), U.S. Department of Education (ED)

Project Overview: Westat's primary activities under this contract were (1) to prepare and produce the annual reports to Congress on the implementation of the Individuals with Disabilities Education Act (IDEA); (2) to maintain and annually update the OSEP database of state-reported data required by IDEA; (3) to assist the states in building the capacity to collect valid and reliable data; (4) to perform substantive research on topics in special education; and (5) to produce policy analyses on current topics in special education.

Responsibilities: Mr. Lee provided programming support for enhancements, modifications, disproportionality analyses, and other ad hoc analyses of the IDEA data. He also supported analyses of a limited English proficiency survey and analyses of data from the Early Childhood Longitudinal Study, Kindergarten Cohort. He reviewed the work of other team members and mentored them in SAS conventions and techniques.

Operation, Maintenance, and Enhancement of the Education Data Exchange Network (OME-EDEN)

Client: Office of Planning, Evaluation, and Policy Development, U.S. Department of Education (ED)

Project Overview: The OME-EDEN assists ED in implementing a central repository and reporting system for state-reported elementary and secondary education data (EDFacts) to replace the separate data collection instruments and processes sponsored and managed by various elementary and secondary education program offices. As a subcontractor, Westat led the data definition and data governance task to integrate program office data collection requirements into EDFacts, eliminate data redundancy across program offices, and establish a framework for setting the rules, policies, and procedures related to EDFacts.

Responsibilities: Mr. Lee planned and scheduled maintenance of the MS Access tracking system and provided programming support to generate OMB reports using SAS, MS Excel, and Word mail merge. In addition, Mr. Lee planned and scheduled SAS programming support for analyses of General Education Provisions Act and GAPS data for FY 2002-2004. He supervised programmers in developing SAS code to read and clean Excel data received in flexible formats, analyzing the data, and producing Excel tables to be used in reports.

Evaluation of the Milwaukee School Choice Program

Client: University of Arkansas

Project Overview: As a subcontractor for an evaluation of the Milwaukee Parental Choice Program (MPCP), Westat trained teachers to administer standardized assessment tests to a randomly selected panel of MPCP students in grades 3 to 10 and also designed and processed six teacher-administered surveys for MPCP students in grades 4 to 9 (both activities occurred annually for 5 years). Mail surveys were administered to MPCP public and private school principals and to approximately 1,000 MPCP public school teachers in years 1, 3, and 5. Westat also designed and administered telephone surveys to a random sample of students and parents.

Responsibilities: Mr. Lee planned and scheduled work to produce ad hoc reports and listings and to analyze application, survey, and test data. He supervised the programmers who developed

the MS Access tracking system for collecting test and survey data, developed SAS code to name-match multiple sources of data, and developed SAS code to draw the sample.

Technical Support for Postsecondary Education Analyses

Client: Office of the Under Secretary, U.S. Department of Education (ED)

Project Overview: Beginning in 1989, Westat provided technical support to the Office of the Under Secretary in areas relating to postsecondary education. This support was provided through three consecutive task order contracts administered by the Postsecondary, Adult, and Vocational Education Division of the Planning and Evaluation Service.

Responsibilities: Mr. Lee designed and developed a system, in SAS and MS Excel, to simulate the benefits of student loans, using the Beginning Postsecondary Students Longitudinal Study and data from the Current Population Survey (CPS) March supplement. Using the National Postsecondary Student Aid Study (NPSAS) and Pell Grant data, he designed and developed a system to enhance ED's model for simulating the effects on college enrollment of different Pell grant maximums. Both systems permit multiple user input and options. In addition, Mr. Lee has calculated the unmet need of students in the NPSAS data set by relating NPSAS, Pell, National Student Loan Data System (NSLDS), and Integrated Postsecondary Education Data System data. Using NSLDS and CPS data, he also modeled repayment projections for income-contingent loans in the NSLDS. He planned the workload of the systems team, oversaw project deliverables, reviewed the work of his team, and programmed in SAS to support data analysis.

Budget Service Technical and Analytical Support

Client: Office of the Under Secretary, Budget Service, U.S. Department of Education (ED)

Project Overview: Under this task order contract, Westat provided a broad range of support services to assist the Budget Service in developing budget policies for ED. Major activities included development and manipulation of formula-based allocation models; analysis of existing databases; design and implementation of data collection activities; and development of policy briefs, analytic reports, program evaluations, and oral briefings.

Responsibilities: Mr. Lee provided analysis and programming support for reformatting, imputation, and sampling frame development on a task involving the 2004 Office of Civil Rights survey. Westat analyzed the reported data, reformatted the data and produced a file for web publication, imputed for survey nonresponse, updated the time-series file and documented all survey data from 1968 to the present, and developed the sampling frame for the 2006 survey.

Employment Service Performance Measurement Project

Client: Washington Employment Security Department

Project Overview: The U.S. Employment Service has an elaborate system for measuring the performance of its labor exchanges in each state. Under contract to the Washington Employment Security Department, Westat compared and contrasted the views of the labor exchange given by a range of possible measures.

Responsibilities: Mr. Lee planned the workload of the systems team and performed SAS programming to support data analysis.

Advisory and Assistance Services to Support the Census Bureau's Year 2000 Census: Statistical and Methodological Research

Client: U.S. Bureau of the Census

Project Overview: Westat statisticians and survey methodologists provided support services, on a task order basis, in preparation for the Year 2000 Census and in support of other Bureau surveys.

Responsibilities: For the Census Payrates task, Mr. Lee planned the workload of the systems team and programming in SAS for data analysis.

UTA, Arlington, VA (1996 to 1998)

As a computer specialist, Mr. Lee worked on site at BLS in Washington, DC. He supported programming needs (SAS, SuperWYLBUR, Sun Solaris, IBM MVS), procured hardware and software, and performed server administration for five Sun and three NT machines for the Statistical Methods Division, Office of Employment and Unemployment Statistics.

CBSI, Fairfax, VA (1991 to 1996); Orkand Corporation, Silver Spring, MD (1990 to 1991)

As a senior programmer/analyst, Mr. Lee supported the SAS programming needs of the Office of Research and Evaluation within the Office of Employment and Unemployment Statistics, BLS. He performed requirements analysis, design, and coding for a unification of databases project using Systems Architect, FoxPro, and PowerBuilder. He also maintained and enhanced the production system in PL/1, SAS, and Clipper and served as the liaison between the systems group and the production group for the International Prices Program.

Federal National Mortgage Association, Washington, DC (1989 to 1990)

Mr. Lee's activities included analysis, design, and coding in PL/1 and EASYTRIEVE+ for the Credit Policy Management Reporting System. He modified COBOL production programs for the Delinquency Reporting System and wrote small utility programs and extracts in PL/1 and SAS.

ORI, Inc., Rockville, MD (1986 to 1987)

Mr. Lee analyzed, designed, developed, coded, and wrote unit test plans. He performed system testing, updated a database using Clipper, and updated and edited program specifications and documentation for a FORTRAN-based (MS-DOS) submarine baseline simulations project.

Mustafa C. Karakus, Ph.D.

Summary

Dr. Mustafa C. Karakus is a health economist with a strong background in applied microeconomics, health economics, and econometrics and with training in micro simulations modeling and cost-effectiveness analysis. At Westat, Dr. Karakus has conducted economic analysis and evaluation of data for projects funded by New York City and the following federal agencies: U.S. Department of Health and Health Services; HHS agencies, Centers for Disease Control and Prevention and the Substance Abuse and Mental Health Administration (SAMHSA); U.S. Department of Labor; U.S. Social Security Administration; and the Veterans Benefit Administration. His work has centered on all aspects of economic evaluations, including cost-effectiveness, cost-benefit, and decision-making analysis in programs involving subpopulations such as people with serious mental illness, ex-offenders, drug court clients, the chronically homeless. He is leading the multi-site evaluation of Title IV-E waiver in Michigan. He has previously led multi-site cost evaluation of SAMHSA grantees in the of drug court initiation and/or enhancement grants. Dr. Karakus' research papers have been published in *PharmacoEconomics*, *Applied Economics*, *Atlantic Economic Journal*, *Journal of Behavioral Health Services and Research*, *Administration and Policy in Mental Health* and other reputable public policy and health care financing journals. He recently served as the guest editor of a special section on "Affordable Care Act and Behavioral Health Services" for the *Journal of Behavioral Health Services and Policy* that came out in fall 2014. He also has presented scientific papers at numerous national and international conferences.

Education

Postdoctoral Fellowship, Johns Hopkins Center for Prevention and Early Intervention, 2005
Ph.D., Health Economics, Johns Hopkins University, 2004
M.A., Economics, University of Colorado, 1997
B.S., Managerial Engineering, Istanbul Technical University, Istanbul, Turkey, 1994

Relevant Project Experience

Westat (2005 to Present)

Assessment of the Barriers That Constrain the Adequacy of SNAP Allotments

Client: U.S. Department of Agriculture (USDA)

Project Overview: The goal of this project is to determine individual, household, and environmental barriers faced by Supplemental Nutrition Assistance Program (SNAP) participants that prevent them from accessing a healthy diet. Along with describing the interaction between these barriers, Westat is determining whether and how these barriers can be accounted for in determining SNAP allotments. The study design is based on a mixed-methods approach that includes a quantitative survey of 4,800 SNAP participants followed by 120 in-depth interviews. Westat is responsible for sampling, survey and interview administration, data analysis, and report writing.

Responsibilities: Project director. Dr. Karakus is responsible for all aspects of project performance.

Access, Participation, Eligibility, and Certification Study (APEC-II): Erroneous Payments in the National School Lunch Program (NSLP) and the School Breakfast Program (SBP)

Client: Food and Nutrition Service, U.S. Department of Agriculture

Project Overview: Westat is a subcontractor for this replication study, conducted to produce national estimates of overpayments, underpayments, and overall erroneous payments as a result of misclassification of students' school meal eligibility status and other noncertification errors. Westat is conducting data collection activities, including record abstracting, observations of meals transactions, aggregate data abstracting, and administration of school director questionnaires, including week-long site visits to 130 school districts and 390 schools.

Responsibilities: Senior researcher for administrative error analysis/final report author.

Options to Improve the Effectiveness of the United States Behavioral Health System Through Existing Federal Programs

Client: U.S. Department of Health and Human Services (HHS)

Project Overview: This project was designed to identify ways for Federal programs to improve and strengthen the behavioral health care system and complement changes resulting from the Affordable Care Act. The Westat team identified strategies in three target areas (practice improvement, financing of effective care, and integration and coordination of general and behavioral health care), studied HHS grant programs that could benefit from specific strategies, and produced a final report that matched strategies for the target areas with HHS programs where the strategy might be applied.

Responsibilities: Project director.

Veterans Benefits Administration (VBA) Longitudinal Studies

Client: U.S. Department of Veterans Affairs (VA)

Project Overview: Westat is assisting VBA in conducting two parallel longitudinal studies to address the outcomes of its Chapter 31 and Chapter 33 programs. The Chapter 31 program (VetSuccess) assists veterans with service-connected disabilities to get and keep jobs. The Post-9/11 GI Bill (Chapter 33) program offers substantial education and housing benefits to eligible veterans who attend college. Both studies will assess, over a 20-year period, the long-term outcomes of three cohorts of veterans entering the programs in 2010, 2012, and 2014. Westat is responsible for collecting data on the samples of veterans and reporting annually on the primary outcomes associated with program participation.

Responsibilities: Project director.

Farmers' Market Client Survey

Client: Food and Nutrition Service, U.S. Department of Agriculture (USDA)

Project Overview: The purpose of this evaluation was to examine the facilitators and barriers to shopping at farmers' markets among recipients of Supplemental Nutrition Assistance Program (SNAP) benefits. Based on SNAP use at farmers' markets, a nationally representative sample of SNAP recipients was assigned to either an Electronic Benefit Transfer (EBT) user or EBT nonuser group. A total of 3,700 SNAP recipients completed surveys. Westat also conducted 12 focus groups with EBT users and nonusers. GIS data were used to examine the services available

near farmers' markets, as well as distances to specified places of interest around farmers' markets that serve SNAP recipients.

Responsibilities: Project director.

Regional Office Review of Applications (RORA)

Client: Food and Nutrition Service, U.S. Department of Agriculture (USDA)

Project Overview: This study is examining administrative errors that occurred during local education agencies' approval of applications for free and reduced-price meals in the National School Lunch Program. As an independent reviewer, Westat abstracts data from the 2010-2011 school year and analyzes and assesses administrative errors in sampled applications.

Responsibilities: Project director.

Evaluation of the Summer Food Service Program (SFSP) Enhancement Demonstrations Study

Client: Food and Nutrition Service (FNS), U.S. Department of Agriculture (USDA)

Project Overview: The Agriculture, Rural Development, Food and Drug Administration, and Related Agencies Appropriations Act of 2010 directed the Secretary of Agriculture to carry out demonstration projects to develop and test methods of providing access to food for urban and rural children during the summer months. The purpose of this project, a task under a blanket purchase agreement with FNS, was to evaluate four types of FNS enhancement demonstration projects established to increase participation in the SFSP. Westat conducted an outcome and process evaluation. The outcome evaluation design consisted of telephone interviews with parents of project participants in the summer and fall 2011 and 2012. The process evaluation design included site visits and key informant interviews to assess recruitment and outreach, roles and responsibilities, methods for delivering the program, and training of food providers. Westat also reviewed demonstration materials and collected and analyzed data on demonstration costs.

Responsibilities: Task lead on cost data collection and analysis.

Child Nutrition Analysis and Modeling

Client: Food and Nutrition Service (FNS), U.S. Department of Agriculture (USDA)

Project Overview: Westat assisted FNS in assessing current and emerging policy issues pertinent to several special nutrition programs, such as the National School Lunch Program, the School Breakfast Program, the Child and Adult Care Food Program, the Summer Food Service Program, and several smaller child nutrition and food distribution programs. Westat reviewed participant applications and conducting independent assessments of administrative error rates to determine eligibility for child nutrition programs. In addition, Westat developed a coding system for extracting nutrient and food group data, analyzed nutrient and food group data for child nutrition programs, and fielded participant surveys to evaluate the pilot Summer Food Service Programs.

Responsibilities: Task leader. Dr. Karakus worked on all aspects of the study, including design, analysis, and reporting.

New York City Center for Economic Opportunity (CEO) Program Evaluation

Client: Center for Economic Opportunity/New York City Human Resources Administration

Project Overview: Westat is evaluating initiatives of the CEO Program, Mayor Bloomberg's effort to move economically disadvantaged New Yorkers out of poverty. The initiatives are focused on young adults, poor working adults, and families with young children (<5 years). The Westat team is examining approximately 35 programs to determine which can best be evaluated,

developing an evaluation design, and working with the selected programs to systematically collect information for evaluating impact, program implementation, and cost-benefit.

Responsibilities: Dr. Karakus led economic evaluations. He implemented cost analysis and cost-benefit analysis of selected programs.

TRICARE Preventive Health Demonstration Projects

Client: TRICARE Management Activity (TMA), U.S. Department of Defense (DOD)

Project Overview: Westat developed and implemented two demonstration projects to evaluate the efficacy of (1) providing incentives for healthful behaviors among a non-Medicare eligible, retired population enrolled in TRICARE Prime (and their dependents over age 21) and (2) providing an annual preventive health services allowance to active-duty military service members and their enrolled dependents. The projects required that Westat operate a dedicated office at TMA headquarters. A total of 15,000 individuals were invited to participate. Westat worked with TMA and other contractors to access electronic medical records and also collected proof of health activity completion directly from participants; determined compliance and, for one demonstration, disbursed incentives; and collated and analyzed data on an annual basis.

Responsibilities: Senior analyst. Dr. Karakas examined the cost information and led the analysis of claims data.

New Start Employment Options Project (NSEOP)

Client: City of Los Angeles

Project Overview: The NSEOP builds on the California Department of Corrections and Rehabilitation's (CDCR's) investment in vocational training by allowing the Workforce Development System to incorporate and systematically improve service delivery to ex-felons. Westat implemented a process evaluation, along with outcomes reporting and analysis. Qualitative and quantitative data were collected during interviews with employment specialists, New Start coordinators, and staff from partner agencies; from information systems used by participating agencies; and from monthly project reports submitted to the CSDCR.

Responsibilities: Project director.

Federal Financing of Supported Employment and Customized Employment for People with Mental Illnesses

Client: U.S. Department of Health and Human Services (HHS)

Project Overview: The purpose of this project was to increase Federal and state understanding of mechanisms that could be used to finance supported employment (SE) and customized employment (CE) services for people with mental illness. Westat gathered information from members of the Federal Employment Workgroup, conducted site visits to states with promising financing mechanisms, and reviewed literature on the cost-effectiveness of SE and CE services.

Responsibilities: Project director.

Evaluation of the Los Angeles Re-Entry Employment Options Project (REEOP)

Client: City of Los Angeles

Project Overview: Westat evaluated the implementation and outcomes of REEOP, which provides a formal mechanism linking job creation, training, and job placement for men and women who leave prison with no direct access to specialized programs. REEOP staff assess skills and employment history and match participants with a job within 30 days if there are no significant employment barriers. The program also provides linkages to job training resources and

services, as well as substance dependence treatment, mental health, and related services as needed.

Responsibilities: Project director and lead economist.

Tuberculosis Epidemiologic Studies Consortium (TBESC) Monitoring

Client: Centers for Disease Control and Prevention (CDC)

Project Overview: The purpose of this contract was to provide quality assurance support for research conducted by the TBESC, which includes 22 sites in the United States and Canada. The consortium conducts epidemiologic, behavioral, economic, laboratory, and operational investigations. Westat developed standard operating procedures, trained clinical site personnel, developed protocol procedures, and conducted site monitoring.

Responsibilities: Health economist. Dr. Karakus led decision tree analysis, sensitivity tests, and cost estimation. Westat implemented decision analysis and sensitivity analysis for potential proposals to obtain estimates of cost per case and cost per case averted.

Vocational Rehabilitation and Employment (VR&E) Service Employment Outcome Study

Client: Veterans Benefits Administration, U.S. Department of Veterans Affairs (VA)

Project Overview: During this 1-year study, Westat reviewed the vocational rehabilitation literature and determined how to create employment outreach activities. The design included (1) how to structure followup contacts at the first-quarter, third-quarter, and year intervals; (2) how to collect followup employment outcome data, such as earnings and career progression; and (3) methods for assessing outcomes gained from participation in an employment-based program. In addition, Westat developed four strategies for completing employment outcome followup activities with VR&E participants, as well as recommendations on how to adapt and incorporate successful strategies into the VR&E service delivery process. The study also involved a cost-benefit analysis of the various options proposed.

Responsibilities: Dr. Karakus was the task lead for cost-benefit analyses of the four alternative models of employment outreach.

Evaluation of Adult Treatment Drug Courts

Client: Center for Substance Abuse Treatment (CSAT), Substance Abuse and Mental Health Services Administration (SAMHSA)

Project Overview: Westat conducted a multisite evaluation of 20 adult treatment drug courts receiving funding to enhance and/or expand their treatment services. The main question addressed by this impact and outcome evaluation was whether the addition of substance abuse treatment resources increased the positive results of drug courts. From the drug court clients, Westat collected GPRA and other quantitative data on procedural justice, mental health, and treatment satisfaction 6 months postdischarge from the drug court. Additional quantitative data included clients' criminal records and interviews with drug court staff and treatment providers. Qualitative data were collected through drug court observations and focus groups with clients during site visits to the drug courts. Using a mixed-methods approach, Westat incorporated quantitative data and qualitative site visit data in a realist evaluation framework that explored how and why the interventions worked rather than merely whether or not they worked.

Responsibilities: Dr. Karakus conducted a cost-effectiveness analysis and contributed to the development of reports and briefings.

Washington Families Fund High-Level Service Model (HLSM) Initiative

Client: Washington Families Fund (WFF)

Project Overview: The WFF's HLSM initiative is a coordinated, intensive housing and services model for high-need families in the State of Washington. Westat is assessing the extent to which the initiative is successful in helping families connect with community-based services, decrease their use of high-cost services, and achieve stability in their lives. The evaluation has both implementation and outcome components and is expected to continue over a 6-year period. Westat is leading development of a family assessment tool, initial reviews of the design and early implementation of grantee sites, development of a framework and measures for assessing site implementation of the model, and design of a study of the effectiveness and costs of the demonstration, to be conducted in subsequent years. The evaluators are collaborating with WFF staff, an evaluation advisory committee, HLSM grantees, and other stakeholders in all aspects of evaluation design and development.

Responsibilities: Dr. Karakus participated in the development and refinement of the family data collection strategy, design of the outcome study, and development of reports and briefings.

Evidence to Support Mental Illness Employment Policy Development

Client: Office of Disability Employment Policy (ODEP), U.S. Department of Labor (DOL)

Project Overview: ODEP requested that Westat conduct a study to examine the effectiveness of providing customized employment services to people with mental illness and to identify the factors associated with positive employment outcomes. Westat identified employment-related policy developments important for people with disabilities; analyzed quantitative employment outcome data from two databases developed for an independent evaluation of ODEP demonstration programs, also conducted by Westat; and conducted in-depth interviews with former demonstration program participants with mental illness, to determine their program experiences and other outcomes since leaving the program.

Responsibilities: Dr. Karakus was task leader for quantitative data analysis.

Medical Respite Care for Persons Experiencing Homelessness

Client: Office of the Assistant Secretary for Planning and Evaluation, U.S. Department of Health and Human Services (HHS)

Project Overview: Westat is leading a retrospective study to evaluate the costs, quality, and outcomes of respite care for homeless people, specifically whether respite care leads to fewer or shorter hospitalizations compared to routine services and whether there are relative long-term savings associated with medical respite care compared to hospital care. In collaboration with the Boston Health Care for the Homeless Project, Westat reviewed the literature on respite care programs and convened an expert panel to inform development of a retrospective study design. To identify sites that best met the outcome criteria established by the panel, Westat conducted evaluability assessments of 12 medical respite programs and partnering hospitals, including key informant interviews and extensive document reviews. Five sites were selected for the full study, in which Westat is collecting retrospective patient data from respite programs and associated hospital systems and conducting site visits to observe program operations and interview key informants.

Responsibilities: Dr. Karakus was the task co-lead for development of the data collection strategy and for data analysis.

Mental Health Treatment Study (MHTS)

Client: Social Security Administration (SSA)

Project Overview: Westat was the prime contractor for this 6-year, randomized controlled trial involving Social Security Disability Insurance beneficiaries with schizophrenia or affective disorder. The study assessed the impact of evidence-based supported employment and behavioral health treatments, systematic medication management, and access to health insurance on beneficiaries' employment and functioning. The study included 2,238 beneficiaries in 23 cities in 17 states and the District of Columbia. Data collection included a baseline CAPI interview, seven quarterly interviews, and a followup interview with the treatment and control groups. The intervention used an integrated approach in which all services were delivered by a treatment team at the community mental health center. Off-site treatment specialists monitored treatment quality and fidelity to evidence-based practices, while on-site staff recruited and enrolled beneficiaries, conducted CAPI interviews, and performed quality management activities. All study operations and treatment services were managed through a complex web-based study management system.

Responsibilities: Dr. Karakus participated in the development and organization of data collection, focusing on health insurance coverage, utilization of health services, and outcome measures related to work, income, and other economic values. He also served as task co-leader for outcomes analysis.

Evaluation of Disability Employment Policy Grants—Phases I to VI

Client: Office of Disability Employment Policy (ODEP), U.S. Department of Labor (DOL)

Project Overview: ODEP contracted with Westat to conduct an independent evaluation of its demonstration program of grants and cooperative agreements on employment for people with disabilities. For phase I, Westat designed detailed evaluation plans for the four major areas in which ODEP supports the New Freedom Initiative Act, developed a protocol for evaluating the effectiveness of existing grant programs, and collected baseline data. During phase II, Westat revised and finalized site visit plans and protocols for seven program areas, conducted 72 site visits across the United States, collected employment outcomes data from grant sites, and completed six interim reports of findings. In phase III, Westat conducted initial site visits to newly funded grant sites and in-depth site visits to selected sites, further analyzed and updated data from an outcomes analysis project, and wrote seven reports. In phase IV, Westat conducted followup site visits to demonstration projects, as well as outcomes analysis. In phase V, Westat completed the final analysis and synthesis of data from all previous phases and preparation of final reports to ODEP.

Responsibilities: Dr. Karakus was the task leader for the design and development of a data system to evaluate the efficacy and effectiveness of intervention programs. He also provided expertise as a health economist and contributed to reports analyzing the labor market outcomes of people with disabilities.

Karakus/8

Bloomberg School of Public Health, Johns Hopkins University, Baltimore, MD (2000 to 2005)

As a postdoctoral research fellow in the Prevention and Early Intervention Research Center, Department of Mental Health (2004 to 2005), Dr. Karakus studied the effects of several interventions on school-age children's proximal and distal economic and social outcomes. He worked on economic evaluations of policies targeting behavioral and cognitive problems among at-risk children.

In his work as a research assistant in the health economics research unit at the Bloomberg School of Public Health (2000 to 2004), Dr. Karakus analyzed the health outcomes and labor market transitions of people with serious mental illness. He applied microeconomic foundations and econometric techniques to measure mental health outcomes, with a focus on people with schizophrenia, bipolar disorder, and major depression.

University of Memphis, Memphis, TN (1997 to 2000)

As a research assistant, Dr. Karakus participated in several projects that resulted in articles on the socioeconomic determinants of health and mortality and the macroeconomic analysis of national health expenditures.

Other Professional Experience

Loyola College of Maryland, Baltimore, MD (2005) – Dr. Karakus taught a course in microeconomic principles.

Johns Hopkins University, Baltimore, MD (2000 to 2002) – Dr. Karakus worked as a teaching assistant for health economics and introductory microeconomics.

University of Memphis, Memphis, TN (1999 to 2000) – Dr. Karakus taught microeconomics, managerial economics, and graduate-level quantitative methods.

Shelby State Community College, Memphis, TN (1998 to 2000) – Dr. Karakus taught microeconomics and business statistics.

Awards and Professional Achievements

NIH Postdoctoral Fellowship, 2005

MedStat Corporation Dissertation Support Grant, 2004

NIH Predoctoral Fellowship, 2000-2004

NIH Training Fellowship, 2000-2004

Graduate Student Research Travel Award, Johns Hopkins University, 2001-2003

Graduate Student Research Travel Award, Department of Health Policy and Management, Johns Hopkins University, 2001-2003

Excellence in Research Award, University of Memphis, 2000

Barbara Tuckman Memorial Scholarship, University of Memphis, 1999
Reviewer, Health Economics, Journal of Health Care Finance, and Psychiatric Services

Publications, Technical Reports, and Presentations

Publications

- Karakus, M. (2014). Affordable Care Act and behavioral health services: Special section editor's note. *Journal of Behavioral Health Services and Research*. [Advance online publication: June 18, 2014]
- Goldman, H.H., and Karakus, M. (2014). Do not turn out the lights on the public mental health system when the ACA is fully implemented. *Journal of Behavioral Health Services and Research*.
- Goldman, H., Karakus, M.C., Frey, W., and Beronio, K. (2013). Economic grand rounds: Financing first-episode psychosis services in the U.S. *Psychiatric Services*, 64(6), 506-508.
- Karakus, M.C., Salkever, D.S., et al. (2012). Implications of middle school behavior problems for high school graduation and employment outcomes of young adults: Estimation of a recursive model. *Education Economics*, 20(1), 33-52.
- Karakus, M.C., and Okunade, A.A. (2012). Obesity, depression, and employment-related outcomes among workers near retirement. *Aging International*, 37(2), 238-253.
- Karakus, M.C., and Patton, L.C. (2011). Depression and the onset of chronic illness in older adults: A 12-year prospective study. *Journal of Behavioral Health Services and Research*, 38(3), 373-382.
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- Karakus, M. (1999, August). *Policy and other determinants of Organisation for Economic Co-operation and Development health expenditure growths, 1968-97: New evidence with expanded data*. Joint Statistical Meetings, Baltimore, MD.
- Karakus, M. (1999, April). *Gatekeepers effect on health expenditures: Analysis of Organisation for Economic Co-operation and Development countries*. Second Annual Interdisciplinary Conference for Graduate Students at the University of Southern California, Los Angeles, CA.

Jacky Man-Kwan Choi

Summary

Jacky Choi is a research assistant with experience in health education, research, and project development. At Westat, he assists senior-level staff in conducting literature reviews; performing geocoding; developing, editing, and revising survey content; annotating and coding surveys; drafting recruitment materials; and writing proposals and client reports. Mr. Choi has served as a liaison among various stakeholders on health-related projects or activities. He offers health communication skills, as well as experience in social science research and writing.

Education

B.A., Biology and Society (with minors in Global Health/Nutrition and Health), Cornell University, 2014

Relevant Project Experience

Westat (2014 to Present)

Assessment of the Barriers That Constrain the Adequacy of SNAP Allotments

Client: U.S. Department of Agriculture (USDA)

Project Overview: The goal of this project is to determine individual, household, and environmental barriers faced by Supplemental Nutrition Assistance Program (SNAP) participants that prevent them from accessing a healthy diet. Along with describing the interaction between these barriers, Westat is determining whether and how these barriers can be accounted for in determining SNAP allotments. The study design is based on a mixed-methods approach that includes a quantitative survey of 4,800 SNAP participants followed by 120 in-depth interviews. Westat is responsible for sampling, survey and interview administration, data analysis, and report writing.

Responsibilities: Research assistant. Mr. Choi serves as a liaison between Westat and 30 states in executing, finalizing, and obtaining Data Use Agreements (DUAs) before sample data is collected.

Veterans Benefits Administration (VBA) Longitudinal Studies

Client: U.S. Department of Veterans Affairs (VA)

Project Overview: Westat is assisting VBA in conducting two parallel longitudinal studies to address the outcomes of its Chapter 31 and Chapter 33 programs. The Chapter 31 program (VetSuccess) assists veterans with service-connected disabilities to get and keep jobs. The Post-9/11 GI Bill (Chapter 33) program offers substantial education and housing benefits to eligible veterans who attend college. Both studies will assess, over a 20-year period, the long-term outcomes of three cohorts of veterans entering the programs in 2010, 2012, and 2014. Westat is responsible for collecting data on the samples of veterans and reporting annually on the primary outcomes associated with program participation.

Responsibilities: Research assistant. Mr. Choi updated the tables and figures in the 2015 Annual Report (for FY 2014) regarding the VA Vocational Rehabilitation and Employment (VR&E) program; revised the report; and helped finalize the submission of the draft to the client.

Child and Adult Care Food Program (CACFP) Improper Payments Study

Client: Food and Nutrition Service (FNS), U.S. Department of Agriculture (USDA)

Project Overview: Westat is designing a study to determine the estimated annual amount of erroneous payments in CACFP-participating child care centers as a result of certification and non-certification errors. The study's primary objectives are to (1) provide FNS with a reliable estimate of erroneous payments, (2) develop models that FNS can use to update estimates annually, and (3) prepare a white paper on methodologies for computing state-level estimates. The Westat team is responsible for sampling frame development and sample selection; survey development; on-site data collection at 450 CACFP centers; 4,500 household interviews; and data processing, analysis, and reporting.

Responsibilities: Research assistant. Mr. Choi assists with OMB submission; drafting and finalizing recruitment materials; organizing and scheduling cognitive interviews; developing the Study Management System (SMS); and serving as a general point of contact for any sort of help..

Survey of Veteran Enrollees' Health and Reliance Upon VA (Survey of Enrollees)

Client: Veterans Health Administration (VHA)

Project Overview: The Veterans Health Administration's (VHA) Office of the Assistant Deputy Under Secretary for Health for Policy and Planning oversees the annual VHA Survey of Veteran Enrollees' Health and Reliance upon VA (Survey of Enrollees). The Survey of Enrollees was developed in 1999 in order for the VHA to better understand enrolled Veterans' health care needs. In addition to collecting basic demographic information, the survey explores insurance coverage, VA and non-VA health care use, pharmaceutical use, attitudes and perceptions about VHA services, perceived health status, and smoking habits of Veterans enrolled in the VHA system. The purpose of the survey is to provide critical and essential information on Veteran utilization of health services. This information supports annual VHA projections of enrollment, utilization, and expenditures, as well as a variety of high level VHA budget and policy-related analyses.

Responsibilities: Research assistant. Mr. Choi documents and logs survey decisions and changes; creates, codes, and annotates web survey specifications; tests the survey; creates a crosswalk of questions across all modes; performs internal quality control tasks; and is involved in editing and revising the survey.

Survey to Assess Veteran Resilience to Disasters

Client: Department of Veterans Affairs (VA); Veterans Emergency Management Evaluation Center (VEMEC)

Project Overview: Westat is working with the Veterans Emergency Management Evaluation Center (VEMEC) on a population-based survey to assess the relationship between multiple indicators of community resilience and disaster preparedness among Veterans, their families, and the organizational and social networks in which they are embedded.

Responsibilities: Research assistant. Mr. Choi helped screen scholarly articles and publications; conduct a literature review; write and edit part of the literature review report; and perform internal quality control tasks.

Family Life, Activity, Sun, Health, and Eating (FLASHE) Study

Client: National Cancer Institute (NCI)

Project Overview: FLASHE is intended as a one-time administration to a nationally representative sample of 12- to 17-year-olds, paired with a parent. The study focuses on the psychosocial, intergenerational, and environmental correlates of cancer-preventive behaviors. The Westat team is recruiting 4,500 parent/adolescent dyads and conducting two web surveys with adolescents and two with parents (one on physical activity and the other on diet). In addition, a subsample of 1,500 adolescents are being asked to participate in a 1-week motion sensor study.

Responsibilities: Research assistant. Mr. Choi used Google Maps to pinpoint school intersections and names of schools based on other information.

Cornell University, Ithaca, NY (2014)

As a collaborating researcher, Mr. Choi investigated how communities organize themselves and evaluated the correlation between crime rates and natural disasters, to inform and influence global and public health preparedness programs. He reviewed academic publications, conducted literature reviews, edited drafts, extracted and interpreted quantitative data, and analyzed results under the guidance and mentorship of a professor.

Cornell University Global Health Program/UBELONG, Ghana (2013)

As an international volunteer, Mr. Choi launched an independent public health research project to gauge a community's knowledge, attitudes, and practices regarding HIV/AIDS and supervised a public health team in completing the task. He developed questionnaires, conducted in-person interviews with residents, and compiled responses into a comprehensive final report that was presented to UBELONG staff and volunteers. After researching and studying cholera with UBELONG staff, Mr. Choi delivered health lectures about the disease to school groups ranging from 20 to 300 students. He also led an educational performance on malaria that was ultimately presented to the entire student body at Prince Derrick Academy. He worked closely with staff at Kasoa Polyclinic to monitor and evaluate mother and child health via physical examinations, educational posters and lectures, and health data.

Other Professional Experience

Division of Nutritional Sciences, Cornell University, Ithaca, NY (2012) – Mr. Choi was a teaching assistant Nutrition, Health, and Society. He lectured on topics such as environmental determinants of eating and nutrition-related diseases. He researched class-related topics and issues, formulated lesson plans and a curriculum, graded assignments, directed group presentations, performed data entry, and helped students master course material.

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Process Evaluation Questions (Q4.1 – Q4.9)

Process Evaluation Questions (Q4.1 – Q4.9)

Overview of the Approach to the *Safe at Home West Virginia* Process Evaluation

Background

The Bureau for Children and Families (BCF) has engaged multiple collaborators and cross-system partners to identify the needs of children and youth in out-of-home care, and at risk of out-of-home placement. *Safe at Home West Virginia*, the resulting plan to transform child welfare practice, combines evidence-based and evidence-informed strategies with a wraparound approach, and builds upon West Virginia's unique cultural and systemic strengths.

The process evaluation is a critical component to the overall evaluation. The outcomes evaluation examines the safety, permanency, and well-being outcomes that result from the demonstration while the process evaluation contributes the context necessary to fully understand those outcomes. Through the process evaluation, we understand how well the demonstration was implemented, what facilitators or barriers impacted the implementation, and what factors are necessary for replication of the demonstration in other counties.

The process evaluation will comprehensively examine the implementation of the demonstration, including implementation readiness and fidelity to the wraparound approach. The evaluation team will also obtain and analyze the policies and procedures that have been put in place, the types and volumes of services delivered, and the characteristics of the population served. Through the process evaluation, the evaluation team will be able to provide early feedback to BCF as to whether or not the demonstration has proceeded as intended, identify barriers that have been encountered and pinpoint changes that are needed to allow for successful continued implementation. The evaluation team will plan and conduct the process evaluation in close collaboration with BCF, its partners, and key stakeholders. A collaborative approach has worked successfully in the past in fostering positive working relationships between key participants in the demonstration process.

Methods

The evaluation team proposes using **interview and focus groups** to gather information from key program staff and stakeholders, at the state, regional, and county levels, about planning the demonstration, barriers and facilitators to the implementation of the demonstration; and organizational aspects of the demonstration, staffing, service provision, the role of the courts, and key social, economic, and political forces that may influence the implementation. Where stakeholders can be naturally grouped, we will conduct focus groups instead of individual interviews to minimize the burden on the respondents and evaluation resources. The proposed process evaluation staff has extensive experience designing qualitative protocols and conducting focus groups and interviewing stakeholders at all levels. These staff will design the interview protocols to directly address important and relevant areas of inquiry as efficiently as possible. The evaluation team proposes conducting interview and focus groups during site visits in year 1, year 3, and year 5. Visiting all 11 initial implementation counties will likely be cost-prohibitive. Thus, we propose selecting a sample of counties to visit, likely at least two in each region that are the most representative of the region as a whole.

The evaluation team will also **gather and review relevant documents**, such as assessment reports, meeting notes, announcements, significant correspondence, formal policy statements, and any other documentation related to the demonstration planning and implementation. This information will be useful for capturing such data as the service delivery system and other organizational aspects of the demonstration. As we interview stakeholders, we will also ask them to identify relevant documents for inclusion in our analysis.

To capture information on the number and type of services received, the evaluation team will extract **administrative data on program services** from FACTS or Results-Based Accountability (RBA) service monitoring. The team will also use a **fidelity assessment tool** to examine and monitor fidelity to the wraparound model. Another method that the evaluation team will employ is the use of **family satisfaction surveys**. These surveys will seek to capture additional information about service delivery as well as the perceived benefit of the services.

During the development of the evaluation plan we will ask BCF to review the protocols for content and clarity and after protocols are finalized we will obtain approval for use from the Westat Institutional Review Board (IRB).

Analysis Plan

Our overall approach to qualitative data analysis is summarized in Chapter 4 of the User Friendly Guide to Mixed Method Evaluations.¹ Qualitative data analysis is about discovering and exploring systematic patterns in the data through a process of “constant” back-and-forth comparison. Qualitative analysts ask a series of questions regarding emergent patterns and common themes in the data that relate to the research questions or issues at hand: What are the main patterns and common themes? How do these help to illuminate the broader study and survey questions? What are the exceptions or deviations from these patterns, and how might these be explained? What are the key stories or illustrative vignettes that emerge from these data?

We propose to involve multi-level informants in semi-structured interviews and focus groups and suggest using a grounded theory analytical approach.² This approach supports examination of implementation across varying contexts and supports inclusion and preservation of multi-level viewpoints. Grounded theory can be used inductively and deductively.³ Inductively it facilitates the open coding of the data and creation of patterns and themes. The analytic team will work together to create a common coding structure or “coding tree” with categories responsive to the major research questions. We will use it deductively during the final stage of analysis wherein two overarching frames, demonstration service implementation barriers and facilitators, and service differences between demonstration and non-demonstration youth and families will be examined. Our team is experienced in using computer-assisted qualitative software packages such as NVivo for qualitative analysis and we will assess its usefulness for this part of the process evaluation. NVivo is well suited to grounded theory work and its use can increase the efficiency of coding, thematic identification, and reporting especially with large volumes of data.⁴

Content analysis will be performed on the data extracted from the agency documentation, taking the diverse and possibly disparate pieces of information and unifying them by patterns. Content analysis can focus on frequently mentioned concepts, absence of concepts, and concept context during

¹ Berkowitz, S. (1997). Analyzing qualitative data. In J. Frechtling & L. Sharpe (Eds). *User friendly handbook for mixed method evaluations*. Arlington, VA: National Science Foundation.

² Gilgun, J. F. (1994). Hand into glove: The grounded theory approach and social work practice research. In E. Sherman & W.J. Reid (Eds.), *Qualitative research in social work* (pp. 115–134). New York: Columbia University Press.

³ Patton, M.Q. (2002). *Qualitative research & evaluation methods*, 3rd ed., Sage: Thousand Oaks, CA.

⁴ Hutchison, A., John, J., Lynne, H., and Breckon, J.D. (2010). Using QSR-NVivo to facilitate the development of a grounded theory project: an account of a worked example. *International Journal of Social Research Methodology*, 13 (4), 283-302.

cross-source analysis.⁵ NVivo is also well suited to facilitate content analysis as it accommodates different types of documents including graphical documents. As needed, we will refine analyses to maximize conclusion-drawing and verification; that is, stepping back to consider what the analyzed data mean and to assess their implications. Verification, integrally linked to conclusion-drawing, entails “revisiting” the data as many times as necessary to cross-check or verify emergent conclusions, and to entertain other possible interpretations of the data.

Frequencies and percentages will be computed for the service data to depict the number and types of services received by clients.

Reporting

The evaluation team will report fidelity assessment, focus group and interview findings, document review findings, service data and family satisfaction survey results in the semi-annual, interim, and final evaluation reports. Table 1 presents the proposed process evaluation activities, data sources, and the frequency of reporting of the findings. The frequency of reporting can be negotiated and coordinated with BCF in the development of the Evaluation Plan.

Table 1. Process evaluation activities

Goal/Objective	Activity	Data Source	Frequency of Report
4.1	Assess the planning process for the demonstration including whether any formal needs assessment, asset mapping, or assessment of community readiness was conducted.	<ul style="list-style-type: none"> ■ Stakeholder interviews and focus groups ■ Document review 	Semi-annual, Interim and Final Reports
4.2	Assess the organizational aspect of the demonstration, such as staff structure, funding committed, administrative oversight, and problem resolution at various organization levels.	<ul style="list-style-type: none"> ■ Stakeholder interviews and focus groups ■ Document review 	Semi-annual, Interim and Final Reports
4.3	Assess the number and type of staff involved in implementation, including the training they received, as well as their experience, education, and characteristics.	<ul style="list-style-type: none"> ■ Stakeholder interviews and focus groups ■ Document review 	Semi-annual, Interim and Final Reports

⁵ Ibid.

Table 1. Process evaluation activities (continued)

Goal/Objective	Activity	Data Source	Frequency of Report
4.4	Assess the service delivery system, including procedures for determining eligibility, referring clients for services, the array of services available, the number of youth/families served and the type and duration of services provided.	<ul style="list-style-type: none"> ■ Administrative data ■ Stakeholder interviews and focus groups ■ Document review ■ Satisfaction surveys 	Semi-annual, Interim and Final Reports
4.5	Assess the role of the courts in the demonstration and the relationship between the child welfare agency and court system, including any efforts to jointly plan and implement the demonstration.	<ul style="list-style-type: none"> ■ Stakeholder interviews and focus groups ■ Document review 	Semi-annual, Interim and Final Reports
4.6	Assess contextual factors, such as the social, economic, and political forces that may have a bearing on the replicability of the intervention or influence the implementation or effectiveness of the demonstration.	<ul style="list-style-type: none"> ■ Stakeholder interviews and focus groups ■ Document review 	Semi-annual, Interim and Final Reports
4.7	Assess the degree to which demonstration programs and services are implemented with fidelity to their intended service models.	<ul style="list-style-type: none"> ■ Satisfaction surveys ■ Monitoring data ■ Fidelity assessment tool(s) 	Semi-annual, Interim and Final Reports
4.8	Assess the barriers encountered during implementation, the steps taken to address these barriers, and any lessons learned during implementation.	<ul style="list-style-type: none"> ■ Stakeholder interviews and focus groups ■ Document review 	Semi-annual, Interim and Final Reports

Section 4, Subsection 4.1: Goal/Objective 1

Q1. The planning process for the demonstration including whether any formal needs assessment, asset mapping, or assessment of community readiness was conducted.

A1. Vendor Response:

Background

The Bureau for Children and Families has undertaken an extensive planning process to develop and prepare for the *Safe at Home West Virginia* demonstration. BCF, along with multiple collaborators and cross-system partners, have identified the needs of youth in out-of-home care, and at risk of out-of-home placement, as well as selecting the initial demonstration counties based on their need and readiness for participation in the demonstration services. The demonstration's planning process will continue throughout service development, initial implementation and the eventual statewide rollout of *Safe at Home West Virginia* in phase 2.

Proposed Methodology

The evaluation team will examine and document the process of planning for the overall project, including:

- Formal needs assessments and asset mapping and analyses conducted;
- Formation of the project planning team(s);
- Identification and selection of the target populations and criteria used to select initial demonstration counties (i.e. indicators of community readiness);
- Elevation of the IV-E penetration rate;
- Involvement of key stakeholders in planning for the demonstration;
- Development of the Waiver IV-E application;
- Development of new and existing collaborations with courts, the education system, regional and county offices, service providers, and other community partners.

The evaluation team will also examine how BCF continues to plan for the phased, county-by-county implementation. Phased implementation will give us a valuable opportunity to generate data that can be used in a plan, do, study, act cycle, a common approach used for initial implementation.

The following data collection methods and sources will provide the information needed to document the *Safe at Home Virginia* planning processes.

- **Interviews and Focus Groups** – The evaluation team proposes conducting interviews and focus groups with key program staff and stakeholders, at the state, regional, and county levels to capture information for the process evaluation. We will work with BCF to identify important stakeholders involved in planning for the waiver or who can provide important contextual information. These stakeholders may include, but are not limited to key representatives from:
 - BCF and DHHR project leadership teams, such as members of the DHHR Safe at Home Oversight Team and the BCF Home Team; and BCF direct services staff involved in the demonstration;
 - Coordinating local agencies;
 - State agencies such as the West Virginia Department of Education;
 - Cross-discipline workgroups that support the demonstration project such as the Practice Development Workgroup;
 - The Wraparound Advisory Team (Regional Summits and local Community Collaboratives);
 - Service array partners;
 - Court personnel; and
 - Collaborators from other partnering or informative institutions and initiatives such as the West Virginia Commission to Study Residential Placement of Children, the Three Branch Institute, West Virginia System of Care, the West Virginia Child Advocacy Centers, and the Court Improvement Project.

- **Document Review** – The evaluation team will gather and review relevant documents to capture and uncover themes related to the planning process for *Safe at Home West Virginia*. For example, we will need to document differences in planning for initial implementation across counties. Documents may include assessment reports, meeting notes, announcements, significant correspondence, formal policy statements, and any other documentation related to the waiver planning. As we interview stakeholders, we will also ask them to identify relevant documents for inclusion in our analysis.

Section 4, Subsection 4.2: Goal/Objective 2

Q2. The organizational aspect of the demonstration, such as staff structure, funding committed, administrative oversight, and problem resolution at various organization levels.

A2. Vendor Response:

Background

The organizational elements are the core of the demonstration project and will help inform findings for all aspects of the process evaluation. Implementation success or failure is often a function of organizational level factors and may be compromised if organizational resources are not sufficient. A key organizational resource includes the financial capabilities to support implementation through training, addition or replacement of staff, or restructuring of work units. Leadership support is also a key resource that can facilitate or impede implementation.⁶ West Virginia is establishing a vertical structure with the Wraparound Advisory Team connecting the BCF Wraparound Home Team with the community-level workforce. The evaluation team will document the project and funding structure within BCF, the Wraparound Advisory Team, and the Coordinating Local Agencies and other providers, as well as the communication and supervisory relationship between all levels of the organizational structure. Indicators will include clear and documented staff roles and responsibilities; sufficient program funding secured and maintained; documented monitoring and oversight procedures; and channels of communication between state project team regional and county offices.

Proposed Methodology

In order to evaluate the organizational aspects of *Safe at Home West Virginia* we propose a similar data collection approach as for the first goal/objective:

- **Interviews and Focus Groups** – Our informants/respondents for documenting the organizational aspects of the demonstration will include the BCF Wraparound Home Team, the Wraparound Advisory Team, and the Coordinating Local Agencies. We will work with BCF to identify additional informants during the development of the evaluation plan and throughout implementation, as appropriate.

⁶ Fox, D., Gottfredson, D., Kumpfer, K., & Beatty, P. (2004). Challenges in disseminating model programs: a qualitative analysis of the Strengthening Washington DC Families Program. *Clinical Child Family Psychology Review*, 7(3), 165–76.

- **Document Review** – The evaluation team will collect and review relevant documents, such as program reports, written policies and procedures, meeting notes, organizational charts, and documentation on BCF’s continuous quality improvement (CQI) work and results-based accountability (RBA) processes. We will extract information on the formal organizational structure of the project, the decision making process, supervisory and administrative channels, any funding issues, and the type and amount of communication and problem-solving between the administrative, supervisory, and community levels of the project.

Section 4, Subsection 4.3: Goal/Objective 3

Q3. The number and type of staff involved in implementation, including the training they received, as well as their experience, education, and characteristics.

A3. Vendor Response:

Background

Staffing and training will be particularly vital issues for *Safe at Home West Virginia* due to the amount of service development planned. Experienced staff and consistent and thorough training are key elements in successful implementation and are crucial for maintaining fidelity to the wraparound approach. The rate of staff turnover and how the agency handles ongoing hiring and training will be important for both BCF and the evaluation team to monitor.

Proposed Methodology

To capture staffing process and procedures, the evaluation team will focus on the *Safe at Home West Virginia* Next Steps Care Coordinators and Intensive Wraparound Care Coordinators responsible for implementing and managing the wraparound treatment plan. We propose two data sources for this goal/objective:

- **Interviews and Focus Groups** – We propose conducting focus groups with local agency staff and partners. We also propose interviews or a focus group with the BCF Training Workgroup members and will gather staffing information in our interviews with the BCF Home Team and the Wraparound Advisory Team.
- **Document Review** – The evaluation team will request and review training attendance logs, training materials, position hiring requirements, staff qualifications, and other documentation as available. We will extract information on the number of training hours for each staff, frequency of training or “refreshers,” procedures for training new staff, staff education and experience, frequency of staff turnover, and reasons for turnover.

Section 4, Subsection 4.4: Goal/Objective 4

Q4. The service delivery system, including procedures for determining eligibility, referring clients for services, the array of services available, the number of children/families served and the type and duration of services provided.

A4. Vendor Response:

Background

Safe at Home West Virginia services intends to make a fundamental shift in how child welfare services are coordinated and delivered to youth and their families in West Virginia. The demonstration relies on evidence- and community-based services, which will vary in availability from county to county. As existing services are enhanced and new services are developed and implemented, BCF will need as much on-the-ground feedback as possible about the individual service array in each county and the progress of each county in serving eligible clients.

Proposed Methodology

The evaluation team will examine the service delivery system for *Safe at Home West Virginia* by documenting how youth become eligible for *Safe at Home West Virginia* services (e.g., the CANS threshold to determine the level of services required), referral processes, processes for coordinating services, and processes for partnering with community-based providers. We will capture the service array available in each county in relation to the needs of the youth and families served there, the development of necessary services and supports where they are not currently available, how services differ from the services offered pre-demonstration, the number of youth and families who are served in each county, and the type and duration of the services. We propose the following data sources for this goal/objective:

- **Administrative Data** – The evaluation team will explore the use of existing service data (e.g., from FACTS or RBA service monitoring) to track the number of youth and families served and the type and duration of services received. If this data are not currently available from an existing database, we will work with the Bureau to develop methods to collect the data.
- **Family Satisfaction Surveys** – The Wraparound Advisory Team has been tasked with developing satisfaction surveys for families. We propose working closely with the Wraparound Advisory Team to develop the family satisfaction survey and procedures

for administration. We will analyze these surveys to measure the availability, impact, and perception of care coordination planning and services within the context of the needs of each family and community. We propose that the families complete one initial and one post-survey. The initial satisfaction surveys will be administered at the conclusion of the Initial Engagement and Planning phase for Intensive Care Coordination and the end of the Pre-community Engagement phase of Next Steps to collect information on the concentrated case planning during the first 90 days of both interventions. We propose administering the second round of surveys at the conclusion of the Maintenance phase of the Intensive Care Coordination intervention and the Intensive Reunification phase of the Next Steps intervention. We will work with BCF to make decisions about survey administration and other key data collection protocols.

- **Interviews and Focus Groups** – The evaluation team will conduct focus groups or individual interviews to gather information on service planning, service availability, unmet service needs, and service array partnerships. We have identified the Services Implementation Workgroup, the Practice Development Workgroup, the BCF Home Team, the Wraparound Advisory Team, the Coordinating Local Agencies, and local service array partners as potential sources of information on services.
- **Document Review** – The evaluation team will review policies and procedures, service plans, agreements with service array partners, referral forms, and other agency documentation around services. The documentation will inform our analyses of the wraparound service structure and procedures as planned and implemented.

Section 4, Subsection 4.5: Goal/Objective 5

Q5. The role of the courts in the demonstration and the relationship between the child welfare agency and court system, including any efforts to jointly plan and implement the demonstration.

A5. Vendor Response:

Background

BCF has a longstanding collaborative relationship with the courts and the Court Improvement Project, but has identified a need to further develop their relationship with the courts to support the *Safe at Home West Virginia* demonstration. As the cooperation of the courts is essential to any system change in child welfare, the process evaluation will examine and document the role the courts in the planning and implementation of *Safe at Home West Virginia*. Some key items the evaluation team will capture include the development of further supports for the demonstration from the courts and the communication and collaboration processes between the courts and BCF in the implementation of the demonstration.

Proposed Methodology

Information on the role of the courts in the demonstration will come from two main sources:

- **Interviews and Focus Groups** – As part of our stakeholder interviews and focus groups, we will inquire about court involvement with the DHHR Safe at Home Oversight Team and other key court personnel identified as active or knowledgeable about the court’s role in the demonstration. Interviews and focus groups with the BCF Home Team, Wraparound Advisory Team, and other stakeholders will also include questions on court collaboration, as appropriate.
- **Document Review** – The evaluation team will review project reports, memos, policies and procedures, and other documentation with information on court involvement in the planning and implementation of *Safe at Home West Virginia*. We will extract information on court procedures as relate to the demonstration and how the court serves as a facilitator or barrier to implementation.

Section 4, Subsection 4.6: Goal/Objective 6

Q6. Contextual factors, such as the social, economic, and political forces that may have a bearing on the replicability of the intervention or influence the implementation or effectiveness of the demonstration. This discussion will note any possible confounding effects of changes in these systems, or changes resulting from other demonstrations or reforms that were implemented during the Title IV-E demonstration.

A6. Vendor Response:

Background

West Virginia has been and continues to be extremely active in system reforms geared toward improving child welfare practice and outcomes for West Virginia children and families. Recent changes to the IV-E program and programs like the Building Bridges Initiative and the CIP's New View Project may support and enhance *Safe at Home West Virginia*. The evaluation team will seek to understand these and other changes in practice order to provide context for understanding the outcomes findings. We will also document the social, economic, political, and cultural elements in each county, region, and in the state as a whole, that may affect the demonstration. It is particularly important to document the extent that community needs (poverty, low education, unemployment) or lack of needs facilitate or create a barrier for implementation.

Proposed Methodology

Contextual information will be gathered through two main sources:

- **Interviews and Focus Groups** – The evaluation team will interview both state office, and regional- and county-level stakeholders about the contextual factors affecting implementation of the *Safe at Home West Virginia* services across the state and in their individual communities. We will ask for stakeholder perceptions on community strengths and barriers and the intersection of *Safe at Home West Virginia* with other programs serving the target population.
- **Document Review** – We will also collect information from project reports, media reports, and other documentation as available to document larger contextual factors, community perception of the demonstration, policy changes, and any system-level factors that may affect implementation *Safe at Home West Virginia* services in participating counties.

Section 4, Subsection 4.7: Goal/Objective 7

Q7. The degree to which demonstration programs and services are implemented with fidelity to their intended service models.

A7. Vendor Response:

Background

Determining whether the demonstration program is being implemented with high fidelity to the wraparound model is a crucial factor in obtaining reliable and replicable evaluation outcomes as well as collecting and disseminating data to monitor and support *Safe at Home West Virginia's* implementation. However, measuring fidelity for the wraparound model can be complicated due to its complexity and high degree of individualization. Assessing whether wraparound is being implemented as intended requires assessing: (1) adherence to the key principles of wraparound; (2) whether the basic activities of facilitating a wraparound process are occurring, and (3) supports at the organizational and system level. Thus more than one method for measuring fidelity will be needed.⁷

Proposed Methodology

The evaluation team will work with BCF to develop appropriate measures of fidelity in concordance with the assessment and evaluation approach developed by the National Wraparound Initiative's Wraparound Evaluation and Research Team. This work will entail the following:

- Identifying essential functions of the wraparound team within the *Safe at Home West Virginia* context;
- Obtaining profiles for the interventions;
- Determining indicators for occurrence of essential functions;
- Determining indicators for delivery of interventions; and,
- Mapping indicators to the essential functions and intervention profiles.

⁷ Bruns, E. (2008). Measuring wraparound fidelity. In E. J. Bruns & J. S. Walker (Eds.), *The resource guide to wraparound*. Portland, OR. Retrieved from <http://www.nwi.pdx.edu/NWI-book/Chapters/COMPLETE-RG-BOOK.pdf>.

We will also work with BCF, its partners, and key stakeholders to determine efficient methods of collecting data. For example, the family satisfaction surveys discussed above in Goal/Objective 4.4 will likely provide a significant amount of fidelity information. The evaluation team will also explore what fidelity information is available through the Office of Planning and Quality Improvement and the RBA or additional contract monitoring systems. Some key questions that the evaluation team will seek to answer include the following:

- **Q1.** Were CANS and other appropriate measures administered within the testing window?
- **Q2.** Were the Multidisciplinary Team and Initial Family Joining meetings held within the designated timeframe?
- **Q3.** Did caregivers/natural supports attend the meeting?
- **Q4.** Were the service referrals responsive to the family's needs?
- **Q5.** Did the case plan build on family strengths?
- **Q6.** Were services delivered as intended? Were services of sufficient quality and duration?
- **Q7.** Did the family advance to the next phase in the allotted time?

Section 4, Subsection 4.8: Goal/Objective 8

Q8. The barriers encountered during implementation, the steps taken to address these barriers, and any lessons learned during implementation.

A8. Vendor Response:

Background

West Virginia is implementing a complex demonstration project in diverse communities. Implementation will inevitably involve addressing both anticipated and unanticipated barriers. The evaluation team will identify and document implementation barriers and their effects, the steps taken at the state-, regional-, and county-level to address the barriers, and the progress made. The evaluation team, through regular communication and reports, will provide real-time feedback to BCF that facilitates a continuous developmental or quality improvement loop.

Proposed Methodology

We propose gathering information on implementation barriers through:

- **Stakeholder Interviews and Focus Groups** – The evaluation team will interview both state office and regional- and county-level stakeholders about their perceptions of current and potential barriers to the implementation of *Safe at Home West Virginia*. We propose conducting interviews and focus groups with members of the DHHR Safe at Home Oversight Team, the BCF Wraparound Home Team, the Wraparound Advisory Team, and the Coordinating Local Agencies. We will work with BCF to determine if there are additional sources that would be appropriate to engage in data collection.
- **Document Review** – We will also extract information about barriers from project reports, meeting notes, and other available documentation. This information will provide insight on implementation barriers, steps taken to overcome them, as well as the impact of the steps taken.

Section 4, Subsection 4.9: Goal/Objective 9

Q9. Any additional data collection identified as needed.

A9. Vendor Response:

The evaluation team will work with BCF to determine if additional data collection is needed. For example, BCF may wish to examine specific process questions regarding juvenile justice involvement or coordination with the education system.

Outcome Evaluation Questions (Q4.10 – Q4.19)

Outcome Evaluation Questions (Q4.10 – Q4.19)

Overview of the Approach to the *Safe at Home West Virginia* Outcomes Evaluation

Background

West Virginia's Title IV-E Child Welfare Demonstration Project, *Safe at Home West Virginia*, will roll out a full continuum of intensive and innovative community-based services using a wraparound approach, tailored to the needs of individual youth and families, to improve outcomes for youth age 12 to 17 in or at risk of congregate care placement. The West Virginia waiver demonstration aims to improve youth **well-being** and family functioning, increase the number of youth staying in their home communities, and reduce reliance on congregate care, so that youth can remain **safely and permanently** in their own homes and communities. More specifically, the demonstration intends to improve outcomes in the following areas:

- Number of youth placed in congregate care;
- Length of stay in congregate care;
- Number of youth remaining in their home communities;
- Rates of initial foster care entry;
- Number of youth re-entering any form of foster care;
- Youth safety;
- Well-being of youth;
- Educational achievement; and
- Improved family functioning.

The evaluation team offers the skills and expertise in developing methodologies for analyzing comparative outcome measures for safety, permanency, and well-being. Our outcomes evaluation approach proposes a rigorous method to test the hypotheses of the demonstration, a series of outcome measures to assess the impact of the demonstration on each goal, and a strategy for determining the impact of each demonstration component on outcomes.

Research Questions and Methods

West Virginia's demonstration will include a series of research questions, with the overriding question: When compared to youth involved with West Virginia's Department of Health and Human Resources, Bureau for Children and Families prior to the demonstration:

Q. Do youth ages 12 to 17 in or at risk of congregate care, and their families, receiving *Safe at Home West Virginia* experience improvements in safety, permanency and well-being outcomes, and reduced time in congregate care?

The West Virginia Bureau for Children and Families (BCF) hypothesizes that *Safe at Home West Virginia* will reduce the number of youth in congregate care, reduce the length of stay for youth in congregate care, achieve permanency in a more timely manner, improve the safety and well-being of youth, and improve family functioning so that youth can remain in their own home safely. Specific research questions, and related hypotheses, are presented in the subsections dedicated to each goal/objective. The evaluation team proposes to test the overriding hypothesis that *Safe at Home West Virginia* will improve outcomes for youth in congregate care and at risk of congregate care, and assess change for each goal identified as part of the outcomes evaluation, using a matched case design to compare outcomes using rigorous matching and analytic procedures. Further, we suggest a strategy to examine the impact of individual components of the evaluation to gain a richer understanding about what is working to achieve desired outcomes.

Matched Case Design

BCF proposes the evaluator use a retrospective matched case design with historical data from the Families and Youth Tracking System (FACTS) and other data as available. Westat's evaluation team will work with West Virginia BCF to develop procedures for matching demonstration youth to similar historical comparison youth, building on our demonstrated success in designing rigorous evaluations for other waiver states. The RFP specifies that the evaluation team may propose to use propensity score matching (PSM) or a comparable statistical matching methodology. In our opinion, PSM may not be the best choice to provide valid and reliable outcomes comparisons for this evaluation. PSM assumes that each child has a non-zero probability of receiving each intervention (no *Safe at Home West Virginia* services versus *Safe at Home West Virginia* services); however, historical youth have no chance of receiving *Safe at Home West Virginia* services, so this assumption does not hold. Therefore, based on our experience and the state of West Virginia's preferences to use a

statistical matching methodology, we propose using an alternative statistical matching methodology, a “distance-matching” method to match demonstration youth with historical youth on their case characteristics that are known to correlate with the proposed outcomes. This method helps to identify matched demonstration and historical youth in the target population (age 12 to 17) with similar expected outcomes in the absence of an effect of the demonstration interventions. Outcomes of the demonstration youth will be compared to outcomes of matched youth served historically.

Using the distance-matching method, we will match demonstration youth and comparison youth based on demographics, service characteristics (e.g., custody status, permanency goals) and covariates that may be related to outcomes (e.g., length of time in out-of-home placement prior to the start of *Safe at Home West Virginia* or congregate care services, length of time in congregate care placement prior to the start date, assessment scores and family and child service needs). The proposed matching variables, to be discussed with BCF, include:

- Age;
- Gender;
- Race/ethnicity;
- Custody status;
- Primary removal reason;
- Contributing factors for removal (child behavior/mental health, substance use/abuse, truancy, domestic violence, parental mental health);
- Prior out-of-home placement experience (prior to current entry during the study period);
- Prior congregate care placements;
- Time in out-of-home care placement;
- Time in congregate care placement;
- Permanency goal at time of service referral;
- Involvement with juvenile justice (dual involvement);
- Region of the state;
- Disability status (e.g., no diagnosis or disability, disability or DSM diagnosis); and

- Needs and strengths identified in assessments at start of the intervention/referral/admission to placement (e.g., risk areas identified, or assessment scores, if available for both groups).

Matching requires specifying a pool of youth from the historical period that can be matched with the youth served by *Safe at Home West Virginia*. For the target population of youth age 12 to 17 who are in, entering, or at risk of entering congregate care during the *Safe at Home West Virginia* demonstration period, the ideal comparison pool will be youth who were in, entering, or at risk of entering congregate care during a historical period. Although it is straight forward to identify youth in or entering congregate care, identifying the “at-risk” population consistently in the historical and demonstration period—whether or not they entered congregate care—will be key to ensuring the matched youth are selected from a pool of youth comparable to those in the target population for *Safe at Home West Virginia*. If quality data are available, criteria such as diagnosis, dual involvement with juvenile justice and child welfare, history of placement disruption, and history of psychiatric hospitalizations can be used to identify youth at risk of congregate care placement for inclusion in the target population and historical pool of youth. The evaluation team will work closely with BCF to clearly define the best method to identify youth at risk of congregate care placement in the historical and demonstration periods.

Child-level data from FACTS and other sources (as available) will be used for matching procedures and to analyze outcomes pertaining to goals identified in the RFP. Data quality of variables impacts the validity of the analyses, so the team will assess data quality and availability for both historical and *Safe at Home West Virginia* youth before finalizing the list of variables to include in matching and outcome analyses. SAS will be used to make the matches between *Safe at Home West Virginia* youth and historical youth and to conduct quantitative analyses.

Outcome Measures and Data Sources

The evaluation team has identified a series of outcome measures for each goal of the demonstration, to be discussed with BCF. These measures and data considerations are described in the subsection for each goal. Child-level data from FACTS will serve as the primary data source for outcome measures, and will be supplemented with data from the Child and Adolescent Needs and Strengths Assessment (CANS), West Virginia Education Information System (WVEIS), other CAPS assessments, and any other sources identified by the state. The quality and completeness of data for each variable will be assessed, to ensure reliable and valid data are used for each outcome measure.

Descriptive Analyses

The evaluation team will conduct descriptive analyses to describe the population of youth served by *Safe at Home West Virginia* and the pool of youth served historically (unmatched) semi-annually, depending on availability of data.⁸ Data will include the number of youth served, the number of youth served by county and by service location (in-state placement, out-of-state placement, and in community), and demographics, child and family characteristics, and service-related characteristics (e.g., child's race, sex, age, reason for removal, circumstances of removal, risk factors, etc.). The number of youth served will be presented by intervention type (i.e., Intensive Care Coordination and Next Steps) and county for *Safe at Home West Virginia* youth. Selected outcome indicators will also be presented descriptively for the *Safe at Home West Virginia* and historical pool of youth, although no conclusions should be drawn based on the descriptive, unmatched data. SAS will be used for all quantitative analyses.

Testing the Demonstration Hypothesis

To test the overriding hypothesis that *Safe at Home West Virginia* will improve outcomes for youth in or at risk of congregate care placements, the primary method will be to match *Safe at Home West Virginia* youth with similar youth served historically, as described earlier, and conduct statistical analyses to compare the outcomes of these matched pairs of youth. Descriptive analyses, survival analyses (Cox regression and Kaplan Meier procedure), growth modeling, and other multivariate analyses (linear regression, conditional logistic regression, and repeated measures analyses) will be used to compare *Safe at Home West Virginia* youth with the matched youth with similar characteristics. The categorical intervention variable, matched pair identifier and a series of demographic, child and family characteristics, and service-related covariates (including service components) will be entered into each regression. The county will be included as a covariate to help account for any discrepancy in services provided (e.g., based on service accessibility). In addition, the date their services began will be entered into the analysis to help control for time trends, as this study includes youth from two different time periods and extends over several years. The parameter for the categorical intervention variable will be used to assess the effect of implementing *Safe at Home West Virginia* after adjusting for the effect of other predictors. Although the matching

⁸ The first Semi-annual Report may be limited to the numbers served, whereas later reports may provide additional descriptive data. Additionally, some outcome data may be available annually (e.g., standardized tests), not semi-annually, and thus will be reported on that schedule.

procedure creates balanced groups on matching variables, matching variables may be included in the analyses to adjust for any remaining imbalance.

Several outcomes require a different approach to test the hypothesis. An interrupted time series design will be used to assess change in the number of youth placed in congregate care, because counts of youth in care cannot be estimated from matched pairs. Repeated measures analyses may be used to assess change in well-being within the *Safe at Home West Virginia* population when the outcome data are unavailable for the historical group.

Data quality checks will be conducted prior to conducting any quantitative analyses.

Strategy for Determining the Impact of Each Demonstration Component on Outcome(s)

West Virginia’s demonstration includes two *Safe at Home West Virginia* Wraparound Interventions: Intensive Care Coordination (ICC) and Next Steps. Both interventions begin with the completion of the Comprehensive Assessment Planning System (CAPS), including the CANS assessment. With the Initial Family Joining Meeting, *Safe at Home West Virginia* aims to engage the family to participate in the planning process. With these assessments, a multi-disciplinary team approach, and the Initial Family Joining Meeting, the State aims to better identify the needs of each youth and subsequently address those needs within an extensive service array to improve the safety, permanency and well-being of youth and their families.

West Virginia is committed to employing a retrospective matched case design to test the impact of *Safe at Home West Virginia* on safety, permanency and well-being outcomes. By comparing outcomes between the demonstration and historical conditions, an evaluator can make a summary statement about whether the demonstration “did” or “did not” work. Although this finding or summary judgment on a program would be interesting, the utility or usefulness of this claim would be limited in terms of the development of future policies or practices. Rigorous evaluations require more than a “yes” or “no” response. Rigorous evaluations investigate the past, monitor the present, and prepare for the future by providing answers about the practical and critical questions agencies need to

successfully serve families and youth. The evaluation we propose will accomplish this by answering the following questions:

Q. Which youth and families benefited most from the demonstration, and why?

Q. Which Wraparound interventions and program components were most effective for youth and families with regards to safety, permanency and well-being? How might the State of West Virginia modify the demonstration to achieve even better outcomes?

Our strategy to determine the impact of each demonstration component and its specific outcomes is to approach the evaluation as intervention research. We are committed to an evaluation that identifies the specific mechanisms of change. That is, although it will be important to know if the demonstration group achieved better outcomes through the demonstration intervention services and whether the desired outcomes were achieved in a cost neutral manner, our analyses will also focus on modeling the relationship between individual interventions (ICC and Next Steps) and individual outcomes. We will also examine the relationship between specific program components and outcomes, depending on the availability of data, to gain a deeper understanding of what works to achieve better outcomes.

To do this, we will explore with BCF which components of *Safe at Home West Virginia* are being tracked and measured, for possible inclusion in the model. For example, does family participation in the Initial Family Joining meeting predict improved desired outcomes? Does the quality and completeness of the service array in the youth's county predict desired outcomes? The array of services received by families will vary according to a wide range of factors including but not limited to risk of further maltreatment, cooperation, age of the youth, the presence of certain co-occurring problems (e.g., substance abuse may impact treatment engagement in ways different than a behavioral or mental health diagnosis), and the availability of services within the communities. The variation in services across youth and families will provide the opportunity to investigate the unique effects of each component of the demonstration.

This is an approach we have used repeatedly in our prior work with child welfare services. Our evaluation will include specific analyses that investigate the unique contribution of each service within the wraparound program. For example, how well does *Safe at Home West Virginia* (Intensive Care Coordination and Next Steps) work to address youth behavioral problems and prevent placement in foster care? It is also important to note however, that certain interventions may work

better for certain populations/demographics. These types of analyses are critical for future program planning and will be well represented in our evaluation reports to the state of West Virginia.

Reporting

Descriptive data analyses conducted semi-annually will be presented in the semi-annual report. Results of the analyses testing the demonstration hypotheses will be presented in the interim and final reports.

The evaluation team will work with West Virginia BCF, its partners, and key stakeholders to finalize our approach, including research questions, outcomes and indicators, comparison populations, and other evaluation methods as we develop the demonstration Evaluation Plan. The following sections of this proposal present the evaluation team's initial ideas regarding methods for each goal presented in the RFP.

Section 4, Subsection 4.10: Goal/Objective 10

Q10. Number of youth placed in congregate care.

A10. Vendor Response:

Background

West Virginia has relied heavily on congregate care in recent history, particularly for older youth. As of September 2013, 61 percent of youth age 12 to 17 in out-of-home care were in congregate care settings. Moreover, during fiscal year 2013, 71 percent of youth entering care at age 12 to 17 were placed in congregate care. West Virginia BCF seeks to reduce its reliance on congregate care by implementing *Safe at Home West Virginia*, initially with the target population of youth age 12 to 17 in congregate care.

Proposed Research Question and Methods

To help understand the impact of *Safe at Home West Virginia* on the number of youth in congregate care, the evaluation will ask the following research question:

Q. Does the *Safe at Home West Virginia* demonstration project result in a decline in the number of youth age 12 to 17 placed in congregate care?

BCF hypothesizes that *Safe at Home West Virginia* will reduce the number of youth in congregate care and reduce the length of stay for those youth. We propose to examine the extent to which *Safe at Home West Virginia* reduces the number of youth age 12 to 17 in congregate care using descriptive case flow data for youth age 12 to 17 served by congregate care, including data from the historical and demonstration period on the following:

- Number of youth in congregate care (point in time);
- Number of youth entering congregate care placement;
- Number of youth exiting congregate care placement;
- Number and percentage of youth in out-of-home care by placement type (congregate care, kinship care, foster home care, other);

- Number and percentage of youth placed in congregate care in-state vs. out of state; and
- Rate of youth placed in congregate care per 1,000 youth age 12 to 17 in the WV population.

Graphical presentation of these data will allow a visual assessment of historical trends, and provide insight as to whether or not there is movement in the correct direction (a reduction in youth in congregate care). The descriptive data may be examined in the semi-annual reports during the evaluation period, although no conclusions should be drawn based on this semi-annual review. Because counts of youth in congregate care cannot be estimated from matched pairs as described above, for the final report, the analysis will include an interrupted time series design, using perhaps quarterly data, to test for statistically significant trends in the data over time.

Data sources will include WV BCF's FACTS system and the U.S. Census Bureau.

Reporting

Descriptive data for these indicators will be reported semi-annually. The final analysis of trends will be reported in the Interim and Final Reports.

Section 4, Subsection 4.11: Goal/Objective 11

Q11. Section 4, Subsection 4.11: Goal/Objective 11: Length of stay in congregate care.

A11. Vendor Response:

Background

Once placed in congregate care, West Virginia's youth may remain in congregate placement for an extended period of time rather than leaving to permanency or stepping down to a less restrictive placement. For instance, among youth placed out of state, the average length of stay among discharged youth was 14 months, for the period from July 1, 2011, to June 30, 2012. As part of West Virginia's effort to reduce its reliance on congregate care, the implementation of *Safe at Home West Virginia* intends to reduce the length of time youth stay in congregate care.

Proposed Research Question and Methods

In regard to length of stay in congregate care, the evaluation will ask the following research question: When compared to youth served by West Virginia BCF prior to the demonstration:

Q. Do youth age 12 to 17 served by the *Safe at Home West Virginia* demonstration project experience shorter lengths of stay in congregate care?

West Virginia BCF hypothesizes that youth served with *Safe at Home West Virginia* will experience reduced length of stay in congregate care compared to similar youth served with traditional care. To test this, the evaluator will compare length of stay outcomes for *Safe at Home West Virginia* youth

in or entering congregate care during the study period to matched historical youth. Using administrative data from FACTS, the evaluation team will examine the following descriptive indicators for youth in congregate care:

- **Length of Congregate Care Placement** – The number of days from the start date of a congregate care placement to the end date of the congregate care placement, or the end date of the last continuous congregate care placement,⁹ or to the end of the reporting period for those still in care. This measure examines length of placement separately for those still in congregate care and those who left congregate care (point in time).
- **Length of Congregate Care Placement After *Safe at Home West Virginia* Implemented, Among Youth Already in Care** – For the subset of youth already in care when *Safe at Home West Virginia* was implemented, the number of days from the implementation date of the *Safe at Home West Virginia* intervention to the end date of the last consecutive congregate care placement, or to the end of the reporting period for those still in care. This measure examines length of placement separately for those still in congregate care and those who left congregate care (point in time).
- **Proportion of Youth in Congregate Care for <6 months, 6 to 12 Months, and >12 Months** – The proportion of youth for whom the indicated amount of time is (<6 months, 6 to 12 months, and >12 months) in congregate care from the start date of a congregate care placement to the end date of the congregate care placement, or the end date of the last continuous congregate care placement. This measure examines the proportion separately for youth still in congregate care and those who left congregate care.
- **Cumulative Time in Congregate Care** – The total number of months spent in congregate care placement at any time, whether or not the child left and re-entered congregate care, including all congregate care placement settings (non-detention).
- **Congregate Care Exits** – The number and percentage of youth leaving congregate care within 12 months.
- **Congregate Care End Reasons** – The placement end reason for youth leaving congregate care within 12 months, including number and percentage of youth:
 - Moving to a less restrictive placement setting within 12 months;
 - Moving to a more restrictive setting (e.g., hospitalization);

⁹ The length of congregate care placement refers to the number of days youth spend in one or more consecutive congregate care placements, without any gaps in placement records lasting more than 1 day. If a youth is in one congregate care placement setting, we count the number of days from the day the youth is placed in the congregate care setting to the day the youth leaves the congregate care setting. If the youth was placed in two or more consecutive congregate care settings, we count the number of days from the start date of the first congregate care placement to the end date of the last consecutive congregate care placement.

- Exiting foster care to permanency (reunification, guardianship, adoption); and
 - Exiting foster care for other reasons (e.g., emancipation, death).
- **Congregate Care Re-entries** – The number and percentage of youth re-entering congregate care within 3, 6, or 12 months, of those who left congregate care within 12 months.

The primary outcome measure to test the hypothesis that length of stay will be shorter for youth served by *Safe at Home West Virginia* compared to matched youth will be:

- **Timing (days) and Likelihood of Returning to the Community From Congregate Care After *Safe at Home West Virginia* Implemented within 12 and 24 Months (Survival Analysis)** – This measure examines the number of days from the start date of a congregate care placement to the end date of congregate care, censoring on cases where youth leave congregate care to more restrictive settings or exit care for other reasons (e.g., emancipation, incarceration, death). Return to the community refers to moves to less restrictive settings or exits to permanency.

Descriptive and multivariate statistics will be used to examine these indicators. Descriptive data will be summarized semi-annually for *Safe at Home West Virginia* youth and youth served historically, by region and by in-state vs. out of state placements. Descriptive and multivariate analyses will be conducted for the interim and final reports, comparing outcomes for *Safe at Home West Virginia* youth with matched historical youth to test the hypothesis that the demonstration will reduce time in congregate care. The unit of analysis will be matched pairs of youth. The evaluation will present descriptive data for the demonstration and matched youth, by region¹⁰ and total.

Cox regression analysis will test differences in time to event for demonstration and matched youth, examining both the timing and occurrence of youth returning to the community (leaving congregate care to permanency or less restrictive setting). The Kaplan Meier procedure will provide a visual illustration of the time to event for each group (*Safe at Home West Virginia* youth, matched youth). The categorical intervention variable, matched pair identifier and a series of demographic, child and family characteristics, and service-related covariates (including service components) will be entered into the regression. In addition, the date their services began will be entered into the analysis to help control for time trends, as this study includes youth from two different time periods and extends over several years. The parameter for the categorical intervention variable will be used to assess the effect of implementing *Safe at Home West Virginia* after adjusting for the effect of other predictors.

¹⁰ Region will include all counties within the region that are participating in the implementation and evaluation; in other words, for BCF Region II data will be aggregated for all 8 counties, and for BCF Region III data will be aggregated for the three participating counties.

Although the matching procedure creates balanced groups on matching variables, matching variables may be included in the analyses to adjust for any remaining imbalance. Covariates will include factors associated with length of stay in congregate care such as DSM diagnosis, behavior problem, placement instability, parental substance abuse, and medication status.¹¹

Reporting

Descriptive data will be reported semi-annually. Multivariate outcome analyses will be presented in the Interim Report and Final Reports.

¹¹ U.S. Department of Health and Human Services, Administration for Children and Families, Children's Bureau. (2015). *A national look at the use of congregate care in child welfare*. Washington, DC: Author; Hussey, D.L., and Guo, S. (2005). Forecasting length of stay in child residential treatment. *Child Psychiatry and Human Development*, 36(1), 95–111.

Section 4, Subsection 4.12: Goal/Objective 12

Q12. Number of youth remaining in their home communities.

A12. Vendor Response:

Background

The state of West Virginia has a long history of placing children, especially those requiring congregate care for intensive problems, in out of state placement. The state ranks sixth highest across the nation in the percentage of children placed in out of state congregate care. While the proportion of these youth placed out of state has decreased over several years, there was an increase in 2013, at about 25 percent, well above the 13.7 percent national average.¹²

Placing youth in close proximity to their home communities helps preserve continuity of family relationships and connections with the youth's community. Close proximity facilitates frequent visitation with family and opportunities to stay connected with friends, relatives, churches, and others in the youth's existing support network. At the same time, it is more feasible for youth to attend their neighborhood schools and use the same health care providers familiar with their history.

The *Safe at Home West Virginia* approach to ensuring youth remain in their home communities whenever safely possible is two-pronged — first, to provide a full-continuum of services to youth and their families using a wraparound approach, and especially the necessary supportive services needed to provide relief and support to parents and caregivers, to help families build long-term connections and supports in their communities. Additionally, the demonstration plans to develop the needed wraparound services within communities that will allow youth currently in out of state congregate care, to return and live safely in his or her home community.

¹² West Virginia Department of Health & Human Resources. *Initial Design and Implementation Report, Safe at Home West Virginia*. 2015.

Research Questions and Proposed Methodology

The demonstration intends to evaluate outcomes regarding youth remaining in their home communities by testing the following research question:

Qa. Among youth ages 12 to 17 at risk of entering congregate care, are youth served by *Safe at Home West Virginia* more likely to remain in their home communities than youth not served by the demonstration?

Qb. Among youth ages 12 to 17 in *out of state* congregate care facilities, are youth served by *Safe at Home West Virginia* more likely to return to their home communities than youth not served by the demonstration?

The evaluation team proposes to use data from the West Virginia FACTS to examine the extent to which the *Safe at Home West Virginia* program maintains youth in their home communities, and is able to move youth in out of state congregate care back to their home communities, both for the demonstration and historical groups. We propose to define “in the home community” to include youth served (1) in-home and (2) in an out-of-home placement within 20 miles¹³ of the known home location. This proximity makes routine connection to families, neighborhood schools, health care providers, and support networks more feasible on a daily or weekly basis. At the same time, we recognize that the need for specialized care sometimes precludes placement in home communities, and such specialized care may still be needed for some youth even with *Safe at Home West Virginia* services in place. Thus, we also wish to examine placement within 50 miles of the removal home, and in-state versus out of state, consistent with measures established by the West Virginia Commission to Study Residential Placement of Children. Further, because being in the home community suggests access to relatives and known schools, we propose to examine the extent to which youth who come into care are placed with relatives and whether or not they continue to attend the same schools.

The descriptive analyses will include the following indicators for youth served by *Safe at Home West Virginia* and a pool of youth served historically:

- Number and percentage of youth remaining in their home communities;

¹³ We will work with BCF to revise this definition if 20 miles is not agreeable.

- Number and percentage of youth in **out-of-state congregate care** returning to their home communities;
- Proximity of foster care placement to the known home location, among youth in out-of-home placement
 - Number and percentage placed **in West Virginia** vs. **out of state**;
 - Number and percentage placed **in West Virginia** by proximity (within 20, 50, and >50 miles of known home location); and
 - Number and percentage placed **out of state** by proximity (within 20, 50, and >50 miles of known home location).
- Proportion of youth placed with relatives, of youth in out-of-home placement
 - Number and percentage placed with relatives vs. in non-relative homes vs. in congregate care;
 - Number and percentage placed with relatives **in West Virginia** vs. **out of state**;
 - Number and percentage placed with relatives **in West Virginia** by proximity (within 20, 50, and >50 miles of known home location); and
 - Number and percentage placed with kin **out of state** by proximity (within 20, 50, and >50 miles of known home location).
- Continuity of school assignment
 - Number and percentage continue to attend same school (as when removed and or began intervention);
 - Number and percentage attending a different school but in the same school county; and
 - Number and percentage attending a different school and in a different school county.

The primary outcome measures to test the hypothesis that youth served with *Safe at Home West Virginia* will be more likely to remain in their communities will include the following:

- **Timing (Days) and Likelihood of Remaining within (or Placement Outside) the Home Community** within 12 months and 24 months (survival analysis) – or the entry cohort of youth, examines the number of days from the start date of the intervention to the date a youth is placed more than 20 miles from the known home location. This measure provides the proportion of youth placed within and outside the community,

the amount of time the youth “survive,” or remain, in the home community on average, and the risk (likelihood) of placement outside the home community.

- **Timing (Days) and Likelihood of Return to Home Community** within 12 months and 24 months (survival analysis) – For the subset of youth placed in **out of state congregate care** at the start of the intervention, examines the number of days from the start date of the intervention to the date a youth is placed within 20 miles of the known home location (either in placement or return home). This measure provides the proportion of youth who return to their home community, the amount of time it takes for youth to return on average, the home community on average, and the risk (likelihood) of placement outside the home community.
- **Likelihood of Stable School Assignment** at initial placement and 12 months later (logistic regression) – For the entry cohort of youth, examines the likelihood that youth remain in the neighborhood school vs. are transferred to a different school.

Descriptive and multivariate statistics will be used to examine these indicators. Descriptive indicators will be summarized semi-annually for *Safe at Home West Virginia* youth and a pool of youth served historically, by region and by in-state vs. out of state placements. Descriptive and multivariate analyses will be conducted for the interim and final reports, comparing outcomes for *Safe at Home West Virginia* youth with matched historical youth to test the hypothesis that the demonstration will increase the proportion and likelihood of youth remaining in the community. In addition, multivariate analyses will test for increases in the proportion and likelihood of youth in out of state congregate care returning to the community and likelihood of stable school assignment.

The Kaplan Meier procedure will provide a visual illustration of the time to event (placement outside community; return to community) for each intervention group (*Safe at Home West Virginia* youth, matched youth). Cox regression analysis will test differences in time to event for demonstration and matched youth, examining both the timing and occurrence of youth being placed outside the community and, for those already in care, returning to the community. The categorical intervention variable, matched pair identifier, a series of covariates, and the date their services began (to control for time trends) will be entered into the regression analyses. Conditional (stratified) logistic regression will be used for categorical outcome variable (stable school assignment), with the matched pairs used to define strata. Covariates will be included in the analysis to test the hypothesis of service impact while also identifying factors that contribute to the outcome.

The ability of the child welfare agency to maintain youth within the community—the desired outcome—is driven in part by the extent to which the service array within the community can meet the needs of youth and their families. The demonstration intends to improve the service array within communities, but this may be more challenging in communities with a higher level of needs. As

such, the multivariate models will include a series of community covariates consistent with previous studies specifying community needs that may impact social services.¹⁴ Notably, poverty, unemployment, and low levels of education have been cited in previous research as barriers to strengths based work.¹⁵ Thus, the analyses will include the following:

- Poverty status (percentage of families with income below the poverty rate during the past 12 months);¹⁶
- Low school attainment among adults 20 years and older,¹⁷ including percentage with less than a ninth grade education and percentage with less than a high school diploma or equivalency;¹⁸ and
- Unemployment: the percentage of the civilian labor force age 16 years and over who are unemployed.¹⁹

In addition, the extent to which the home community is rural or urban may be a factor in service availability, so the analysis will include the rural-urban commuting area (RUCA) codes, which classify census tracts based on population density, urbanization, and daily commuting (U.S. Department of Agriculture).²⁰ Covariates will also include BCF Region, service components and characteristics, and family and child demographics and characteristics that may be associated with the outcome (e.g., diagnosis, behavior problems, placement instability, and other child needs). Stepwise variable

¹⁴ McCroskey, J. Christie, T. A., Lorthridge, J., Chambers, R., Pecora, P. J., Azzam, T. & Wold, C. (2009). *Prevention initiative demonstration project (PIDP) year one evaluation summary report*. Retrieved from http://www.casey.org/Resources/Publications/pdf/pidp_fr.pdf. National Center for Children in Poverty (2007). *Parents' low education leads to low income, despite full-time employment*. Retrieved from http://www.nccp.org/publications/pdf/text_786.pdf. Shook Slack, K., Holl, J. L., McDaniel, M., Yoo, J., & Bolger, K. (2004). Understanding the risks of child neglect: An exploration of poverty and parenting characteristics. *Child Maltreatment*, 9, 395-408. Smith, G. C., Palmieri, P.A. (2007). Risk of psychological difficulties among children raised by custodial grandparents. *Psychiatric Services*, 58(10), 1303-1310.

¹⁵ Ibid.

¹⁶ The U.S. Census Bureau uses several streams of income to calculate a family's total income. The final dollar amount is then compared to one of 48 poverty threshold designations, which vary by size of family and age of the family members. When the income is less than the dollar amount of a threshold then the family is considered as having income below poverty. <http://www.census.gov/hhes/www/poverty/poverty-cal-in-acs.pdf> See for example, U.S. Census Bureau. (2013). *2007-2011 American community survey 5-year estimates*.

¹⁷ The two categories under low education (less than a ninth grade education and less than a high school diploma or equivalency) were kept distinct to emphasize the level of need.

¹⁸ U.S. Census Bureau. (2013). *2007-2011 American community survey 5-year estimates*.

¹⁹ U.S. Census Bureau. (2013). *2007-2011 American community survey 5-year estimates, educational attainment, educational attainment for population 25 years and over table*.

²⁰ The U.S. Department of agriculture makes rural-urban commuting area (RUCA) data available, based on information from the U.S. Census Bureau's decennial census and American Community Surveys. Information about RUCA is available at <http://www.ers.usda.gov/data-products/rural-urban-commuting-area-codes.aspx#U9I07GPDWHO>. RUCA data are available at: <http://depts.washington.edu/uwruca/ruca-codes.php>.

selection procedures may be used to identify other significant predictors and interactions. If the variables used for matching are effective predictors of the outcome variable, the number of other variables that are selected may be relatively small. Data sources will include the U.S. Census Bureau's American Community Survey data, U.S. Department of Agriculture RUCA data, and FACTS, including home zip code data to link census data to child-level data.

The multivariate analyses will identify whether or not the demonstration youth have better outcomes than matched historical youth, after controlling for other factors, and identify which service components and community, service, family and child characteristics predict whether youth stay in their home communities.

Reporting

Descriptive data will be reported in the Semi-annual, Interim and Final Reports. The survival and multivariate analyses will be reported in the Interim and Final Reports.

Section 4, Subsection 4.13: Goal/Objective 13

Q13. Section 4, Subsection 4.13: Goal/Objective 13: Rates of initial foster care entry.

A13. Vendor Response:

Background

Like so many states across the country, West Virginia struggles with the rate at which youth are removed from their homes and placed in out-of-home care, and specifically in congregate care facilities. In 2013, of the 1,488 youth age 12- to 17-years-old that entered foster care in West Virginia, 71 percent were placed in congregate care.²¹ This rate is only more challenging with older youth that have severe emotional or behavioral disturbance issues. To improve the well-being of the youth served and to alleviate the expensive cost of maintaining youth in high-end care, the *Safe at Home West Virginia* program proposes to provide a full-continuum of trauma-informed, wraparound supports and services to youth and their families at risk of placement in congregate care, to strengthen family bonds and allow youth who would otherwise be placed in congregate care, to be served safely in their homes and avoid foster care placement.

Research Questions and Proposed Methodology

The demonstration intends to evaluate outcomes regarding the initial foster care entry of youth by testing the following research question:

Q. Do youth ages 12 to 17 at risk of out-of-home care served by the *Safe at Home West Virginia* program experience lower rates of initial entry into foster care than youth not served by the program?

²¹ West Virginia Department of Health and Human Resources, Bureau for Children and Families, 2014, *Safe at Home West Virginia Title IV-E Waiver Application*, p. 4.

The evaluation team proposes to use data from the West Virginia FACTS to examine the extent to which the *Safe at Home West Virginia* program reduces youth's rate of initial entry (placement) into foster care, comparing both the historical and demonstration periods. The analysis will consider both the

- Number and percentage of youth with an initial entry (placement) into foster care; and
- Number and percentage of youth with an initial entry (placement) into foster care who were served in their own home and had their case closed, but then had a subsequent initial entry into foster care within 12 months of case closure.

Variations between the groups may be due in part to changes in characteristics, such as child and family functioning, child behavior and maltreatment history. The premise is that youth and families served by the *Safe at Home West Virginia* will have decreased risks associated with the need for placement outside the home, and increased strengths thus allowing youth to remain in their homes safely.

We will provide descriptive analyses of the youth initially entering care in both groups by their demographic, family, and case characteristics (e.g., child's race, sex, child's age, reason for removal, circumstances of removal, risk factors, etc.). Additionally, the team will explore the timing and risk of the initial entry (placement) into foster care using survival analyses (Cox regression and Kaplan Meier procedure). These analyses will identify whether or not the demonstration youth have better outcomes than matched historical youth, after controlling for other factors, and identify characteristics of youth and their families that predict successful outcomes. The analyses will look at: (1) the number of days from the maltreatment substantiation disposition date to the initial placement into foster care during a case opening; and (2) the number of days between case closure and any initial foster care placement within 12 months subsequent to closure for cases that were served in-home. The Cox regression will include one or more predictors from child and family characteristics in the FACTS data.

Reporting

Descriptive data will be reported in the Semi-annual, Interim and Final Reports. The survival and multivariate analyses will be reported in the Interim and Final Reports.

Section 4, Subsection 4.14: Goal/Objective 14

Q14. Number of youth re-entering any form of foster care.

A14. Vendor Response:

Background

Although the rate of youth re-entering care is generally low, the risk of subsequent re-entry into foster care increases for older youth, and those youth with severe emotional or behavior disturbance issues and juvenile justice involvement. The *Safe at Home West Virginia* program proposes to provide a full-continuum of wraparound supports and services to youth in congregate care and their families including planning, coordination of services and steps to transition youth to community supports and follow-up. These services will strengthen family and community bonds and allow youth, to step down to less intensive foster care placements and ultimately return and remain safely in their homes without a subsequent re-entry into foster care.

Proposed Methodology and Analyses

The demonstration intends to evaluate outcomes regarding child re-entry into foster care after discharge by testing the following research question:

Q. Do youth ages 12 to 17 in congregate care served by the *Safe at Home West Virginia* program who exit foster care experience fewer re-entries after discharge than youth not served by the program?

The evaluation team proposes to use data from the West Virginia FACTS to examine the extent to which the *Safe at Home West Virginia* program reduces the number and percentage of youth ages 12 to 17 in congregate care who are discharged from foster care and who re-enter any form of foster care post-discharge, in both the historical and demonstration periods. The analysis will look at the number of re-entries overall, and also categorize timing of the re-entry for 6, 12, 18, and 24 months post-discharge. Variations between the groups may be due in part to differences in child and family characteristics, such as family functioning, child behavior, reason for removal, and so on. Those youth served by the *Safe at Home West Virginia* may show fewer risks and increased strengths thus altering their risk for re-entry into care.

We will provide descriptive analyses of youth in both groups re-entering care and describe variations their demographic, family, and case characteristics (e.g., child's race, sex, child's age, number of days in care, family and child risk factors, reason for removal, number of removals from home, circumstances of removal, etc.) and also describe differences in the characteristics of the re-entry population compared to those youth who do not re-enter. We will prepare this descriptive data graphically to allow a visual assessment of historical trends, and provide insight as to whether or not there is movement in the correct direction (a reduction in youth re-entering any form of foster care and specifically congregate care). The descriptive analyses provide valuable information, although no conclusions about services should be drawn based on this periodic review of these data.

Additionally, the team will conduct survival analyses (Cox regression and Kaplan Meier procedure) to assess the timing and likelihood of re-entry into foster care for those youth discharged from foster care, comparing the *Safe at Home West Virginia* target population to matched youth from the historical period. The analysis will explore differences for youth who re-enter after discharge and for those who do not, and identify characteristics of youth and their families that may affect the successful outcomes and also identify service needs that may not be addressed.

Reporting

Descriptive data for youth who re-enter will be reported in the Semi-annual, Interim and Final Reports. The descriptive data comparing youth who re-enter with those who do not, and the survival analyses will be reported in the Interim and Final Reports.

Section 4, Subsection 4.15: Goal/Objective 15

Q15. Youth safety (e.g., rates of maltreatment/recidivism).

A15. Vendor Response:

Background

West Virginia aims to improve youth safety by reducing the risk of child maltreatment and subsequent maltreatment through the use of an innovative combination of evidence-based wraparound programs and interventions. The evaluation of the *Safe at Home West Virginia* service model will not only answer questions specific to wraparound service efforts in West Virginia but will also help inform the national dialogue on how best to meet the complex needs of youth and families with a particular focus on reducing the risk and preventing maltreatment for youth ages 12 to 17. Key indicators in the research for measuring a reduction in child maltreatment risk include the parent's distress level and knowledge of child development, use of non-punitive parenting practices, parenting efficacy, level of parent caregiving and involvement, family harmony, and co-parenting quality.²²

Previous waiver demonstrations that focused on reducing risk of maltreatment have demonstrated positive outcomes. For example, a Florida-based demonstration project used home and community-based services, early intervention, and prevention strategies as some of the components of their waiver (e.g., Family Connections, Peaceful Paths, Resource Specialists, Family Finding, Diversion Staffings, Early Services Intervention). Findings suggest that youth assigned to the waiver group were significantly less likely to experience out-of-home care (about a 27% reduction) than youth in the comparison group. The Florida waiver participants also experienced a decline in the recurrence of maltreatment within 6-months of service termination.²³ Additionally, an Indiana-based waiver project also demonstrated positive outcomes. Youth who received waiver services spent less time out of home and were less likely to experience a subsequent substantiated report of maltreatment than the comparison group youth.²⁴

²² National Research Council. (1993). *Understanding child abuse and neglect*. Washington, D.C.: National Academy Press.

²³ Vargo, A.C., Armstrong, M.I., Jordan, N., Sharrock, P., Sowell, C., Yampolskaya, S. (2012). IV-E Waiver Demonstration Evaluation—Final Evaluation Report SFY 11-12. Tampa, FL: University of South Florida, Louis de la Parte Florida Mental Health Institute. Submitted to Florida Department of Children and Families.

²⁴ Loman, L.A., Filonow, C.S., Siegel, G.L. (2011). Indiana IV-E Child Welfare Waiver Demonstration Extension Final Evaluation Report. Prepared for the Children's Bureau by the Institute of Applied Research.

A study using a relative risk (RR) regression method to explore the extent to which children of caregivers in the Brevard C.A.R.E.S. (Coordination, Advocacy, Resources, Education and Support) wraparound intervention experienced a reduction of maltreatment 6 months post completion. Brevard C.A.R.E.S. is designed to reduce and prevent child maltreatment in identified at-risk families of children 0- to 17-years-old. The study of 308 children included 131 whose caregivers completed the intervention and a comparison group of 177 similarly situated children. The study found that children whose caregivers completed the intervention experienced less verified maltreatment than children in the comparison group. These findings have implications to enhance systems of care in the community that seek family interventions to support child maltreatment prevention.²⁵

Research Questions and Proposed Methodology

The hypothesis of the West Virginia demonstration is that connecting families with wraparound, well-targeted, and effective services (i.e., evidence-based services that reflect family needs and strengths) will improve family functioning, decrease the risk of maltreatment and subsequent maltreatment, and therefore prevent the placement of youth in foster care and long-term placement in congregate care. The demonstration intends to test the following research question pertaining to child safety:

Q. Do youth ages 12 to 17 at risk or in congregate care served by the *Safe at Home West Virginia* demonstration experience reduced risk of maltreatment and reduced subsequent maltreatment?

The evaluation team will investigate the long-term outcomes of safety, permanency and family risk for the youth served by *Safe at Home West Virginia* compared to those youth in the historical comparison group who received services as usual. The state administrative data in FACTS regarding child abuse and neglect reports and investigations (Family Functioning Assessment dispositions and “safe” or “not safe” on Safety Evaluation) will be analyzed. Descriptive data will be examined for the demonstration population and the pool of historical youth at risk of congregate care, so that the

²⁵ Schneider-Muñoz, A. Renteria, R.A., Gelwicks, J., and Fasano, M. (2015). Reducing risk: Families in wraparound intervention. *families in society: The Journal of Contemporary Social Services*, 96 (2), 91–98. doi: <http://dx.doi.org/10.1606/1044-3894.2015.96.18>.

Bureau can monitor the progress of the demonstration. For this outcome, the team will review the following indicators at 6, 12, 18, and 24 months:

- Number of reports per youth;
- Number of subsequent reports per youth;
- Proportion of youth with subsequent reports;
- Proportion of youth with a “safe” or “not safe evaluation in subsequent reports;
- Proportion of youth with subsequent substantiated reports;
- Number of substantiated reports per youth; and
- Type of maltreatment substantiated.

To test the hypothesis, that the risk of maltreatment of youth receiving wraparound demonstration intervention services will decrease, the evaluation team suggests two outcomes. The first will be a comparison of the safety evaluation indicators, “safe” and “not safe” for the *Safe at Home West Virginia* youth to the historical matched youth at risk of congregate care receiving services as usual. The reported measure will be the number and percentage of youth served by *Safe at Home West Virginia* who are assessed as “safe” as compared to the youth in the historical group in subsequent safety evaluations. The second measure will use the CANS level of risk data to examine the number and percentage of youth served by *Safe at Home West Virginia* whose risk for the need of services is reduced at the transition phase of the intervention compared to their risk assessed at the start of intervention wraparound services.

To test the hypothesis that youth receiving wraparound demonstration intervention services will experience a reduction in maltreatment recidivism, we will compare the rates of subsequent maltreatment reports for youth served after the implementation of the *Safe at Home West Virginia* to the rates of subsequent maltreatment for the matched group of youth served in the pre-wavier

period, using data about abuse and neglect allegations and dispositions from FACTS. We will specifically look at the following indicators, which apply to youth living at home:

- Among the subset of youth in the study population who remain home (but are identified at risk of congregate care placement):²⁶
 - Timing (days) and likelihood (risk) of allegations/report of maltreatment that occur subsequent to the intervention start date; for demonstration youth, the start date is the date the youth and his or her family were assigned to receive demonstration services and for the historical group, the start date is the corresponding date to the demonstration youth, which may be the opening of an ongoing case (to be defined with the BCF team);
 - Timing (days) and likelihood of a **substantiated** allegations/report of maltreatment that occur subsequent to the intervention start date;
 - Number of subsequent reports of maltreatment within 6 and 12 months after the intervention start date;
 - Number of subsequent substantiated reports of maltreatment within 6 and 12 months after the intervention start date; and
 - Type of maltreatment substantiated.
- For youth who return home from congregate care (exit cohort):
 - Timing (days) and likelihood of subsequent maltreatment report, from the date returned home;
 - Timing (days) and likelihood of subsequent substantiated maltreatment report, from the date returned home;
 - Average number of subsequent reports of maltreatment within 6 and 12 months after exit;
 - Average number of subsequent substantiated reports of maltreatment within 6 and 12 months after exit; and
 - Type of maltreatment substantiated.

It is important to investigate both the overall probability of subsequent maltreatment and the timing of maltreatment because the probabilities may be similar (e.g., both groups experience maltreated at

²⁶ For this indicator it is possible the historical population may have too few youth at risk who remain home to be included in this subgroup analysis. In the absence of a viable comparison population, we will examine the indicators for the waiver population, including regional comparisons and testing predictors of risk of maltreatment.

approximately 30%), but the timing of such event may differ. In addition, we will examine time to maltreatment reports by maltreatment type. It is important to examine the specific types of maltreatment that occur for youth involved in the demonstration services compared to the matched comparison youth. This approach to outcomes will permit one to understand whether the demonstration is effective at reducing the overall risk of subsequent maltreatment and also whether the demonstration activities significantly decrease the risk in some areas (e.g., neglect) better than others (e.g., physical abuse).

Although the comparison between the demonstration and historical comparison group are of great importance and central to nearly all evaluation activities, our analytic plans are designed to provide more detailed understanding about which subgroups of youth are at greatest risk of continued maltreatment or at greatest risk of removal from the biological family home or placement in congregate care. Thus, our analyses of subsequent maltreatment will include youth and parent demographics such as (race, gender, age), history of maltreatment, trauma, behavioral and mental health of youth and parents, contributing factors for placement, substance abuse, and other important covariates play in explaining future maltreatment and the need for congregate or foster care placement. These analyses are intended to help future efforts with regard to targeting (i.e., which families are at great risk) and other modifications/expansion of demonstration efforts. In addition, analyses will include service components and service characteristics, to understand the role of services in mitigating risk.

Descriptive and multivariate statistics will be used to examine the maltreatment indicators. Descriptive data will be summarized semi-annually for *Safe at Home West Virginia* youth and youth served historically, by region. Descriptive and multivariate analyses will compare outcomes for *Safe at Home West Virginia* youth with matched historical youth to test the hypothesis that the demonstration will reduce time in congregate care. The unit of analysis will be matched pairs of youth. The evaluation will present descriptive data for the demonstration and matched youth, by region.

Cox regression analysis will test differences in time to event for demonstration and matched youth, examining both the timing and occurrence of maltreatment reports and substantiated reports and controlling for other factors that may influence safety outcomes. Consistent with other Cox regression analyses for the demonstration, the categorical intervention variable, matched pair identifier, a series of child and family characteristics (described above), and the date services began (to help control for time trends) will be entered in the regression analysis. The Kaplan Meier procedure will provide a visual illustration of the time to event for each group (*Safe at Home West*

Virginia youth, matched youth), by region, and by maltreatment type. Together, these analyses will help assess the impact of the demonstration on safety outcomes.

Reporting

The evaluation team will provide descriptive analyses for the Semi-annual, Interim, and Final Reports. Multivariate analyses will be conducted for the Interim and Final reports.

Section 4, Subsection 4.16: Goal/Objective 16

Q16. Goal/Objective 16: Well-being of youth.

A16. Vendor Response:

Background

Safety and permanency are familiar and well-defined concepts for child welfare stakeholders. However, child welfare systems have just recently been tasked with improving child and family well-being. In 2012, the Commissioner of the Administration on Children, Youth, and Families, issued a memo on well-being in response to emerging research on child development and maltreatment (Samuels, 2012). The memo stated that systems serving children must provide safety and permanency services, and well-being services to enhance families' capacity for promoting optimal child development. Though there is no uniform definition of well-being within child welfare contexts, the Child and Family Services Review (CFSR) instrument provides some guidance. At the child level, the CFSR measures well-being through the receipt of services that meet children's educational, physical, and mental health needs. The 2008 CFSR found that West Virginia was not in substantial conformity with Well-Being Outcome 3, "Children receive adequate services to meet their physical and mental health needs."²⁷ Definitions of well-being must also be trauma informed. In November of 2104, the Children's Bureau notified all current Title IV-E waiver States that the U.S. Department of Health and Human Services' (HHS') Administration for Children and Families (ACF), Centers for Medicare & Medicaid Services (CMS) and Substance Abuse and Mental Health Services Administration (SAMHSA) are engaged in an ongoing partnership to address complex, interpersonal trauma and improve social-emotional health among children known to child welfare systems. The Children's Bureau would like the waiver demonstrations to be a key source of information provided to support this effort.

²⁷ *Final report West Virginia child and family services review (2009)*. U.S. Department of Health and Human Services.

Research Questions and Proposed Methodology

The demonstration intends to evaluate outcomes regarding well-being by testing the following research question: When compared to youth served by the Bureau for Children and Families prior to the demonstration:

Q. Do youth ages 12 to 17, receiving *Safe at Home West Virginia* services, experience improvements in well-being, as demonstrated by increases in youth's physical and mental health.

Improvements related to improved educational outcomes are addressed in Goal/Objective 4.17. Developing a conceptually sound definition of well-being is essential to measuring Goal/Objective 4.16. For the purposes of the *Safe at Home West Virginia* demonstration, the evaluation team will use the undergirding philosophy that childhood trauma can contribute to adverse outcomes. The team proposes defining family and child well-being according to CFR standards:

- Changes in youth's physical, and mental needs as a result of service provision.

Data from the Child and Adolescent Needs and Strengths Assessment (CANS) will be the primary measure used to assess family and child-level well-being. CANS is an appropriate measure because it has child-level items, it assesses domains critical to well-being (e.g., child and behavioral emotional needs, child development), and it assesses trauma. As appropriate, the evaluation team will also incorporate assessment data from the Comprehensive Assessment and Planning System (CAPS). For example, the Practical Adolescent Dual Diagnostic Interview, which assesses the status of substance use and the presence of significant mental health issues, could be a frequently used assessment for the target population. Demographic data, and data on services provided will be collected through FACTS. The evaluation team will use CANS dimension scores, and scores from CAPS assessments to assess changes in child well-being, assuming these assessments are administered two or more times (e.g., at referral or placement, and at 6 months or discharge). The team is using CANS scores in assessment of well-being in the evaluation of a trauma-focused model in Illinois that is part of the Permanency Innovations Initiative and in the evaluation of Massachusetts' IV-E waiver demonstration, a similarly designed approach to serving youth in or at risk of congregate care. FACTS data will be used to determine whether there are variations in outcomes by demographic or service factors.

A time series design is an appropriate approach for assessing well-being because the main instrument being used, the CANS, was updated in 2012 to include items on trauma. However, the recent implementation of the CANS prevents the use of a retrospective matched design for this outcome because historical cases would not have data over a sufficient number of years. Time-series design also provides an analytic foundation for tailoring the study of well-being to the unique context of each demonstration county. This is important given that each of the counties may have site-specific implementation timelines for *Safe at Home West Virginia*. The timelines will affect, at minimum, the start dates for baseline and post-intervention measurement. The evaluation team will request data on a semi-annual basis to help mitigate varying schedules of measurement due to site-specific implementation. Using the data from the CANS and other approved assessments, and FACTS fulfills the need for reliable and valid measures that are uniform across counties. It is particularly important that measures be stable over time when time series design is used so that the threat of instrumentation can be ruled out.

Point-in-time descriptive data will be prepared semi-annually, as appropriate, to help monitor whether there is movement in the correct direction (reduction of youth's physical and mental health needs). The evaluation team will use a general linear mixed model for repeated measures analysis. Mixed models are preferable because they can incorporate participants with missing data, are robust to differences in measurement schedules (i.e., administration of the CANS on a youth specific schedule), provides mechanisms for the inclusion of predictor variables, and allows for treatment of time as a continuous or categorical variable. Variations in well-being may be due to demographic factors (e.g. age, ethnicity, race, gender), or service factors (e.g. amount of *Safe at Home West Virginia* services received, number of MDTs, occurrence of a HealthCheck screening). Repeated measures analyses will any reveal changes in outcome data that occur in the presence of one or more predictors.

Reporting

The evaluation team anticipates reporting descriptive data on well-being in the Semi-annual Reports, and the Interim and Final Reports. Results of repeated measures analyses will be reported in the Interim and Final Reports.

Section 4, Subsection 4.17: Goal/Objective 17

Q17. Educational achievement (e.g., number/proportion of youth remaining in the same school throughout agency involvement).

A17. Vendor Response:

Background

Safe at Home West Virginia furthers the regions' long-standing commitment to improving educational outcomes for children in out-of-home care. In 2004, West Virginia's Out of Home Care Education Task Force completed a study²⁸ documenting that children in out-of-home care had much lower scores on WESTEST, had greater needs for special education, and experienced more disciplinary actions than their peers who were not involved with the child welfare system. The Education of Children in Out-of-Home Care Advisory Committee is continuing the data-driven work of the Task Force. The Committee is developing the West Virginia Growth Model, a model for assessing the factors impacting academic achievement for children in out-of-home care. The Committee is also creating a data system focusing on educational achievement, and constructing the Interagency Residential Monitoring System to assess the quality of educational services received by West Virginia children in out of state placements. Additional efforts targeting educational achievement include implementation of West Virginia's Early Warning System-WOW, focusing on drop-out prevention. Federal legislation (Child and Family Services Improvement and Innovation Act, P.L. 112-34) directs child welfare decision-makers to maintain educational stability during any placement change, and educational stability is one of the child well-being outcomes for the Child and Family Service Reviews. West Virginia decision-makers are responding to the need for educational stability. For example, one of the goals of *West Virginia's Blueprint for Change*, is for children in out-of-home care to remain in the same school.

²⁸ *Reaching Every Child Addressing Educational Attainment of Out of Home Care Children in West Virginia.*

Research Questions and Proposed Methodology

The demonstration intends to evaluate outcomes regarding youth educational achievement by testing the following research questions: When compared to youth served by the Bureau for Children and Families prior to the demonstration:

Qa. Do youth ages 12 to 17, receiving *Safe at Home West Virginia* services, experience improvements in educational achievement, as demonstrated by increases in their GPA?

Qb. Do youth ages 12 to 17, receiving *Safe at Home West Virginia* services, experience improvements in educational achievement, as demonstrated by increases in their WESTEST or state equivalent scores?

Qc. Do youth ages 12 to 17, receiving *Safe at Home West Virginia* services, experience improvements in educational achievement, as demonstrated by increased numbers of youth graduating from high school?

Qd. Are a greater number/proportion of youth ages 12 to 17, receiving *Safe at Home West Virginia* services, remaining in the same school during a given school term?

The evaluation team proposes to measure educational achievement through youth' cumulative grade point average (GPA) for a given semester or term, annual scores on the WESTEST, or if appropriate APTA, or the equivalent standardized assessment used by an out of state educational system. The evaluation team proposes to measure graduation from high school through the award of a high school, or high school equivalency diploma. Stability of school placement will be measured through school assignment and attendance. Specifically, continued attendance at school assigned (school of origin) at the time of removal or enrollment in the demonstration, continued attendance at an assigned school within the same county as the school of origin, and continued attendance at a school outside of the county of the school of origin.

Data will be obtained mostly from the West Virginia Education Information System, or from the out of state education provider. Case level data from FACTS will also be requested, as described below. West Virginia's Department of Education has a history of sharing WESTEST, and other educational achievement data for the purposes of examining educational outcomes for children in out-of-home care. Access to data for evaluation purposes may require an amendment or renewal of the MOU on academic achievement of children in out-of-home care, between West Virginia's

Department of Health and Human Resources and the State Board of Education. If necessary, the evaluation team will work with BCF to arrange additional data sharing agreements with out of state educational systems and can also work with the Education of Children in Out of Home Care Committee to determine the potential for evaluation data sharing through the Interagency Residential Monitoring System.

Point-in-time descriptive data will be prepared graphically, allowing for visual assessment of historical trends, and monitoring of whether there is movement in the correct direction (increases in GPA, standardized test scores/levels of proficiency, numbers of targeted youth graduating from high school, and educational stability). Growth modeling will be used to test for differences in GPA, and standardized test scores between demonstration participants, and matched youth. Logistic regression analyses will be used to determine whether there is a statistically significant increase in the numbers of targeted youth receiving diplomas, as compared to matched youth and whether there is a statistically significant increase in the numbers/proportions of targeted youth remaining in the same school as compared to matched youth. Variations in educational achievement may be due to demographic (e.g., age, ethnicity, race, gender) or socioemotional factors (e.g., CANS dimension scores measuring trauma, emotional needs, risk behaviors, and development), educational needs (e.g., need for special education services, IEP in place), disciplinary actions (e.g., suspensions or expulsions), aspects of service planning (e.g. obtained school records through CAPS process, use of Journey placement notebook), or out-of-home care characteristics (e.g., placement type, in or out of state placement, and placement duration). These factors can be used as predictors in in growth and regression models. Resulting analyses will any reveal changes in outcome data that occur in the presence of one or more predictors.

Reporting

The evaluation team anticipates reporting descriptive data on GPA and educational stability in the Semi-annual Reports, and the Interim and Final Reports. Standardized test administration, and awarding of a diploma or equivalency diploma occurs on an annual basis. The evaluation team anticipates reporting descriptive data on standardized test scores and diploma receipt in every other semi-annual report (i.e., annually), and the interim and final report. Results of growth modeling and logistic regression analyses will be reported in the Interim and Final Reports.

Section 4, Subsection 4.18: Goal/Objective 18

Q18. Improved Family Functioning.

A18. Vendor Response:

Background

Similar to child well-being, family functioning is not universally defined within child welfare contexts. The Child and Family Services Review (CFSR) instrument provides guidance on family functioning, stating that as a result of services, families should have the enhanced capacity to provide for their children. That is, families functional level should be adequate enough to discontinue child welfare services. The 2008 CFSR for West Virginia found that 36.9 percent of cases substantially achieved the outcome of enhanced capacity. Family functioning can be investigated at multiple levels, child, caregiver, and family unit. However, research has found that child-level outcomes are particularly affected by the strengths and needs of caregivers.²⁹ These strengths and needs are also referred to as risk and protective factors. In child welfare contexts, risk factors are associated with experiences of maltreatment.³⁰ Caregiver level risk factors include, but are not limited to poor parenting skills, caregivers' substance abuse, domestic violence, unmet mental and/or physical health needs, lack of concrete supports, and lack of relational or social supports.³¹ Conversely, protective factors are characteristics that help to preserve child safety, and build resiliency.³² Resiliency is defined as the noticeable capability of a person who has been exposed to trauma or lives in a high-risk environment.³³ Protective factors are often the inverse of risk factors, and at the caregiver level

²⁹ Head, L.S., and Abbeduto, L. (2007). Recognizing the role of parents in developmental outcomes: A systems approach to evaluating the child with developmental disabilities. *Mental Retardation and Developmental Disabilities Research Reviews*, 13, 293–301.

³⁰ Fraser, M.W. (1997). The ecology of childhood: A multisystems perspective. In M. Fraser (Ed.), *Risk and resilience in childhood an ecological perspective* (p. 1–9). Washington, DC: National Association of Social Workers.

³¹ Centers for Disease Control and Prevention. (2015). *Child maltreatment; Risk and protective factors*.

³² Fraser, M.W. (1997). The ecology of childhood: A multisystems perspective. In M. Fraser (Ed.), *Risk and resilience in childhood an ecological perspective* (p. 1–9). Washington, DC: National Association of Social Workers.

³³ Masten, A.S., and Coatsworth, J.D. (1998). The development of competence in favorable and unfavorable environments: Lessons from research on successful children. *American Psychologist*, 53, 205–220.

include, knowledge of child development, strong parenting skills, addressed mental and/or physical health needs, and use of concrete, relational, and social supports.³⁴

Research Questions and Proposed Methodology

The demonstration intends to evaluate outcomes regarding family functioning by testing the following research question for both demonstration and historical groups:

Q. Do families who are served by *Safe at Home West Virginia* experience increased functioning compared to families who are not served by the demonstration?

The evaluation team proposes to measure family functioning at the caregiver level. Youth functioning will be measured as an aspect of their well-being (see Goal/Objective 4.16). Youth functioning data will be incorporated in the analyses of caregiver functioning outcomes. Measurement of Goal/Objective 4.12 requires a well-conceptualized definition of family functioning. For the purposes of the *Safe at Home West Virginia* demonstration, the evaluation team proposes incorporating CFSR standards in the definition of family functioning. Family functioning will be defined as:

- Post-service provision changes in caregivers' strengths and needs, such that caregivers have the enhanced capacity to provide for the youth in their care.

Data from the Child and Adolescent Needs and Strengths Assessment (CANS) will be used to assess caretaker functioning. CANS is an appropriate measure because it has caregiver-level items and it features a domain focusing on caregivers' strengths and needs. The evaluation team will use CANS dimension scores to assess changes in caregiver functioning, assuming the assessment is administered two or more times (e.g., post referral or placement, and at 6 months or discharge).

The team will also measure caregivers' involvement in service planning and receipt of services. Involving caregivers in the service planning process provides early engagement opportunities, and

³⁴ Centers for Disease Control and Prevention. (2015). *Child maltreatment; Risk and protective factors*. Horton, C. (2003). Protective factors literature review: Early care and education programs and the prevention of child abuse and neglect. Retrieved February 3, 2010, from http://strengtheningfamilies.net/images/uploads/pdf_uploads/LiteratureReview.pdf. Reynolds, A.J., and Robertson, D.L. (2003). School-based early intervention and later child maltreatment in the Chicago longitudinal study. *Child Development*, 74, (1), 3–26.

increases the likelihood that planned services will meet a caregiver's unique needs. Further, caregivers must actually receive the planned services in order to experience improved well-being. The team intends to measure caregivers' involvement with service planning and receipt of services with data from FACTS, and a family satisfaction survey. FACTS features a data element indicating whether families were involved in service planning, and that element will provide documentation of services received. The family satisfaction survey, discussed in more detail in the Process Evaluation section, will measure several aspects of satisfaction including caregivers' satisfaction with the level of inclusion in the service planning process.

A time series design is the proposed approach for assessing caregiver functioning. The rationale for use of this design is the same as that provided in discussion of youth's well-being. Since the current iteration of the CANS was implemented in 2012, a retrospective matched design cannot be used. Historical cases will not have data over a sufficient number of years. The evaluation team will request data on a semi-annual basis to help mitigate varying schedules of measurement due to site-specific implementation. Use of CANS, FACTS, and family satisfaction survey data bolsters the time series design. These measures will be uniform across counties and families, helping to rule out the threat of instrumentation.

Point-in-time descriptive data will be prepared, as appropriate, to help monitor whether there is movement in the correct direction (reduction of caregivers' needs and increases in their strengths). The evaluation team will use a general linear mixed model for repeated measures analysis. Mixed models are preferable because they can incorporate participants with missing data, are robust to differences in measurement schedules (i.e., administration of the CANS on a family specific schedule), provides mechanisms for the inclusion of predictor variables, and allows for treatment of time as a continuous or categorical variable. Variations in functioning may be due to caregivers' demographic factors (e.g. age, ethnicity, race, gender, family composition), service factors (e.g., amount of *Safe at Home West Virginia* services received), and the status of youth's well-being. Repeated measures analyses will reveal any changes in outcome data that occur in the presence of one or more predictors.

Reporting

The evaluation team anticipates reporting descriptive data on caregiver functioning in the semi-annual, interim, and final reports. Results of repeated measures analyses will be reported in the interim and final reports.

Table 2 presents the proposed evaluation outcome measures, the proposed data sources, and the frequency of reporting. The frequency of reporting can be negotiated and coordinated with the Bureau in the development of the Evaluation Plan.

Table 2. Evaluation outcome measures

Outcome	Outcomes measured	Source	Frequency of report
4.10	Number of youth placed in congregate care		
	Congregate care case flow including: <ul style="list-style-type: none"> ■ Number of youth in congregate care (point in time) ■ Number of youth entering congregate care placement ■ Number of youth exiting congregate care placement 	FACTS	Semi-annual, Interim and Final Reports
	Number and percentage of youth in out-of-home care by placement type (congregate care, kinship care, foster home care, other)	FACTS	Semi-annual, Interim and Final Reports
	Number and percentage of youth placed in congregate care in-state vs. out of state	FACTS	Semi-annual, Interim and Final Reports
	Rate of youth placed in congregate care per 1,000 youth age 12 to 17 in the WV population	FACTS	Semi-annual, Interim and Final Reports
4.11	Length of stay in congregate care		
	Length of congregate care placement: The number of days from the start date of a congregate care placement to the end date of the congregate care placement, or the end date of the last continuous congregate care placement, or to the end of the reporting period for those still in care. Examines length of placement separately for those still in congregate care and those who left congregate care (point in time).	FACTS	Semi-annual, Interim and Final Reports
	Length of congregate care placement after <i>Safe at Home West Virginia</i> implemented, among youth already in care: For the subset of youth already in care when <i>Safe at Home West Virginia</i> was implemented, the number of days from the implementation date of the Safe at Home intervention to the end date of the last consecutive congregate care placement, or to the end of the reporting period for those still in care. Examines length of placement separately for those still in congregate care and those who left congregate care (point in time).	FACTS	Semi-annual, Interim and Final Reports

Table 2. Evaluation outcome measures (continued)

Outcome	Outcomes measured	Source	Frequency of report
	Proportion of youth in congregate care for <6months, 6-12 months, and >12 months. The proportion of youth who the indicated amount of time in congregate care from the start date of a congregate care placement to the end date of the congregate care placement, or the end date of the last continuous congregate care placement. Examines the proportion separately for youth still in congregate care and those who left congregate care.	FACTS	Semi-annual, Interim and Final Reports
	Cumulative time in congregate care: The total number of months spent in congregate care placement at any time, whether or not the child left and re-entered congregate care, including all congregate care placement settings (non-detention)	FACTS	Semi-annual, Interim and Final Reports
	Congregate care exits: The number and percentage of youth leaving congregate care within 12 months.	FACTS	Semi-annual, Interim and Final Reports
	Congregate care end reasons: The placement end reason for youth leaving congregate care within 12 months, including number and percentage of youth: <ul style="list-style-type: none"> ■ Moving to a less restrictive placement setting within 12 months ■ Moving to a more restrictive setting (e.g., hospitalization) ■ Exiting foster care to permanency (reunification, guardianship, adoption) ■ Exiting foster care for other reasons (e.g., emancipation, death) 	FACTS	Semi-annual, Interim and Final Reports
	Timing (days) and likelihood of returning to the community from congregate care after <i>Safe at Home West Virginia</i> implemented within 12 and 24 months (survival analysis), censoring on cases where youth leave congregate care to more restrictive settings or exit care for other reasons (e.g., emancipation, incarceration, death)	FACTS	Interim and Final Reports
	Congregate care re-entries: The number and percentage of youth re-entering congregate care within 3, 6, or 12 months, of those who left congregate care within 12 months.	FACTS	Interim and Final Reports
4.12	Youth remaining in their home communities		
	Number and percentage of youth remaining in their home communities	FACTS	Semi-annual, Interim, and Final Reports.
	Number and percentage of youth in out of state congregate care returning to their home communities	FACTS	Semi-annual, Interim, and Final Reports.

Table 2. Evaluation outcome measures (continued)

Outcome	Outcomes measured	Source	Frequency of report
	Proximity of foster care placement to the known home location, among youth in out-of-home placement. Number and percentage of youth: <ul style="list-style-type: none"> ■ Placed in West Virginia vs. out of state ■ Placed in West Virginia by proximity (within 20, 50, and >50 miles of known home location) ■ Placed out of state by proximity (within 20, 50, and >50 miles of known home location) 	FACTS	Semi-annual, Interim, and Final Reports.
	Youth placed with relatives, of youth in out-of-home placement. Number and percentage of youth: <ul style="list-style-type: none"> ■ Placed with relatives vs. in non-relative homes vs. in congregate care ■ Placed with relatives in West Virginia vs. out of state ■ Placed with relatives in West Virginia by proximity (within 20, 50, and >50 miles of known home location) ■ Placed with kin out of state by proximity (within 20, 50, and >50 miles of known home location) 	FACTS	Semi-annual, Interim, and Final Reports.
	Continuity of school assignment. Number and percentage of youth who: <ul style="list-style-type: none"> ■ Continue to attend same school (as when removed/began intervention) ■ Attend a different school but in the same county ■ Attend a different school in a different county 	FACTS	Semi-annual, Interim, and Final Reports.
	Timing (days) and likelihood of remaining within (or placement outside) the home community within 12 months and 24 months	FACTS	Interim and Final Reports
	Timing (days) and likelihood of return to home community within 12 months and 24 months	FACTS	Interim and Final Reports
	Likelihood of stable school assignment at initial placement and 12 months	FACTS	Interim, and Final Reports
4.13	Rates of initial foster care entry		
	Number and percentage of youth with an initial entry (placement) into foster care	FACTS	Semi-annual, Interim, and Final Reports.
	Number and percentage of youth with an initial entry (placement) into foster care who were served in their own home and had their case closed, but experienced a subsequent initial entry into foster care within 12 months of case closure	FACTS	Semi-annual, Interim, and Final Reports.

Table 2. Evaluation outcome measures (continued)

Outcome	Outcomes measured	Source	Frequency of report
	Assess the timing (days) and risk of the initial entry (placement) into foster care, looking at the number of days from the maltreatment substantiation disposition date to the initial placement into foster care. Also consider differences for youth who enter and those who do not, and identify characteristics of youth and their families that may affect the successful outcomes and identify service needs that may not be addressed.	FACTS	Interim, and Final Reports.
	Assess the timing (days) and likelihood of entry into foster care for those youth discharged from foster care after initially being served in-home. Also consider differences for youth who enter after discharge and for those who do not, and identify characteristics of youth and their families that may affect the successful outcomes and identify service needs that may not be addressed.	FACTS	Interim, and Final Reports.
4.14	Number of youth re-entering any form of foster care		
	The number and percentage of youth who are in congregate care or at risk of congregate care, who are discharged from foster care and who re-enter any form of foster care at 6, 12, 18, or 24 months.	FACTS	Semi-annual, Interim, and Final Reports
	Assess the timing (months) and likelihood of re-entry into foster care for those youth discharged from foster care. Explore differences for youth who re-enter and for those who do not to identify characteristics of youth and their families that may affect the successful outcomes and also identify service needs that may not be addressed.	FACTS	Interim and Final Reports
4.15	Youth safety		
	Number and percentage of youth in the demonstration period who have a “safe” indicator in a subsequent safety evaluation.	FACTS – Safety Evaluation	Semi-annual, Interim and Final Reports
	Number and percentage of youth who do not experience subsequent maltreatment episodes within 6 and 12 months after the start of <i>Safe at Home West Virginia</i> intervention	FACTS	Semi-annual, Interim and Final Reports
	Number and percentage of youth who do not experience subsequent maltreatment episodes at 6 and 12 months following completion of <i>Safe at Home West Virginia</i> intervention services.	FACTS	Interim and Final Report

Table 2. Evaluation outcome measures (continued)

Outcome	Outcomes measured	Source	Frequency of report
	Number and percentage of youth served by <i>Safe at Home West Virginia</i> whose risk for the need of services is reduced at the transition phase of <i>Safe at Home West Virginia</i> .	CANS	Interim and Final Reports
	The timing and occurrence of maltreatment reports.	FACTS	Interim and Final Reports
	The timing and occurrence of substantiated maltreatment reports.	FACTS	Interim and Final Reports
4.16	Well-being of youth		
	Number and percentage of youth with reduced physical needs.	CANS	Semi-annual, Interim, and Final Reports.
	Number and percentage of youth with reduced mental health needs.	CANS	Semi-annual, Interim, and Final Reports.
4.17	Educational achievement		
	Number and percentage of youth with improved GPAs.	WVEIS or out of state equivalent	Every other semi-annual, Interim, and Final Reports
	Number and percentage of youth with improved standardized test scores (WESTEST or equivalent).	WVEIS or out of state equivalent	Every other semi-annual, Interim, and Final Reports
	Number and percentage of youth graduating from high school with a diploma or equivalent diploma.	WVEIS or out of state equivalent	Every other semi-annual, Interim, and Final Reports
	Number and proportion of youth remaining in the same school during a given school term.	WVEIS or out of state equivalent	Semi-annual, Interim, and Final Reports.
4.18	Improved family functioning		
	Number and percentage of caregivers who have increased their strengths while receiving <i>Safe at Home West Virginia</i> services.	CANS	Interim and Final Reports
	Number and percentage of caregivers who have decreased their needs while receiving <i>Safe at Home West Virginia</i> services.	CANS	Interim and Final Reports

Section 4, Subsection 4.19: Goal/Objective 19

Q19. Any additional data collection identified as needed.

A19. Vendor Response:

The evaluation team will work with BCF to determine if additional data collection is needed.

Cost Study Questions (Q4.20 – Q4.23)

Cost Study Questions (Q4.20 – Q4.23)

Section 4, Subsection 4.20: Goal/Objective 20

Q20. A cost comparison of the key services received by children and families through the demonstration project to the cost of services available prior to the start of the demonstration, or that were received by the children and families that were not designated to receive demonstration services.

A20. Vendor Response:

The Westat evaluation team in coordination with the DHHR, Bureau for Children and Families and the waiver regions and counties, will perform a cost analysis study that will examine the costs of services received by youth and families during the waiver demonstration period. Specifically, for this study, our approach to cost analysis will start with examining the services provided to youth and families in the pre-waiver system (business-as-usual) compared to services provided to youth and families during the waiver demonstration period (*Safe at Home West Virginia* intervention services that add wraparound prevention, reunification, and support services). Costs will be distinguished by various categories, for example, service type, funding source, service provider, and costs per family or child. The analysis will involve a longitudinal examination of changes in costs over time, i.e., how the cost of services for youth and families in the waiver period and cost of services for youth and families in the pre-waiver period are different and how costs during the waiver period change over time.

We will work closely with the Bureau to categorize program costs to key line items, including personnel, training, space, utilities, travel, contractual, supplies, overhead and other costs. We will utilize payment records for all pre-waiver and waiver youth and families and include the spending from various categories of federal, state, county, and local sources. To the extent possible, we will look into subcategory of costs to explain variations and implications for costs savings. For example, cost of administering programs for youth in foster care can be divided between the cost of out-of-home care and cost of administering the program. Cost for administration includes salaries for social workers and out-of-home care costs are a function of the number of youth entering placement, the length of time a child remains in care, and the type of care. Examination of costs overtime by such subcategories in pre-waiver and waiver periods will yield maximum information with policy implications related to cost savings that are attributable to the participation in Title IV-E Waiver.

The availability and level of effort required in obtaining cost data from the Bureaus and waiver counties and affiliated sources (e.g. intervention service providers) will be the first consideration in preparing the design of the cost study for the evaluation plan. In child welfare, services and cost data at the family member and child level are not often readily available or complete nor contained in one automated source electronically. At a minimum, the evaluation team will study the cost difference between pre-waiver and waiver groups over time in the use of in-home vs. out-of-home foster care services, including wraparound, parent-child and family therapies, after-care and transitional services, substance abuse treatment services, mental health services, concrete services, and other support services for both the pre-waiver period and the waiver period to the extent service cost data are available and recorded. We will strive to have comparable data across sites, but recognize (based on other multi-site experience) that differences in definitions and how cost data are collected may vary across counties. We will work closely with the DHHR, the Bureau, regional and county offices, and other service providers or agencies to understand, at a minimum, what is encompassed within each definition and data set.

It is important to note that cost analysis can be performed from either an accounting or economic standpoint. Using solely DHHR, Bureau for Children and Families and county data would produce accounting cost analysis since it only includes the explicit out-of-pocket expenditures for the services. Program cost estimates derived from accounting costs may not be comparable across programs if any of the programs use considerable amount of in-kind resources in providing services or there is extensive variation in the service model due to service availability.³⁵ In contrast, an economic cost analysis includes not only out-of-pocket expenses, but also the value of in-kind resources (e.g., community services, volunteer workers, subsidized building space) that may be used at no charge in providing services and resources provided by other agencies. Estimating economic costs would allow for comparison across programs with same/similar goals and outcomes. Thus, after discussions with the Bureau and Regional Directors, we will explore the utility of creating a “cost data collection tool” to obtain cost information. When possible, we will compare costs across providers and counties although we recognize the challenges associated with availability of comparable cost data across the sites due to variability in service availability and in-kind contributed services in each of the waiver counties. Due to the possible variations in the service models planned and the implementation strategies in each of the waiver counties, the costs analyses would also vary accordingly. The discussion of results will explicitly state any caveats and limitations due to variations in data measurements and availability of data.

³⁵ Dunlap, L.J., and French, M.T. (1998). A comparison of two methods for estimating the costs of drug abuse treatment. *Journal of Maintenance in the Addictions*, 1(3), 29–44.

Westat has successfully implemented this strategy and implemented cost and cost-effectiveness analyses in previous studies for clients such as the U.S. Substance Abuse and Mental Health Administration, U.S. Department of Agriculture, Tricare Administration and New York City. Additionally, we are currently performing this analysis for the Michigan IV-E Waiver demonstration. Such an instrument usually seeks information on expenditures involving set-up activities, personnel costs, materials and supplies, facility and utility, contracted services, administrative overhead and other costs. We follow an “economic costs” approach and obtain cost information on all resources paid for by the grant agency, in-kind donations and volunteer services, and items that are paid for by other agencies. In the cost literature, similar data collection tools have been used extensively in studies examining program costs among variety of organizations.³⁶ The evaluation team can obtain cost data by using a hard-copy instrument or an excel file. In earlier cost studies, we have implemented training webinars among grantees to introduce objective of the cost study, economic concepts in costs analysis, and how to fill out the cost data collection tool. Key to the successful use of this tool is well-specified definitions of cost categories and guidelines for applying the definitions to ensure reliability across counties, which will require input from the DHHR and the Bureau, regional and county staff, service providers, and key stakeholders.

³⁶ French, M. (2011). DATCAP related papers. Available at <http://www.datcap.com/papers.htm>.

Section 4, Subsection 4.21: Goal/Objective 21

Q21. The use of key funding sources, including all relevant Federal sources such as Titles IV-A, IV-B, IV-E, and XIX of the Social Security Act, as well as State and local funds. The purpose of the analysis will be to compare the funding of services available through the demonstration with those of services traditionally provided to children and their families.

A21. Vendor Response:

The evaluation team will look into subcategory of costs to explain variations and implications for costs savings. A cost comparison analysis will include an examination of the use of key funding sources, including Federal sources such as Titles IV-A, IV-B, IV-E and XIX of the Social Security Act, as well as State, county, and local funds. Our analysis will examine costs by type of services and by source of funder (federal, state, and local). We will analyze any shift of costs between line accounts since we expect reductions in costs of reinvestigations and out-of-home placements and increases in cost of *Safe at Home West Virginia* intervention services that include wraparound, family reunification, prevention services, parent-child therapies, substance abuse treatment services, mental health services, and youth transition services. We will work closely with the Bureau and each of the regional and county offices and their service partners to categorize and validate program costs to key line items, including personnel, training, space, utilities, travel, contractual, supplies, overhead and other costs and to develop cost data collection instruments that capture costs accurately but that avoid and minimize duplication of existing records or data collection by the State or the county offices. We expect cost of federal, state and local monies spent to be provided to Westat for analysis by DHHR and the Bureau for Children and Families.

Section 1130 (h) of the Social Security Act requires that the demonstration project be cost-neutral, that is, the total amount of Federal funds used to support the demonstration will not exceed the amount of Federal funds that would have been expended by the Title IV-E agency under the State plan approved under Parts B and E of Title IV of the Act, were the demonstration project not conducted. In support of the Bureau and as part of the evaluation, the evaluation team will review the State's proposed methodology and provide consultation on appropriate options for assessing cost-neutrality for the implementation of the demonstration project, as well as reviewing the cost neutrality procedures for accuracy and completeness.

Section 4, Subsection 4.22: Goal/Objective 22

Q22. If feasible, a cost-effectiveness analysis will be conducted to estimate the costs of each successful outcome achieved through the demonstration. This analysis will be conducted using one or more of the key outcome measures for which a statistically significant difference is identified.

A22. Vendor Response:

Where feasible, the analysis will also include a cost-effectiveness component to estimate the costs incurred for each successful outcome achieved by the demonstration interventions. The cost analysis will provide a frame of reference for understanding the relationship between demonstration costs and results. To the extent possible, we will implement cost-effectiveness analysis to determine change in costs per unit of change in main outcomes. Cost-effectiveness is the extent to which the program has achieved its results at a lower cost compared with alternatives (change in costs per unit of outcome). If data are available, several measures of outcomes will be chosen for the cost-effectiveness analysis. We expect key outcomes for this analysis could include number of subsequent maltreatment episodes, length of time remaining safe at home, risk of future maltreatment, risk of entry into out-of-home placement, risk of placement in congregate care, number of placements in foster care, length of time to reunification, and risk of re-entry into foster care, and specifically re-entry into congregate care.

After identifying the major outcomes for which a statistically significant difference is identified, we will perform cost-effectiveness analysis to examine whether the costs of intervention services are justified by the outcomes. Thus, we will compute the incremental cost effectiveness ratio, costs (pre-wavier–waiver)/outcomes (intervention–services as usual), associated with waiver demonstration relative to the pre-waiver services model. Such a ratio, for example, would reveal the difference in costs between the waiver intervention model and the pre-waiver service model for each additional youth reunifying and remaining safe in their home for 12 months in the waiver demonstration period.

Section 4, Subsection 4.23: Goal/Objective 23

Q23. Any additional data collection identified as needed.

A23. Vendor Response:

Sub-Study on Average Cost per Case

Upon request and agreement with the Bureau, the evaluation team can explore a sub-study to update and supplement any workload study results previously performed by the Bureau. The evaluation team proposes a sub-study sampling cases by worker to obtain an estimate of the average service cost per case by capturing direct services, contracted services, concrete services, and in-kind contributed community services. This study will supplement family- and youth-level service and cost data that may not be readily available for the waiver intervention cost analysis. For this cost sub-study, we will collect data on caseworker time and use of client service array to help evaluate costs. The data collection will occur for an eight week period. At each time we will ask randomly selected intervention caseworkers from the demonstration counties and from a group of comparison counties where waiver services have not been implemented to report on the time they have spent on one randomly selected case in the previous week. The number of workers randomly selected will depend on the number of caseworkers in the participating counties. That data will be analyzed to estimate average time spent on different types of cases.

In coordination and approval from the Bureau and the county offices, we will ask workers to complete a service log. The service log will record hours or the appropriate unit of service, type of service provided to the selected case, delivery method—directly by worker, contracted through a service provider, or an in-kind contributed community services. From the data, we can get average number of hours and units per family and per youth and a count of services and service types received per case. Costs can be computed using average wages per worker, actual payment costs, or unit costs of services. Using this method we can calculate an average cost for a case receiving an intervention service and the cost of services as usual. The service log will also contain survey questions asking workers about challenges to the case that week, trying to get at what makes a difficult case. We will analyze the answers to these questions qualitatively for context. Because we anticipate some non-response, the evaluation team will calculate analysis weights to adjust for and reduce any non-response bias. Regression analysis will be used to predict the time spent as a function of the type of case and the time in care.

Attachment B: Mandatory Specification Checklist

Attachment B: Mandatory Specification Checklist

Section 4, Subsection 5.1

Q1. Mandatory Requirement 1: Within 90 days of award, proposer must submit the evaluation plan to the Agency for submission to the Federal Children’s Bureau. The plan must thoroughly describe data collection and analysis procedures for the process, outcome, and cost analysis components of the evaluation.

A1. Vendor Response:

To facilitate the development of the draft plans, the evaluation team will convene a series of planning meetings with the Bureau for Children and Families (BCF), service provider representatives, and *Safe at Home West Virginia* workgroup representatives.

Within 60 days of the contract award the team will submit a draft evaluation plan that (1) documents in a logic model the underlying logic linking interventions to expected outcomes; (2) describes the process, outcome and cost study research questions, major variables to be measured, and data sources along with an assessment of the reliability and validity of each data source; (4) presents the plan for matching historical cases to the *Safe at Home West Virginia* service recipients; (5) details the process, outcome, and cost study data collection procedures, quality assurance and data security protocols, and the major data analyses to be performed; and (6) discusses client informed consent procedures and a human subjects protection plan. The evaluation team will respond to questions and comments and revise the plan based on feedback from BCF, the *Safe at Home West Virginia* workgroup representatives, and service provider representatives.

Within 90 days of the contract award the team will finalize and submit the evaluation plan to the Children’s Bureau. The final copy sent to BCF will include one hard copy and two electronic versions (one Microsoft Word version and one PDF version). The evaluation team will develop institutional review board (IRB) materials (e.g., consent forms, FAQs, etc.) concurrently with the iterations of the evaluation plan so that these materials can be submitted to the Westat IRB after approval from the Children’s Bureau. The Westat IRB is a specially constituted committee established to protect the rights and welfare of human subjects who participate in Westat projects. The Westat IRB operates under procedures set forth in the regulations of the U.S. Department of Health and Human Services and in the Federal-wide Assurance (FWA) granted to Westat by the Office for Human Research Protections (OHRP). The Board meets the second Tuesday of every

month; this schedule allows for efficient review of IRB packages. The evaluation team will also work to secure any additional local approvals needed to proceed with the implementation of the evaluation plan. For example, the Bureau's Division of Research and Analysis may need to review and approve the plans for human subjects' data collection.

Section 4, Subsection 5.2

Q2. Mandatory Requirement 2: No later than 60 days after the conclusion of the 10th quarter following the demonstration's implementation date, the proposer must submit an interim evaluation report to the Agency for submission to the Federal Children's Bureau.

A2. Vendor Response:

The evaluation team will submit an interim report to BCF for submission to the Children's Bureau no later than 60 days after the conclusion of the 10th quarter following the demonstration's implementation date. As set forth in the demonstration project terms and conditions, the report will include a process analysis of the evaluation to date, any outcome data available at the time, a brief description of the outcome and cost components of the evaluation planned, and will note any issues or problems anticipated in completion of these components. The final copy sent to BCF will include one hard copy and two electronic versions (one Microsoft Word version and one PDF version). The evaluation team will complete the following activities leading up to the submission of the report: (1) draft the interim report analysis plans for the process, outcome, and cost study; (2) submit the analysis plans to BCF and the *Safe at Home West Virginia* workgroup representatives for feedback; (3) revise the analysis plans based on the feedback received; (4) prepare the data for analysis; (5) analyze the study data; and (6) draft the interim report. The evaluation team will also revise and re-submit the report as necessary based on feedback from BCF and be available to respond to questions from the Children's Bureau and the Waiver Federal Technical Assistance Contractor about the contents of the report through a written response or a telephone conference call.

Section 4, Subsection 5.3

Q3. Mandatory Requirement 3: No later than 6 months after the conclusion of the demonstration project, a final report integrating the process, outcome, and cost components of the evaluation will be submitted to the Agency for submission to the Federal Children's Bureau.

A3. Vendor Response:

The evaluation team will submit a final report to BCF for submission to the Children's Bureau no later than 6 months after the conclusion of the demonstration project. The report will integrate the process, outcome, and cost evaluation findings and will follow the final report outline provided by the Children's Bureau. The final copy sent to BCF will include one hard copy and two electronic versions (one Microsoft Word version and one PDF version). The evaluation team will complete the following activities leading up to the submission of the report: (1) draft the final report analysis plans for the process, outcome, and cost study; (2) submit the analysis plans to BCF and the *Safe at Home West Virginia* workgroup representatives for feedback; (3) revise the analysis plans based on the feedback received; (4) prepare the data for analysis; (5) analyze the study data; and (6) draft the final report. The evaluation team will also revise and re-submit the report as necessary based on feedback from BCF and be available to respond to questions from the Children's Bureau and the Waiver Federal Technical Assistance Contractor about the contents of the report through a written response or a telephone conference call.

Section 4, Subsection 5.4

Q4. Mandatory Requirement 4: No later than 6 months after the conclusion of the demonstration, the proposer will produce and make available for public use data tapes, including documentation necessary to permit re-analysis of the data gathered during the course of the evaluation.

A4. Vendor Response:

To facilitate post-demonstration analysis of the evaluation data, the evaluation team will produce and make available for public use data tapes and supporting documentation. The evaluation data sets will undergo a disclosure analysis to minimize breaches in confidentiality. The main challenge of data dissemination is to balance the need of data users to have data with the highest possible degree of accuracy and fidelity, with the need to comply with safeguards regarding confidentiality. The concern is that (1) the integrity of the data will be compromised in order to make the data safe for release and/or (2) identifiable data will be released and the project and personnel will be legally at risk. The evaluation team will collaborate with the BCF to identify the risk elements that heighten the disclosure risks in the data, data elements of analytical importance to retain in the microdata, and key analytical relationships in the data. The primary goal of disclosure risk analysis is to identify unique records, or sparse combinations of variables, and gauge their uniqueness in the population. A risk score will be computed for each data record. The score is made up of the number of times that a record contributes to the sparse cells (number of violations) after scanning and identification are completed. The evaluation team will address records identified as having a high risk for disclosure by identifying categories of variables to collapse, variables to suppress, or data values to target for perturbation. We will also assess the impact of these data adjustments on data utility by examining cell means and quantiles, cell counts (weighted), standard errors, correlations, multivariate relationships, and loss of information due to recoding. The evaluation team will submit the final data file along with documentation of all the statistical disclosure control (SDC) treatments and results no later than 6 months after the conclusion of the demonstration.

Section 4, Subsection 5.5

Q5. Mandatory Requirement 5: Public release of any evaluation or monitoring reports required under this agreement will be made only by the Agency. Prior to public release of such reports the Vendor must provide the Agency with at least a 30-day period for review and approval.

A5. Vendor Response:

All reports will be submitted to the BCF in an agreed-upon format and according to a finalized delivery schedule, allowing adequate time for client review and feedback. The evaluation team will incorporate any revisions based on BCF input, and present a final submission. The team will honor the requirement of BCF to have at least to 30-day period for review and approval of all reports before public release.

Section 4, Subsection 5.6

Q6. **Mandatory Requirement 6: Vendor must provide Semi Annual Progress Reports to Agency.**

A6. **Vendor Response:**

Based on our past and current experience with demonstration projects, the evaluation team is aware that the Children's Bureau has a set schedule for submission of semi-annual evaluation reports as well as a template for the semi-annual report. The evaluation team will use this template to ensure that all required information is reported. At minimum, the reports will include the following: (1) a summary of the evaluation activities and progress in the implementation of the evaluation, including challenges to the implementation of the evaluation and plans to resolve the issue or an account of the communication and collaboration process with the *Safe at Home West Virginia* Project Manager to reach a resolution; (2) a brief summary of the status of data collection (i.e. number of families enrolled *Safe at Home West Virginia*, client consent status, administrative data quality, number of satisfaction surveys received, etc.); (3) evaluation findings to date; and (4) recommendations and evaluation activities planned for the next reporting period. The final copy sent to BCF will include one hard copy and two electronic versions (one Microsoft Word version and one PDF version).

The evaluation team will complete the following activities leading up to the submission of the report: (1) prepare the data for analysis; (2) analyze the study data; and (3) draft the final report. The team will also revise and re-submit the report as necessary based on feedback from BCF and be available to respond to questions from the Children's Bureau and the Waiver Federal Technical Assistance Contractor about the contents of the report through a written response or a telephone conference call.

Section 4, Subsection 5.7

Q7. Mandatory Requirement 7: Vendor will assist Agency in the development of a final implementation plan.

A7. Vendor Response:

The evaluation team will assist BCF with the development of a final implementation plan through consultation on conference calls and review of the draft plan. Some of the key implementation components that the team could advise on include the identification of project performance metrics and targets, development of identification of performance reporting and continuous improvement monitoring procedures, the development of systematic target population screening procedures, development of decision-support data systems, and the identification of implementation procedures that maintain the integrity of the retrospective matched case design.

Section 4, Subsection 5.8

Q8. **Mandatory Requirement 8: Vendor must comply with all requirements and deliverables within the body of RFP.**

A8. **Vendor Response:**

The evaluation team offers the BCF the expertise required for successfully conducting and managing *Safe at Home West Virginia's* evaluation. The key to success is our commitment to serving clients through exceptional project performance. Behind our commitment is an established process that incorporates an organizational structure with clearly defined staff roles to meet the demands of managing multiple tasks, and management tools that provide regular, detailed information on project tasks, facilitate the accurate and timely reporting of study progress and costs, and measure performance against budgets and scheduled milestones. The evaluation team will provide exceptional project performance by complying with all requirements and deliverables within the RFP including, but not limited to the following requirements:

- Attending an orientation meeting with the BCF within 5 working days of the contract award;
- Submitting the draft evaluation plan to the BCF via one hard copy and two electronic versions (one Microsoft Word version and one PDF version), within 60 calendar days of the contract award;
- Submitting the final evaluation plan to the BCF via one hard copy and two electronic versions (one Microsoft Word version and one PDF version), within 90 calendar days of the contract award;
- Submitting a final evaluation report to the BCF via one hard copy and two electronic versions (one Microsoft Word version and one PDF version), within 6 months of the conclusion of *Safe at Home West Virginia*;
- Producing and disseminating data tapes with the documentation needed to support re-analysis of evaluation data within 6 months of the conclusion of *Safe at Home West Virginia*;
- Submitting two semiannual reports a year to the BCF via one hard copy and two electronic versions (one Microsoft Word version and one PDF version) during the implementation of *Safe at Home West Virginia*;
- Preparing written reports upon the BCF's request;

- Facilitating monthly conference calls about the evaluation to provide information on implementation of the evaluation plan, supports and barriers to implementation, strategies for resolving barriers, and evaluation findings. These monthly calls will be in addition to routine and ongoing communications with the *Safe at Home West Virginia* project manager;
- Attending and participating in the annual Child Welfare Waiver Demonstration meeting upon the BCF's request;
- Assisting the BCF with completion of the final implementation plan, upon the BCF's request; and,
- Providing optional services upon the BCF's request.

Section 4, Subsection 5.9

Q9. Mandatory Requirement 9: Vendor must submit invoices by deliverable, unless Vendor submits a progress billing schedule for any deliverable and has it approved in advance by the Agency. All deliverables must meet the terms and conditions in RFP and, if tied to Federal requirements, must receive federal approval for deliverable to have been met. Invoices must be submitted to WV DHHR Bureau for children and Families, 350 Capitol Street, Room 730, Charleston, WV 25301. Invoices must include the Purchase Order Number.

A9. Vendor Response:

Westat will submit invoices by deliverable, or will obtain advance approval by BCF to submit a progress billing schedule for any deliverable. All invoices will be submitted to the West Virginia DHHR Bureau for Children and Families address along with a purchase order number. Westat understands that all deliverables must meet the terms and conditions in the RFP, and if tied to the Federal requirements, must receive federal approval for the deliverable to have been met.

Certification and Signature Page

CERTIFICATION AND SIGNATURE PAGE

By signing below, or submitting documentation through wvOASIS, I certify that I have reviewed this Solicitation in its entirety; understand the requirements, terms and conditions, and other information contained herein; that I am submitting this bid, offer or proposal for review and consideration; that I am authorized by the vendor to execute and submit this bid, offer, or proposal, or any documents related thereto on vendor's behalf; that I am authorized to bind the vendor in a contractual relationship; and that to the best of my knowledge, the vendor has properly registered with any State agency that may require registration.

Westat
(Company)

Mark Freedman
Mark Freedman, Vice President

(301) 294-2857 (T) (301) 315-5934 (F)
(Phone Number) (Fax Number)

May 27, 2015
(Date)

Attachment A: Vendor Response Sheet

Qualifications and Experience

- Q. Vendor should provide in Attachment A: Vendor Response Sheet information regarding their firm, such as staff qualifications and experience in completing similar projects; references; copies of any staff certifications or degrees applicable to this project; a proposed staffing plan; descriptions of past projects completed entailing the location of the project, project manager name and contact information, type of project, and what the project goals and objectives were and how they were met. Vendor should:**
- a. Provide a brief summary of any knowledge and skills you may have related to the DHHR Bureau for Children and Families Statewide Automated Child Welfare Information System (SACWIS), Family and Children's Tracking System (FACTS).**
 - b. Provide a brief summary of any knowledge and skills you may have related to SACWIS systems in other states.**
 - c. Provide a brief statement related to any IV-E Federal waiver evaluation that the proposer has developed within the last ten (10) years providing information related to the specific waiver.**
 - d. Provide an official statement from an entity or state for whom you have performed work either as a consultant and/or partner in the design and implementation of a Federal IV-E Waiver evaluation for a child welfare program.**

About Westat

Westat is a state-of-the-art research corporation known for the quality of its professional staff in a broad range of research areas, including statistical design, survey research, and program evaluation. Westat has an established reputation for performing successful research studies in a wide range of programs and subject areas such as: child welfare and other social services, criminal and juvenile justice, substance abuse, human services, health, housing, and, education. Since 1963, Westat has grown steadily by serving Federal and local government agencies, private businesses, and other clients. A key element of Westat's success is our commitment to serving clients through exceptional project performance. Another factor in our growth has been our broadly distributed form of

employee ownership; employees realize that their efforts and commitment can make a difference in the value of their company.

Description of Westat's Structure

Westat's headquarters is located in Rockville, Maryland, in the Washington, DC, metropolitan area. We also maintain research offices near our clients in Bethesda, Maryland; Atlanta, Georgia; Cambridge, Massachusetts; Durham, North Carolina; Philadelphia, Pennsylvania; and Houston, Texas. In addition, we have international offices in Beijing, China; Liberia, Costa Rica; Addis Ababa, Ethiopia; New Delhi, India; Johannesburg, South Africa; and Bangkok, Thailand.

Our headquarters and associated offices accommodate our professional and administrative staff, our computer technology and information processing facilities, our survey processing staff, the centralized direction of our network of Telephone Research Centers, and the management of our nationwide field interviewing and data collection resources. Westat's headquarters also provides the support facilities needed to conduct efficient research operations: a technical information library, editorial and graphics departments, a conference and training facility, a secure records storage facility, and reproduction and microfilming departments.

Overall professional, technical, and operational guidance for Westat's project activities is provided by the directors of our study areas, who may act as project directors or as Corporate Officers supervising project directors. Although Westat study groups have expertise in specific subjects and methodologies, we remain a project-oriented organization with the flexibility to assemble staff from various study groups to meet the needs of individual projects.

Westat offers a research, technical, and administrative staff of more than 2,000 with the technical and management skills to design and direct large-scale research and to provide the personal client services needed for projects of all sizes. In addition, 1,100 additional staff are engaged in data collection and processing at Westat's survey processing facilities, at our Telephone Research Center (TRC) facilities, and throughout our nationwide field data collection operations. The following are some highlights of our research staff skills:

- A strong group of senior social science professionals—including sociologists, statisticians, psychologists, and economists—with extensive training and experience in the specific subject matter of many Government research program areas;

- Senior statisticians with international reputations in survey sample design and statistical analysis;
- Senior staff with experience in social program evaluation and in specific research fields such as educational assessment, clinical trials, and epidemiologic research;
- Experienced computer systems and information technology professionals who know how to meet the special needs and systems requirements of our project work;
- Teams that provide specialized technical assistance or services, such as medical and dental examinations or occupational exposure assessments, to meet specific study requirements; and
- Experienced consultants who provide technical and programmatic guidance to our staff and participate directly on project teams.

Westat's Child, Youth, and Family Research (CYFR) Area

Central to Westat's success is the group of staff that focus on research pertaining to children and families. Westat's Child, Youth, and Family Research (CYFR) Area consists of experts in the fields of child abuse and neglect, foster care, permanency and reunification, guardianship and kinship care who routinely apply their knowledge to high-impact child welfare research and evaluation studies. In addition, CYFR staff have expertise in criminal and juvenile justice topics such as, offender programs and services, court processes, and victims. CYFR staff also perform analyses using multidimensional surveys and complex administrative data sets, separately and combined, for the purpose of informing programs and policy. CYFR staff have extensive experience with the Federal IV-E Waiver process, and will assist the Bureau for Children and Families (BCF) in complying with the mandates as defined in the Terms and Conditions of the waiver.

A(a). Vendor Response to Q(a):

Knowledge and Skills Related to SACWIS and FACTS

Information on families served by the West Virginia DHHR is collected and stored in the Family and Children's Tracking System (FACTS), a statewide automated child welfare information System (SACWIS). FACTS was implemented statewide in 1997 with the goal of facilitating program planning and compliance, facilitate state and federal reporting and financial accounting. The FACTS case management system enables DHHR to track families served by DHHR, including family background information, service activities, and family progress toward their case plan goals.

Information generated from FACTS reflects a high degree of accuracy with the caveat that children discharged at the end of a month and interstate child placements (children returning to WV or entering an out-of-state facility) may not be captured in the same month as the occurrence.

The result of a collaboration between state providers and DHHR, FACTS incorporates the Automated Placement Referral (APR) system. The APR system captures in-state child referrals to group residential care facilities and psychiatric residential treatment facilities. All DHHR staff are required to make referrals through the system (FACTS Plus) and all providers are required to respond to referrals electronically, thus ensuring that interactions between both parties are tracked. Another unique feature of FACTS is that it has Adult Protective Services, Adult Residential Services, and Child Care Program data incorporated into the system.

While Westat cannot claim any hands-on experience with FACTS, we have extensive experience in using data from SACWIS and SACWIS-like systems from Arizona, California, Illinois, Kansas, Louisiana, Maryland, Massachusetts, Michigan, Nevada, New Jersey, New York, Ohio, Tennessee, Texas, Virginia, and the District of Columbia. We describe our experience with these systems in more detail in the sections that follows.

A(b). Vendor Response to Q(b):

Experience Using Data from SACWIS and SACWIS-like Systems in Other States

Our evaluation team has extensive experience working with SACWIS and similar child welfare systems in other states, at both the state and county levels. Westat has used these data systems to determine eligibility for interventions, to assign cases for random controlled trials (RCTs) and to develop analytical files to evaluate outcome measures. We highlight some of our key experiences with these systems below:

- In a few **Title IV-E waiver evaluations**, Westat used SACWIS, along with agency fiscal data, as the basis for building assumptions around unit cost. In Illinois and Wisconsin, SACWIS data were used by Westat to determine the impact of the intervention on key proximal and distal outcomes. We are currently using SACWIS data to analyze outcomes for the Michigan and Ohio waiver evaluations.
- For the **Evaluation of Colorado Differential Response Study**, Westat used SACWIS measures to operationalize fidelity measures. For example, we checked SACWIS to see that a caseworker visited a family and how many times.

- For the **Permanency Innovations Initiative**, Westat used SACWIS or SACWIS-like data systems for each of the six PII grantees (Arizona, California, Illinois, and Kansas; City of Los Angeles; and Washoe County, Nevada) to conduct data mining to identify or, in some cases, confirm, intervention target populations. In addition, we assisted Washoe County, Nevada with the development of a statistical analysis system (SAS) random assignment algorithm to build into their state's SACWIS system. We also plan to examine safety and permanency outcomes using SACWIS systems for each of the grantees.
- For the **Fourth National Incidence Study on Child Abuse and Neglect (NIS-4)**, Westat used SACWIS or SACWIS-like data files from 35 states and the District of Columbia on maltreatment reports and investigations for evaluative coding to study definitions and for computing the national child abuse and neglect incidence rates.
- For the **Arizona Families F.I.R.S.T Substance Abuse Treatment Evaluation**, Westat used child welfare, TANF/JOB, and Medicaid data in the evaluation of Arizona Families F.I.R.S.T program. Westat also developed an evaluation database system and conducted the client satisfaction survey. Westat staff identified the data elements to be included; built and maintained the system (forms, tables, queries, reports, and macros); and obtained comparable data across nine program sites and from state agency databases.

A(c). Vendor Response to Q(c):

Experience with Title IV-E Waiver Projects

Westat is proud of the role it has played in seven Title IV-E waiver demonstrations in six different states: Illinois, Tennessee, Wisconsin, Ohio, Massachusetts, and Michigan.

- In the **Evaluation of the Illinois Subsidized Guardianship Waiver Demonstration**, 6,800 children in three state regions were randomly assigned to either the demonstration group (eligible for subsidized guardianship) or control group (not eligible for subsidized guardianship) to assess the impact of offering subsidized guardianship on permanency. This longitudinal study of status and outcomes of the children and families included collecting data at two points of service delivery: a baseline interview for information about the children and families at the time of enrollment, and a follow-up interview in spring 2001. Interviews were conducted with caregivers and children older than age 8. A process evaluation described the implementation of guardianship and the context in which it operates.
- For the **Illinois Permanency for Older Wards Waiver Study**, nearly 3,000 youth (age 14+) were randomly assigned to the demonstration group (eligible for enhanced transition services) or control group (not eligible for enhanced services). Westat collected and analyzed administrative data, interviewed youth and their caregivers,

conducted focus groups with agency and court personnel, and collected additional information from the administrative case review (ACR) process.

- For the **Assessment and Evaluation of the Tennessee Subsidized Guardianship Waiver Demonstration**, 1,122 children were randomly assigned to the demonstration group (eligible for subsidized guardianship) or control group (not eligible for subsidized guardianship). As a subcontractor to the Children and Family Research Center at the University of Illinois, Urbana-Champaign (UIUC), Westat was responsible for randomly assigning foster care children to treatment groups (eligible for subsidized guardianship) and control groups (not eligible for subsidized guardianship) and for conducting telephone interviews with approximately 1,500 caregivers about the factors influencing their decisions about different permanence options.
- The **Wisconsin Subsidized Guardianship Waiver Evaluation** included 209 children in long-term relative foster care (not randomly assigned) and 320 children, most in relative foster care (randomly assigned to eligibility or no eligibility for subsidized guardianship). Westat worked with two subcontractors—the Children and Family Research Center, University of Illinois, and the Institute for Research on Poverty, the University of Wisconsin—to evaluate the Wisconsin Subsidized Guardianship Initiative. Caregivers were interviewed at the time of enrollment to obtain information about demographics, case history characteristics, household composition, social integration, services received, role of biological parents, legal and other issues, attachment status, and attitudes toward subsidized guardianship and the placement in general. Administrative data were also collected on outcomes, case history characteristics, and case planning.
- For **Ohio’s Title IV-E Waiver Demonstration-Phase II (ProtectOhio 5)** placement outcomes analysis, Westat is estimating the impact of the waiver relative to the pre-waiver period using stratified competing-risks Cox proportional odds hazards models and counterfactual imputation. This methodology adjusts comparisons between waiver and non-waiver counties for differences in case mix. Survival analysis is being used to model time-to-event data. Survival analysis in this case is used to examine how placement duration and relative frequencies by exit type change during the waiver period in the demonstration counties as compared to those same measures in the comparison counties, controlling for as many confounding factors as possible.
- As a subcontractor, Westat is conducting participant outcome analyses for the **Evaluation of the Commonwealth of Massachusetts Title IV-E Waiver Demonstration** to test the hypothesis that a redesigned congregate care system, Caring Together, will produce more desirable outcomes for children, young adults and families than the prewaiver residential treatment services. Using administrative data, Westat will use “distance matching” to match Caring Together children with pre-waiver children, and then conduct regression analyses and survival analyses to examine outcomes. The results will be used to understand whether or not the Title IV-E Waiver, implementing Caring Together, was effective in producing more desirable outcomes.
- In one of our most recent collaborations, Westat is leading, in partnership with the University of Michigan School of Social Work, the evaluation of Michigan’s **“Protect**

MiFamily” Title IV-E Child Welfare Waiver Demonstration. Protect MiFamily seeks to enhance the safety and explicitly improve the well-being of children and families by providing an innovative array of prevention services to families with young children who are at high or intensive risk for maltreatment as determined by child protective services (CPS). The evaluation methodology is designed to test the overarching hypothesis that connecting families with well-targeted and effective services (i.e., evidence-based services that reflect family needs and strengths) will improve family functioning, decrease the risk of subsequent maltreatment and prevent the placement of children in foster care. The evaluation relies on several evaluation and research methodologies: random assignment to treatment and control services; process evaluation; model fidelity assessment; outcome analysis using primary and administrative data; and cost analysis. Throughout the waiver period, Westat has worked with Michigan’s Department of Human Services, the private service providers, and the Demonstration’s Steering Committee to continually monitor performance targets and implement continuous improvement strategies.

Experience Conducting Non-IV-E Research and Evaluations

Westat is a nationally acknowledged leader in the area of child welfare program evaluation and has successfully conducted several complex, high-profile, and benchmark national studies. For example, Westat conducted the **Fourth National Incidence Study of Child Abuse and Neglect (NIS-4)** to capture the total number of children who were abused or neglected in the United States during the study year (2005 to 2006) and to indicate the degree to which this number had changed since the earlier incidence studies: NIS-1 (1979), NIS-2 (1986), and NIS-3 (1993). The NIS-4 effort included several additional tasks to enhance the quality and/or interpretability of the NIS findings, including (1) two surveys of CPS agencies: one on overall policies, procedures, and practices and the other on screening standards to determine how referrals would be treated concerning uninvestigated cases identified by sentinels and (2) a survey of professionals (“sentinels”) community agencies who regularly had contact with children and families on their definitions of child abuse and neglect.

In partnership with the Social Work Research Center in the School of Social Work at Colorado State University, Westat recently conducted the **Evaluation of the Colorado Consortium on Differential Response**. Differential response (DR) is a system reform that allows child protective services (CPS) to address screened-in allegations of child maltreatment in different ways. Eligible families from five Colorado counties were randomly assigned to either a family assessment response or an investigation response. The evaluation involved an outcomes, process, and cost-study components. Westat’s role on the evaluation included Family Exit Survey data collection; developing the data analysis plan; cleaning, weighting, and analyzing survey and administrative data for the process and outcomes evaluation; co-writing the interim and final reports; co-writing an article on

the findings (that was published in the journal on *Child Abuse and Neglect*), and presenting findings at several national conferences.

Highlighted Past Projects and Corporate References

We provide a discussion of four evaluation projects, including type of project, location, project goals and how these goals were/are being met successfully. References (project manager name, email address and phone numbers for the customer organization) are also included for these projects.

Evaluation of the Michigan's Title IV-E Waiver Demonstration "Protect MiFamily" Michigan Department of Human Services 2013 to Present

Summary: Protect MiFamily seeks to enhance the safety and explicitly improve the well-being of children and families by providing an innovative array of prevention services to families with young children (ages 0 to 5) who are at high or intensive risk for maltreatment as determined by child protective services (CPS). The Michigan Department of Human Services (DHS) currently offers prevention programs and family preservation services, but none contain the combination of evidence-based interventions or resemble the characteristics of those services proposed in the waiver demonstration project. DHS has contracted with private agencies in three demonstration sites (Kalamazoo, Macomb, and Muskegon counties) to coordinate strength-based, trauma-informed services and engage with families in their own homes to prevent maltreatment and the need for removal.

Project Goal: The goal of the Michigan IV-E Waiver demonstration project is to test the hypothesis that an array of intensive and innovative home-based family preservation services tailored to the needs of individual families will (1) prevent the incidence and recurrence of maltreatment; (2) reduce the number of children who enter out-of-home placement; (3) improve child safety and family well-being; and (4) be cost-effective and cost-neutral. Michigan has contracted with Westat and the University of Michigan to carry out a rigorous evaluation to examine this goal.

The evaluation methodology is designed to test the overarching hypothesis that connecting families with well-targeted and effective services (i.e., evidence-based services that reflect family needs and

strengths) will improve family functioning, decrease the risk of subsequent maltreatment and prevent the placement of children in foster care. The evaluation team participates in an Evaluation Steering Committee, meets routinely with the participating County representatives, and Michigan DHS waiver project staff to discuss the progress of the evaluation.

How We Are Meeting the Project Goal: The evaluation relies on several evaluation and research methodologies that are described here.

- **Random Assignment to Treatment Services and “Services As Usual”**– A Westat statistician provided programming code for, and reviewed the development and programming of, the randomizer for the evaluation. We continue to monitor the probability ratios for random assignment to ensure that the proportion of cases in each assignment category remains consistent with the target probabilities (2 to 1 ratio).
- **Client Consent Procedures** – The evaluation team developed a client consent form, consent administration procedures, and lead initial and refresher trainings with waiver staff as well child protection staff on the administration of the consent with clients.
- **Process Evaluation** – The evaluation team has taken a collaborative approach in the conduct of the process evaluation, enlisting the input of DHS representatives, private service providers, and other key stakeholders in the development of a comprehensive data collection plan. The proposed evaluators developed interview and focus group guides, conducted site visits to capture information about facilitators and perceived barriers to implementation, as well as insights into the types of people we would interview. A self-administered family satisfaction survey, to be completed at different phases of service delivery, was designed by the evaluation team, together with procedures for receiving of these surveys from clients and waiver agencies. In addition, agency documentation is collected by the study team, and service data on both treatment and control group families are received. Through collaboration with DHS, a fidelity assessment tool was developed, as well as a quarterly analysis process for using the tool.
- **Outcome Evaluation** – Through a variety of data sources, the evaluation team ensures the study addresses the research hypotheses of the study. The evaluation team receives, reviews, tracks, and monitors the data quality of assessment and survey data completed as part of waiver services. In addition to the monthly compiled sample files, the evaluation team receives and processes primary data gathered through the Protect MiFamily database, the electronic Devereux Early Childhood Assessment (e-DECA) database, and the Protective Factors Survey (PFS) database files. It also acts as the administrator for e-DECA and the PFS. Our partner, the University of Michigan, receives Michigan’s State Automated Child Welfare Information System (MiSACWIS) data and provides analysis of the child maltreatment and foster care outcomes for this study. Together, the study team provides an on-going data support relationship with the data entry specialists and DHS, and convenes meetings with DHS Protect MiFamily central office staff to resolve ongoing data quality issues.

- **Reporting** – To meet the state and federal mandated reporting requirements for the waiver demonstration, the evaluation team prepares all evaluation sections of the Protect MiFamily Waiver Demonstration’s quarterly progress reports, semi-annual and annual reports to the Michigan DHS. The first semi-annual report for this project was praised by the Children’s Bureau Federal project officer for Title IV-E Wavier Demonstrations as being so thorough and well written that she encouraged other IV-E waiver sites to use it as a model for writing their reports.
- **Cost Analysis** – To examine comparative costs between experimental and control groups, the evaluation team receives reports on provider expenditures for direct, indirect, and concrete services, and mileage from DHS Protect MiFamily central office staff; Control Group Expenditure Tracking data and the cost neutrality formula from the central office staff.

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**Evaluation of Ohio’s Title IV-E Demonstration—Phase III (ProtectOhio 5)
Ohio Department of Job and Family Services (ODJFS)
1998 to Present**

Summary: For the Evaluation of Ohio’s Title IV-E Waiver Demonstration Project “ProtectOhio,” Westat worked with other research companies to determine whether alternative approaches to managing care increased the efficiency and effectiveness of Ohio’s child welfare system. Westat has worked on the Ohio waiver since 1998. Under a previous contract, the evaluation involved the investigation of the impact of new waiver services including family visitation, family team conferencing, and enhanced kinship services, for which Westat prepared the analytic files. Fourteen counties in Ohio received funds for new model services; an additional 14 counties served as controls.

Under the current 5-year contract, Westat, as a subcontractor to the Human Services Research Institute (HSRI), is conducting participant outcomes analysis to examine the impact of two waiver services: family team conferencing and enhanced kinship services. In Phase III, the 17 waiver counties are concentrating on standardized policy and program models in Family Team Conferences and Enhanced Kinship Care.

Project Goals: The goals of the Evaluation of Ohio’s Phase III Title IV-E Waiver Demonstration are to determine the impact of waiver services and to work with the “ProtectOhio” Consortium of counties in the continuous improvement of waiver services and a standard model of delivery of those services.

How We Met/Are Meeting the Project Goals: Under the previous contract, one of Westat’s roles was to evaluate the participant outcomes for the demonstration using data from Ohio’s SACWIS as well as county-level data systems. We examined whether demonstration area children experienced fewer out-of-home placements, whether there was an increase in recidivism of placements, and whether there was an increase in abuse or neglect. Westat also conducted a paper-and-pencil survey with 1,400 caseworkers to collect information about one randomly selected child in each caseload. The survey collected service and case information about each child and family, as well as demographic, attitudinal, and background information about each caseworker. Westat developed and maintained a database for administrative data collected over a 5-year period and a database for interview data collected in year 4 of the demonstration. Westat used Ohio SACWIS data in conducting a participant outcomes analysis to investigate the impact of the waiver. Analysts use stratified competing-risks Cox proportional odds hazards models and counterfactual imputation

methodologies to examine foster care length of stay. For a final report in 2003, Westat also conducted additional analysis to identify the reasons why children were being served, such as child maltreatment, child delinquency, or unruliness.

Under the current contract, Westat is responsible for the administrative data from the Ohio SACWIS used in analyses for the “ProtectOhio” Title IV-E Waiver Evaluation. Westat organized the “ProtectOhio” Data Workgroup to help the evaluation team better understand the data in SACWIS and to assist state SACWIS staff in developing specifications for new data elements required in SACWIS for the waiver strategies. The workgroup is composed of evaluation team members, county staff that work with data on a daily basis, and Office of Information Technology (OIT) staff who are familiar with the data needs of the waiver evaluation. Additional state and county staff are brought into the workgroup as appropriate for their expertise to address particular data needs for the waiver strategies. This work benefits not only the evaluation team but also the counties and the Ohio Department of Job and Family Services in understanding the data used in outcome measure development, analysis, and monitoring. This ongoing data workgroup examines the local use of statewide data, enabling comparative analysis of longitudinal records.

Westat captures and conducts secondary analysis of administrative data for 17 participating and 17 comparison counties on an annual basis. In Phase III, the 17 waiver counties are concentrating on standardized policy and program models in Family Team Conferences and Enhanced Kinship Care. Ohio is a county-administered state and, therefore, variances in service delivery models persist and must be taken into consideration in performing the evaluation analyses. Analysts use stratified competing-risks Cox proportional odds hazards models and counterfactual imputation methodologies to examine foster care length of stay, as well as trajectory analysis to examine service pathways.

Project Point of Contact:

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**Evaluation of the Permanency Innovations Initiative (PII)
Administration for Children and Families
U.S. Department of Health and Human Services
2011 to Present**

Summary: The Permanency Innovations Initiative (PII) is a multisite federal demonstration project designed to improve permanency outcomes among foster care children who have the most serious barriers to permanency. This 5-year, \$100 million initiative includes six grantees, each with a unique intervention designed to help a specific subgroup of children leave foster care in fewer than 3 years. PII objectives include the following:

- Implementing innovative intervention strategies, informed by the literature, to reduce long-term foster care stays and improve child outcomes;
- Using an implementation science framework enhanced by child welfare expertise to guide technical assistance activities;
- Rigorously evaluating these efforts to inform the child welfare field about efficacious programs, interventions, and practices that reduce long-term foster care; and,
- Building an evidence base and disseminating findings to build knowledge in the child welfare field.

Target populations in the PII project are (1) disproportionately represented children and youth of Native American and African American descent; (2) lesbian, gay, bisexual, transgender, and questioning (LGBTQ) youth and children; (3) children with serious emotional disturbances or mental health issues and/or challenges with placement instability; and (4) youth in foster care who have been in care for 2 years and have had either multiple moves or current mental health or trauma-related symptoms.

Westat and its subcontractors—James Bell Associates, the University of North Carolina at Chapel Hill, AndyB.org, Inc., and Ronna Cook Associates—are conducting rigorous cross-site and site-specific evaluations to examine the implementation and effectiveness of the PII project. The cross-site evaluation involves a cost study, a process/implementation study, and an administrative data study.

Project Goal: The overall goal of the project is to design and carry out rigorous site-specific and cross-site evaluations of the technical assistance models, implementation processes, contexts in which they are being carried out, cost implications, and effectiveness of the interventions in

achieving desired permanency and well-being outcomes. This goal is being achieved through two primary evaluation stages:

- Formative evaluation, which is the process of monitoring the relationships between program outputs and the achievement of key intended proximal (intermediate) outcomes. This evaluation phase tests whether grantee activities are associated with the expected outcomes of the project.
- Summative evaluation, a rigorous evaluation of the summary impact and casual efficacy and effectiveness of the intervention. This is the point at which the project determines whether the remaining proximal and distal (long-term) outcomes were achieved and the extent to which the changes can be attributed to the intervention.

How We Met/Are Meeting the Project Goal: Initial development of the cross-site and site-specific evaluation plans was performed by the evaluation team under a prior contract (Planning and Design Options for the Evaluation of the Long-Term Foster Care Initiative). Westat and its subcontractors coordinated with the grantees, local key stakeholders, and the Federal Technical Assistance contractor to formulate site-specific evaluation plans, which included identifying their target populations, interventions, comparison groups, and outcome measures and conducting evaluability assessments of these plans. The framework for this work, known as the PICO (population, intervention, comparison, and outcome) approach, has been adopted by the federal government for use with grantees, including Waiver Demonstration awardees. Under the previous contract, the evaluation activities included the following:

- Developing a knowledge base about and assessing the evaluability of each grantee;
- Engaging all the grantees in evaluation planning (including convening a grantee meeting on the evaluation and supporting site-specific development of management information systems);
- Establishing and working with an expert consultant group;
- Developing site-specific evaluation plans and resource estimates;
- Selecting baseline measures and identifying benchmarks for achieving goals;
- Producing a cross-site evaluation plan;
- Developing and pilot testing evaluation instruments;
- Producing Office of Management and Budget (OMB) clearance materials and securing institutional review board (IRB) approvals;

- Providing payments to grantees to offset some evaluation costs; and
- Delivering reports and briefings.

Under the current contract, Westat is implementing the site-specific and cross-site evaluations by performing the following activities:

- Providing evaluation support to all six grantees, including site visits as needed;
- Refining data collection instruments and procedures;
- Conducting primary data collection from families, service providers and other key stakeholders and data collector training;
- Collecting outcome and demographic data from different administrative data systems (e.g., SACWIS, AFCARS, and NCANDS);
- Analyzing and reporting on evaluation data;
- Convening annual meetings of evaluation liaisons from all grantees;
- Conducting an annual review of grantee benchmark data;
- Conducting a cross-site implementation study (including an organizational readiness survey, implementation case studies, an implementation driver assessment survey, and an implementation quotient tracker) and analysis of administrative data;
- Conducting a cross-site cost study (including the collection of financial reports and the collection of staff time associated with treatment activities using staff focus groups and web-based activity logs);
- Producing OMB clearance materials and securing IRB approvals; and
- Disseminating outcomes and lessons learned to policymakers, practitioners, and researchers concerned with permanency outcomes for children in long-term foster care.

One example of a PII grantee is the state of Illinois. Westat is leading a statewide evaluation of a trauma-focused model in Illinois to improve permanency outcomes for youth with placement instability and/or mental health symptoms. The intervention, Trauma Affect Regulation: Guide for Education and Therapy (TARGET), intends to address three key barriers to permanence for foster children, including (1) children's need to improve emotional regulation and reduce symptom severity, particularly disruptive behaviors; (2) biological parents' skills in regulating their emotions so they are better able to complete services and address the underlying issues related to their involvement in the child welfare system; and (3) foster parents skills in understanding and addressing the needs and disruptive behaviors of the children in their care with trauma histories. Westat

worked closely with project staff and community stakeholders to design an experimental evaluation of TARGET and identify appropriate trauma-related measures to examine the impact of the intervention on client functioning, such as the Trauma Symptoms Checklist for Children (TSCC), the Abbreviated Dysregulation Inventory (ADI), and the Child and Adolescent Needs and Strengths (CANS) database, and child welfare outcomes. Westat is currently collecting administrative data on key distal outcomes and leading the collection of primary data on proximal outcomes from youth and their biological and foster parents.

Project Point of Contact:

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**Wisconsin Subsidized Guardianship Waiver Evaluation
Wisconsin Department of Children and Families
2005 to 2010**

Summary: Under contract to the Division of Children and Family Services (DCFS), Wisconsin Department of Health and Family Services, Westat worked with two subcontractors—the Children and Family Research Center, University of Illinois, and the Institute for Research on Poverty, the University of Wisconsin—to evaluate the Wisconsin Subsidized Guardianship Initiative. The goal of the Initiative was to improve permanency outcomes for children and families. Under current Title IV-E regulations, relatives who are licensed as foster care providers for their kin can receive foster care payments and support from DCFS. In addition, the providers can receive an adoption subsidy if they adopt their kin but not if they assume guardianship. Under Title IV-E Waiver authority, the state used Federal funds to test whether the introduction of a subsidized guardianship benefit would result in an increase of permanence for children and an improvement in child outcomes. The evaluation was a longitudinal study of the status and outcomes of the children and families. The study included a treatment group (eligible for subsidized guardianship) and a control group (not eligible for subsidized guardianship). This study involved three components: (1) an outcome evaluation to estimate the impact of the subsidized guardianship option on permanency, safety, stability, and child well-being; (2) a process evaluation to understand the context in which outcomes

exist; and (3) a cost analysis to estimate the overall savings accrued by the subsidized guardianship option.

Project Goal: The goal of the evaluation was to examine the effectiveness of the Initiative in improving permanency outcomes for children in out-of-home care, describe the implementation of the Initiative, and assess the overall savings of the subsidized guardianship option.

How We Met the Project Goal: Westat lead the administrative data work and caregiver interviews. Caregivers were interviewed at the time of enrollment to obtain information about demographics, case history characteristics, household composition, social integration, services received, role of biological parents, legal and other issues, attachment status, and attitudes toward subsidized guardianship and the placement in general. Administrative data were also collected on child welfare outcomes, case history characteristics, and case planning. Westat contributed to the development of deliverables including interim and final reports of the findings from the outcome evaluation. The results were used to develop state policy on subsidized guardianship.

Project Point of Contact:

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A(d). Vendor Response to Q(d):

Official Recommendation Statement from Client

The Michigan Department of Human Services has provided an official statement about our work on Michigan's Protect MiFamily Title IV-E Waiver Demonstration project, which is provided on the next page as Exhibit 1.

Exhibit 1. Official recommendation statement



RICK SNYDER
GOVERNOR

STATE OF MICHIGAN
DEPARTMENT OF HEALTH AND HUMAN SERVICES
LANSING

NICK LYON
DIRECTOR

May 18, 2105

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Children's Services Agency
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West Virginia Department of Administration
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To Whom It May Concern:

The Michigan Department of Health and Human Services is pleased to write a recommendation for Westat as an evaluator of Michigan's Federal IVE waiver project. Michigan's demonstration project, called Protect MiFamily, operates in three counties, and consists of prevention, preservation, and support services provided to families with at least one household child under six-years-old, determined by Children's Protective Services (CPS) to be at high or intensive risk for maltreatment. By design, the Protect MiFamily project model allows flexibility in the type and intensity of direct worker interventions and community services provided to each family. When appropriate, evidence-based service utilization is prioritized.

DHHS contracted with Westat to carry out a rigorous evaluation of Michigan's demonstration project. The evaluation team's activities involve developing the evaluation plan and methodology and performing the evaluation. The evaluation includes random assignment, statistical measurements, and outcome analysis methodologies designed to evaluate the demonstration's success on established outcomes. The team leads the process and outcome evaluations, collects primary and administrative data, provides outcome measurement and analysis, performs cost-benefit and cost-effectiveness analysis, and prepares necessary reports.

After 20 months of working with Westat, DHHS could not be more pleased with the result. We have found Westat to be more than competent in their approach and implementation of the Evaluation Plan. Westat adheres to timelines and provides information timely. The Westat staff is very dedicated to the project. They have been a true joy to work with and have become real partners with DHHS and our service contractors on many aspects of the project. Their willingness to participate in a variety of meetings and calls addressing data, model fidelity, etc. is exemplary. Westat's technical assistance to central office staff and the involved sites is extremely helpful. They make themselves available to problem-solve and offer objective and experienced advice as the project is implemented.

Protect MiFamily is making a difference in the lives of many families. Westat shares responsibility with DHHS for each success. Westat guides all aspects of our project with their expertise in providing technical assistance on the intervention and evaluation and in addressing both known and unforeseen issues. Westat's expertise in monitoring implementation of Protect MiFamily contributes to its success. Michigan DHHS highly recommends Westat as an evaluator for a Federal IVE waiver project. If you have any questions, please contact me at Chalimanm2@michigan.gov.

Sincerely,

Mary Chaliman
Protect MiFamily Project Manager

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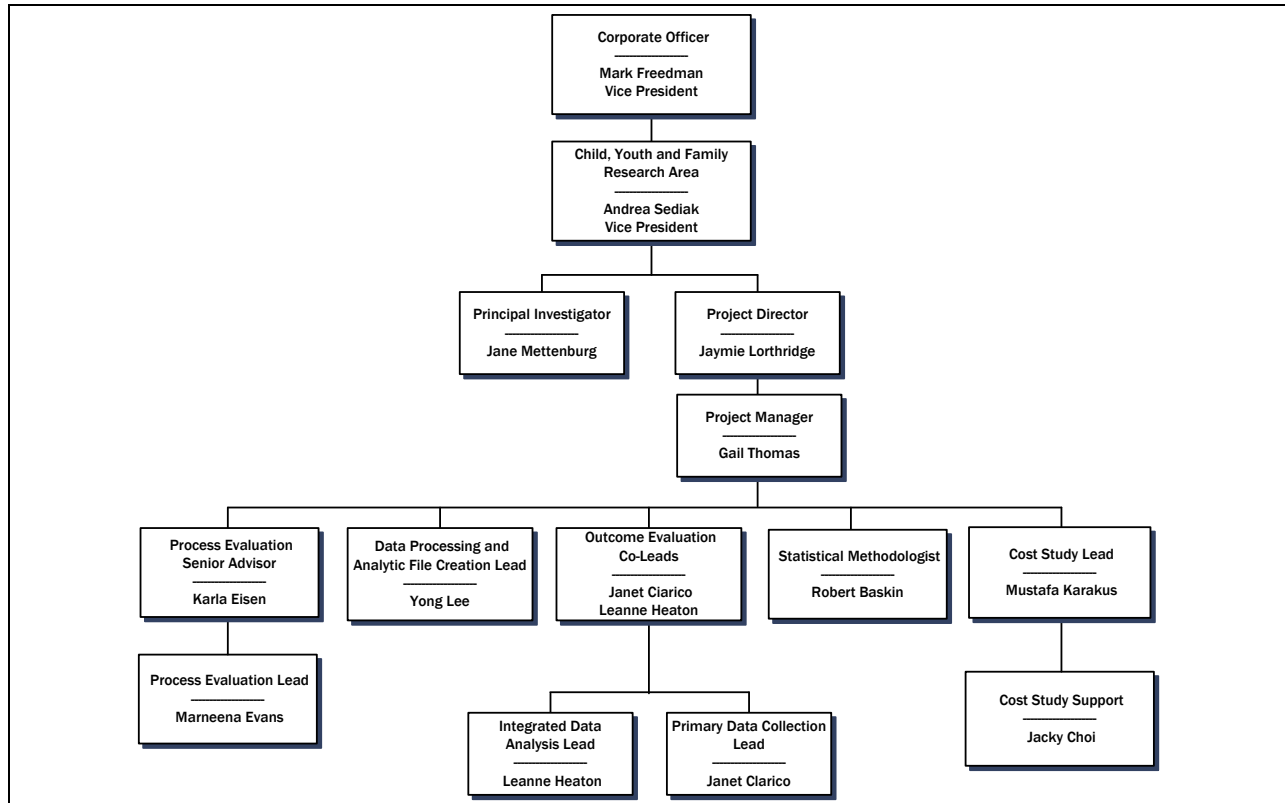
A(e). Vendor Response to Request for a Staff Planning:

Proposed Staffing Plan

Below is a summary of key personnel roles and responsibilities and their qualifications. All proposed project staff are full-time personnel. The job description for each person is presented first and is followed by his or her qualifications. Resumes for each proposed staff member follow this section.

Figure 1 provides our organizational chart.

Figure 1. Organizational chart



The evaluation team is available immediately upon the contract start date. Any vacancies in the team throughout the contract will be filled through existing high-quality, qualified staff or through a job search. Westat maintains a large, high-quality and versatile staff, and anticipate being able to fill any vacancies that occur during the contract with existing staff. The Bureau for Children and Families project manager will be informed of all anticipated changes in staffing.

Principal Investigator

Ms. Jane Mettenburg, a Westat Senior Study Director, will serve as principal investigator (PI). As PI, Ms. Mettenburg will provide scientific direction to design and methodology decisions. She will contribute her vast knowledge of child welfare to the evaluation, advising on all aspects of the project and contributing to analysis and reporting.

Ms. Mettenburg has more than 35 years of experience in the child welfare field. She is currently the project director for the **Michigan Title IV-E Waiver Evaluation** and the **Phase III Ohio IV-E Waiver Evaluation's Participant Outcome Analysis**. For the **Third National Incidence Studies of Missing, Abducted, Runaway, and Thrownaway Children**, Ms. Mettenburg is the task leader for the development of the household survey instruments and for the evaluative coding of study data. For the **Evaluation of the Permanency Innovations Initiative (PII)**, she directed the data mining tasks identifying the target populations and directs the administrative data site specific outcome analysis. As a senior consultant at the **National Resource Center for Child Welfare Data and Technology**, she provided states with training and technical assistance on National Child Abuse and Neglect Data System (NCANDS), the Adoption and Foster Care Analysis and Reporting System, and Child and Family Service Reviews data indicators. For **Fourth National Incidence Study of Child Abuse and Neglect (NIS-4)**, Ms. Mettenburg directed recruitment of 126 child protective services (CPS) agencies, electronic submissions of CPS data, and evaluative coding of main study data, contributed to the Report to Congress, and directed a comparison of the NIS-4 to the NCANDS. She directed the development of an evaluation database for the Arizona Community Substance Abuse Prevention and Treatment Program using administrative data from state child welfare, TANF/JOBS, and health agencies. In addition, she served as administrative data manager for the **Evaluation of the Illinois Subsidized Guardianship Waiver Demonstration** and the **National Evaluation of Family Preservation and Reunification Programs**. She co-authored the report "Estimating Child Welfare Service Costs: Methods Developed for the Evaluation of Family Preservation and Reunification Programs" for the Assistant Secretary for Planning and Evaluation, Department of Health and Human Services. She worked for the Texas child welfare system for 23 years where she analyzed and monitored every facet of child welfare service delivery using administrative data—intake/ investigation, family preservation, foster and substitute care, reunification, long-term foster care, adoption, guardianship, runaways, and contract private provider services. She worked on the design team for the building of the Texas SACWIS. She directed the development and analyses of child welfare performance and outcome measures for the State agency, oversaw random-moment workload and IV-E time studies, and performed cost of services analyses for the performance-based budgeting process. In her budget role, she developed a

system for monitoring foster care providers' level of care determinations. Ms. Mettenburg was responsible for child welfare and Medicaid federal reporting and state reporting at the unit, county, and regional levels using the multiple client-level administrative databases at the agency.

Project Director

Dr. Jaymie Lorthridge, a Westat Senior Study Director, will serve as project director.

Dr. Lorthridge will oversee and direct all project work, ensuring that all tasks are completed in a timely manner and on budget. She will maintain ongoing communication with the Bureau for Children and Families (BCF) project manager to review project progress and receive guidance from the BCF project manager in solving any problems, real or anticipated, that may arise.

Dr. Lorthridge has more than 10 years of experience in the evaluation of community-based programs aimed at improving outcomes for families and children. She is currently the RISE evaluation lead for the **Permanency Innovations Initiative**. The RISE site uses a wraparound approach to serving youth ages 11 to 17 years. She also serves as program manager for the Hilton Foster Youth Strategic Initiative, which targets transition age youth, and is the fidelity assessment task leader for the **Michigan IV-E Waiver Evaluation**, which requires consideration of fidelity's impact on the process and outcomes evaluation. Before joining Westat, Dr. Lorthridge worked with the Los Angeles Department of Children and Family Services/Casey Family Programs and at the University of Southern California School of Social Work where she was part of multidisciplinary team that evaluated family preservation, child abuse prevention, and child care training programs and conducted research in areas such as health disparities and family strengthening factors.

Dr. Lorthridge worked within a team to assess barriers and facilitators affecting fidelity to strategies for the **Los Angeles County Evaluation of Title IV-E Strategies project**. She conducted research in Los Angeles County Early Childhood Education Centers exploring implementation of the **Strengthening Families Approach**. During the **Partnerships for Families** project, a maltreatment prevention initiative targeting children 0 to 5, she provided theoretical research that guided revision of the process evaluation plan and drafted the family satisfaction survey.

Project Manager

Ms. Gail Thomas, a Westat Senior Study Director, will serve as project manager. Ms. Thomas will conduct day-to-day project management and will assist the project director in ensuring that all tasks are completed in a timely manner and on budget.

Ms. Thomas has more than 15 years of experience managing and conducting multimode process and outcome evaluations involving at-risk youth, clergy, and the elderly. Ms. Thomas has helped develop and test instruments, trained and directed field staff for quantitative and qualitative studies, and advanced data collection quality and production. She served as field director for both the **Assessment and Evaluation of the Tennessee Subsidized Guardianship Waiver Demonstration Project and the Assessment and Evaluation of the Wisconsin Subsidized Guardianship Initiative**. She is currently a task leader for the Association of American Universities Campus Climate Survey on Sexual Assault and Sexual Misconduct and provides service data analysis for the process evaluation of the Michigan IV-E Waiver Evaluation, Protect MiFamily.

Process Evaluation Senior Advisor

Ms. Karla Eisen, a Westat Senior Study Director, will serve as the senior advisor for the process evaluation. She will advise on the development of the process evaluation plan, the analysis plan, and the development of any relevant data collection instruments. She will also oversee the analysis of qualitative data for the process study.

Ms. Eisen has more than 20 years of experience in research and program evaluation as well as direct service provision with a wide variety of social service programs. Her areas of expertise include qualitative approaches to data collection and analysis as well as survey operations. She has experience in program evaluation, case studies, ethnographic methods, instrument design, and field data collection. Ms. Eisen also uses computer-assisted qualitative data analysis software, primarily NVivo, in her analytic work and has presented on the subject at conferences nationally and internationally. She is currently the process evaluation lead for the **Evaluation of Michigan's Title IV-E** program. She is responsible for the evaluation plan, family satisfaction survey, and development of on-site data collection and analysis of focus group and interview data. She served as the cross-site evaluation coordinator for Office of Juvenile Justice and Delinquency Prevention's **Safe Kids Safe Streets project** for the Sault Saint Marie Tribe of Chippewa Indians site that included interfacing with both the tribal and Michigan state child welfare agencies. She was

responsible for site visits, qualitative data collection and analyses, case study reports as well as providing evaluation technical assistance. She also served as the lead evaluator for the Arizona site on the **Evaluation of the Permanency Innovations Initiative** (PII) project. In her role on the PII project, she designed a rigorous evaluation of an intervention, involving child advocates and family search and engagement techniques, designed to address barriers to permanency for children at risk of remaining in foster care long term.

Process Evaluation Lead

Ms. Marneena Evans, a Westat research analyst, will serve as lead for the process evaluation. In her role as process evaluation lead, she will direct the development of the process evaluation plan, the analysis plan, and the development of any relevant data collection instruments. She will also lead the analysis of qualitative data for the process study.

Ms. Evans has more than 14 years of experience in child welfare and juvenile justice research and evaluation, qualitative analysis, training and technical assistance, and product development and dissemination. She currently conducts qualitative data collection and analysis for the evaluation of the Michigan Protect MiFamily IV-E waiver demonstration project, the evaluation of the Permanency Innovations Initiative, and the evaluation of the Hilton Foundation's Foster Youth Initiative. Ms. Evans also serves as the data collection manager for the Survey of Juveniles Charged in Adult Criminal Courts and a writer and analyst for the Capacity Building Center for Tribes. Ms. Evans previously conducted administrator interviews for the National Survey of Youth in Custody, conducted site visits (including focus groups with staff, youth, and caregivers), a case manager survey, and qualitative analysis for an evaluation of the Wisconsin Subsidized Guardianship Initiative IV-E waiver demonstration; worked with county child welfare agencies on administrative data issues for the ProtectOhio IV-E waiver evaluation; coordinated with county child welfare agencies for the North Carolina Family Finding Evaluation; conducted analysis and product development for the National Resource Center for Child Welfare Data and Technology; and conducted program reviews for a New York City Center for Economic Opportunity Program Evaluation.

Outcome Evaluation Co-Leads

Primary Data Collection Lead

Ms. Janet Ciarico, a Westat senior research analyst, will serve as the outcome evaluation co-lead with responsibility for gathering administrative data for the study. She will also co-lead the outcome analyses using the state's administrative and primary data.

Ms. Ciarico has 19 years of experience in survey and evaluation research. She has conducted research and evaluation in the areas of child abuse and neglect, foster care, family preservation and reunification programs, subsidized guardianship, and youth aging out of foster care. Ms. Ciarico has expertise in the development of analysis plans and in conducting quantitative and qualitative analysis using complex primary and administrative data sets. Ms. Ciarico currently serves as the primary data collection and outcome analysis task leader for the **Michigan Title IV-E Waiver Evaluation**. She also serves as senior research analyst for the **Evaluation of the Permanency Innovations Initiative** and the **Ohio IV-E Waiver Evaluation**. Ms. Ciarico served as a senior research analyst for the **Illinois Permanency for Older Wards Waiver Study**, the **Evaluation of the Illinois Subsidized Guardianship Waiver Demonstration**, the **Fourth National Incidence Study of Child Abuse and Neglect (NIS-4)** and the **First National Survey of Youth in Custody (NSYC-1)**.

Integrated Data Analysis Lead

Dr. Leanne Heaton, a Westat Senior Study Director, will serve as a co-lead for the outcome evaluation and will also lead the integrated data analysis.

Dr. Heaton is a licensed clinical social worker and a Westat Senior Study Director with more than 20 years of experience in research, evaluation, and clinical practice experience with adults, children, and families. She has conducted research in the areas of child welfare, juvenile justice, and mental health. At Westat, she works with investigators and collaborators on the design, implementation, and analysis of a wide range of studies, including the National Survey of Youth in Custody-2 and a Bureau of Justice Statistics study on rape and sexual assault. She has experience analyzing large, complex national surveys and developing detailed analytic plans. Dr. Heaton also teaches social work practice at the Virginia Commonwealth University School of Social Work. In previous work, Dr. Heaton served as a researcher, clinical research interviewer, and collaborator on several studies for

the National Institute of Mental Health (NIMH), including the National Comorbidity Survey of Adolescents, the child segment of the Hurricane Katrina Study, and research on neurodevelopmental genomics and familial transmission of mental disorders. Dr. Heaton has also conducted extensive program evaluations on behalf of the Fairfax County Department of Family Services and the Virginia Department of Social Services.

Statistical Methodologist

Dr. Robert M. Baskin will serve as statistical methodologist for the project. He will lead the development of a detailed research design and monitor the implementation of the research design. He will also conduct statistical procedures for the major analyses integrating both the primary and administrative data.

Dr. Baskin is a senior statistician with more than 25 years of experience in conducting and managing statistical research. During his time at Westat (2001 to 2003), he carried out nonresponse adjustments and raking for development of weights for the National Youth Anti-Drug Media Campaign NYAMC, and conducted propensity analysis for the development of longitudinal weights. He conducted research on sample allocation and control overlap for the sample redesign of the Drug Abuse Warning Network and identified use of SPC control charts for purposes of data quality control. Dr. Baskin continues to serve as an internal consultant at Westat. More recently, at the Agency for Healthcare Research and Quality (AHRQ), Dr. Baskin was responsible for conducting a broad range of statistical research and analyses and providing expert statistical and methodological consultation to support AHRQ's intramural and extramural research efforts. Dr. Baskin provided expert statistical consultation for a broad range of statistical issues within AHRQ relating to health care policy. He has provided expert statistical consultation to other government agencies on complex study designs and analytical techniques.

Data Processing and Analytic File Creation Lead

Mr. Yong Lee, a Westat senior systems analyst, will serve as the data processing and analytic file creation lead for the evaluation. Mr. Lee will oversee the data processing and management activities for both survey and analytic tasks.

Mr. Lee has 25 years of experience working with large data systems and performing statistical analyses to include sampling, weighting, and imputations. His current responsibilities include overseeing project deliverables, reviewing the work of his team, and programming in SAS. He works with SAS on PCs running Windows and Linux. He also supervises web data collection applications development and maintenance on SQL Server/ASP.NET platforms. Mr. Lee currently supervises the data analysis work on the Ohio's Title IV-E Waiver Demonstration Project, working with Ohio's SACWIS data. Mr. Lee also works on many task order contracts administered by the U.S. Department of Education. Mr. Lee currently supervises the data collection and analysis work on the Integrated Evaluation of ARRA Funding, Implementation, and Outcomes, the Evaluation of the DC Opportunity Scholarship Program, and the Personnel Preparation Performance Reporting Support contracts. He has also supervised the analysis work on Follow-up Evaluation of the Gaining Early Awareness and Readiness for Undergraduate Programs (GEAR UP), Technical Assistance in Data Collection, Analysis, and Report Preparation (IDEA data), and Impact Evaluation of the DC Choice Program.

Cost Study Lead

Dr. Mustafa Karakus, a Westat Senior Study Director and health economist, will lead the cost study. Dr. Karakus will be responsible for conducting all cost analyses for the evaluation, including examining service costs, conducting a cost-effectiveness analysis and supporting BCF with cost-neutrality calculations.

Dr. Mustafa C. Karakus is a health economist with a strong background in applied microeconomics, health economics, and econometrics and with training in micro simulations modeling and cost-effectiveness analysis. At Westat, Dr. Karakus has conducted economic analysis and evaluation of data for projects funded by New York City and the following federal agencies: U.S. Department of Health and Health Services; HHS agencies, Centers for Disease Control and Prevention and the Substance Abuse and Mental Health Administration (SAMHSA); U.S. Department of Labor; U.S. Social Security Administration; and the Veterans Benefit Administration. His work has centered on all aspects of economic evaluations, including cost-effectiveness, cost-benefit, and decision-making analysis in programs involving subpopulations such as people with serious mental illness, ex-offenders, drug court clients, the chronically homeless. He is leading the cost study evaluation of Title IV-E waiver in Michigan. He has previously led multi-site cost evaluation of SAMHSA grantees in the of drug court initiation and/or enhancement grants. Dr. Karakus' research papers have been published in *PharmacoEconomics*, *Applied Economics*, *Atlantic Economic Journal*,

Journal of Behavioral Health Services and Research, Administration and Policy in Mental Health and other reputable public policy and health care financing journals. He recently served as the guest editor of a special section on “Affordable Care Act and Behavioral Health Services” for the Journal of Behavioral Health Services and Policy that came out in fall 2014. He also has presented scientific papers at numerous national and international conferences.

Cost Study Support Staff

Mr. Jacky Choi will serve as cost study support to Dr. Karakus.

Mr. Choi is a research assistant with experience in health education, research, and project development. At Westat, he assists senior-level staff in conducting literature reviews; performing geocoding; developing, editing, and revising survey content; annotating and coding surveys; drafting recruitment materials; and writing proposals and client reports. Mr. Choi has served as a liaison among various stakeholders on health-related projects or activities. He offers health communication skills, as well as experience in social science research and writing.

Staff Resumes

Jane A. Mettenburg

Summary

Jane Mettenburg is a Westat Senior Study Director with more than 35 years of experience in child welfare. She is project director for the Michigan IV-E Waiver Evaluation and for the Phase III Ohio IV-E Waiver Evaluation—Participant Outcome Analysis; all analytic files are produced using Ohio SACWIS data. For the Third National Incidence Studies of Missing, Abducted, Runaway, and Thrownaway Children, she is task leader for the development of household survey instruments and for evaluative data coding. As a senior consultant at the National Resource Center for Child Welfare Data and Technology, Ms. Mettenburg provided states with training and technical assistance on National Child Abuse and Neglect Data System (NCANDS), the Adoption and Foster Care Analysis and Reporting System (AFCARS), and Child and Family Service Reviews data indicators. She directs data mining tasks and site-specific administrative data analysis for the Permanency Innovation Initiative. For the Fourth National Incidence Study of Child Abuse and Neglect (NIS-4), Ms. Mettenburg directed recruitment of 126 child protective services (CPS) agencies, electronic submission of CPS data, and evaluative coding of main study data and contributed to the Report to Congress. She directed a comparison analysis between the NIS-4 to the NCANDS. For the NIS-4 Planning Project, she led the review and mapping of state child abuse and neglect laws and definitions used to enhance NIS-4 maltreatment definitions. Ms. Mettenburg also directed development of an evaluation database for the Arizona Community Substance Abuse Prevention and Treatment Program, using administrative data from state child welfare systems, TANF/JOBS, and health agencies. In addition, she contributed to Westat's evaluation of the Illinois Subsidized Guardianship Waiver Demonstration Program and to the National Evaluation of Family Preservation and Reunification Programs. She coauthored the report *Estimating Child Welfare Service Costs: Methods Developed for the Evaluation of Family Preservation and Reunification Programs* for ASPE. During her 23 years as a staff director in a state human service agency that included a child welfare agency, Ms. Mettenburg was responsible for management and planning of data analysis, systems development, development and monitoring of performance and outcome measures, compliance with Federal and state regulations and reporting requirements (including NCANDS and AFCARS), and research and evaluation for human services programs. She was a member of the State Technical Advisory Groups for NCANDS (1991 through 1997), the Multi-State National Foster Care Data Archive Project (1992 through 1997), and the Foster Care Longitudinal Event History Evaluation Project (1993 through 1997).

Education

B.A., Sociology, University of Texas, Austin, 1975

Relevant Project Experience

Westat (1997 to Present)

Michigan Title IV-E Waiver Demonstration Project, Protect MiFamily

Client: Michigan Department of Human Services

Project Overview: Michigan's Protect MiFamily Program provides an innovative array of prevention services to families with young children who are at high or intensive risk for maltreatment as determined by child protective services. The demonstration is being implemented by private agencies in Kalamazoo, Macomb, and Muskegon Counties. The Children's Bureau of the U.S. Department of Health and Human Services mandates an independent evaluation of each waiver demonstration project. Westat's activities involve evaluation plan and methodology development, including random assignment, statistical measurement, and analysis methodologies; implementation of process and outcome evaluations; primary and administrative data collection; outcome measurement and analysis; cost-benefit and cost-effectiveness analysis; and preparation of reports.

Responsibilities: Project director evaluation.

Extension of the Evaluation of Ohio's Title IV-E Waiver Demonstration

Client: Ohio Department of Job and Family Services

Project Overview: As a subcontractor, Westat is responsible for participant outcomes analysis to examine the continued impact of ProtectOhio on children and families. The 5-year contract includes studies to investigate the impact of new waiver services such as family visitation, family team conferencing, and enhanced kinship services. Westat annually captures and conducts secondary analysis of administrative data for participants in 14 participating and 14 comparison counties. Analyses will include competing risk survival analysis and counterfactual imputation methodologies to look at foster care length of stay, as well as trajectory analysis to examine service pathways. A data audit and ongoing data committee will examine the local use of statewide data sources, enabling comparative analysis of multiple sources of longitudinal records. Westat is now involved in phase III of the evaluation; phases I and II ran from 1998 to 2010.

Responsibilities: Project director (phase III)/administrative data manager (phases I and II). Ms. Mettenburg manages project staffing and budget, prepares progress reports, and contributes to interim and final evaluation reports. Throughout the study, she has coordinated delivery and analysis using administrative data from Ohio's SACWIS; conducts site visits as necessary to understand the data; works with state and county staff and other project staff on data use, analysis, and interpretation; and directs research and systems staff in data preparation and development of programming specifications for analytic projects using the evaluation data.

Third National Incidence Studies of Missing, Abducted, Runaway, and Thrownaway Children (NISMART-3)

Client: Office of Juvenile Justice and Delinquency Prevention, U.S. Department of Justice (DOJ)

Project Overview: The Rockville Institute, Westat's nonprofit affiliate, and its partner, the Crimes Against Children Research Center at the University of New Hampshire, are conducting NISMART-3 to provide updated information on the national incidence of missing children, their characteristics, and the events that cause them to become missing and to measure changes since the last NISMART cycle. Like the last cycle, NISMART-3 includes four national studies: a household survey of parents and other primary caretakers, a household survey of youth, a survey

of juvenile residential facilities, and a law enforcement study. Together, these studies assess the incidence of episodes that cause children to become missing: family abductions, nonfamily abductions (including stereotypical kidnappings), runaway/throwaway events, lost or injured situations, and benign missing misunderstandings. The study also identifies the incidence of children who qualify as missing and the numbers recovered.

Responsibilities: Task leader for household instrument development/evaluative coding. Ms. Mettenburg directed development of adult and child screeners for each type of episode (family abduction, non-family abduction, runaway/throwaway, and general missing). She oversaw programming of each instrument for administration via web and CATI. As task leader for evaluative coding, Ms. Mettenburg directs coding of data to determine child countability and specifies programming code for the automated child countability determination.

Planning and Design Options for Evaluation of the Long-Term Foster Care Initiative (Permanency Innovations Initiative)

Client: Administration for Children and Families, U.S. Department of Health and Human Services (HHS)

Project Overview: Under this 5-year initiative, the Children's Bureau funded six grantees to develop and implement innovative interventions in their state or county child welfare systems to reduce long-term foster care and improve outcomes for children who experience serious barriers to permanency. During this planning year, Westat and its subcontractors designed a comprehensive evaluation plan for the initiative. The evaluation team coordinated with grantees to formulate site-specific evaluation plans (including identifying their target populations, interventions, comparison groups, and outcome measures; conducting evaluability assessments of these plans; developing instruments; and obtaining necessary IRB clearances). Additionally, the evaluation team designed a cross-site evaluation plan and generated resource estimates for evaluation activities during future years of the initiative.

Responsibilities: Administrative data expert.

Fourth National Incidence Study of Child Abuse and Neglect (NIS-4)

Client: Administration for Children and Families, U.S. Department of Health and Human Services (HHS)

Project Overview: The NIS-4 gathered data on all children investigated by the child protective services (CPS) agencies in a nationally representative sample of 122 counties, as well as on children identified by nearly 10,800 professional staff in almost 1,100 other community agencies. These other agencies included county sheriff's offices; county departments of juvenile probation, health, and public housing; municipal police departments; hospitals; public schools; daycare centers; shelters; and voluntary social services and mental health agencies. Study cases were reviewed to eliminate duplicates, evaluated to ensure that they met the study's standardized definitions of abuse and neglect, and weighted to represent all maltreated children in the nation. The NIS-4 also included several allied surveys to enhance the quality and interpretability of the main study's findings and to examine how the NIS results relate to National Child Abuse and Neglect Data System (NCANDS) statistics.

Responsibilities: Director of CPS recruitment and evaluative coding. Ms. Mettenburg supervised recruitment of 126 CPS agencies that were offered the option of providing data electronically. She supervised the staff who worked with state and county personnel to map child abuse and neglect data elements to the NIS-4 data elements, to facilitate electronic submissions. Ms. Mettenburg supervised evaluative coding, which involved coding case details into a uniform format and deciding the countability of each child using standard definitions of abuse and

neglect. She also contributed to data analysis and writing of the Report to Congress. Ms. Mettenburg directed a comparison/cross-validation of the NIS and the NCANDS.

Assessment of the Chafee Foster Care Independence Program (CFCIP)

Client: Children's Bureau, Administration for Children and Families, U.S. Department of Health and Human Services (HHS)

Project Overview: As part of the Foster Care Independence Act of 1999, Congress mandated a performance assessment system for independent living programs funded under the CFCIP. This system, the National Youth in Transition Database, was envisioned as a comprehensive system integrating information about youth served, services delivered, and outcomes achieved. Westat and a subcontractor assisted in developing outcomes and performance measures to assess state CFCIP performance. The project involved an extensive consultation process to identify outcomes and measures, including stakeholder discussion groups in the 10 HHS Regions and at national conferences and involvement of a standing work group of policymakers, researchers, public child welfare agency staff, and private providers.

Responsibilities: Focus group leader. Ms. Mettenburg led discussion groups in developing a national set of outcome measures for the Independent Living Program.

Evaluation of the Illinois Subsidized Guardianship Waiver Demonstration

Client: Illinois Department of Children and Family Services

Project Overview: Westat evaluated a demonstration program that enables the state to subsidize the cost of care by relative caregivers and foster parents who assume guardianship responsibilities for foster children in their homes. The 5-year study provided estimates of the impact of subsidized guardianship on permanency outcomes, subsequent abuse and neglect allegations, family functioning, and child well-being. The project included (1) a hypothesis-testing evaluation to assess the effect of subsidized guardianship on the outcomes of children and their families and (2) a process evaluation to describe the implementation of guardianship and the context in which it operates. Westat synthesized the findings from both components to develop program and policy recommendations. Children and their caregivers were interviewed at two points in time by Westat staff and specially trained agency staff; children were interviewed using ACASI interviewing, and caregiver interviews made use of CAPI interviewing.

Responsibilities: Administrative data manager. Ms. Mettenburg coordinated delivery and analysis using administrative data, conducted site visits, and arranged for the delivery of appropriate and necessary administrative data.

Arizona Community Substance Abuse Prevention and Treatment Program (Arizona Families FIRST)

Client: Arizona Department of Economic Security and Department of Health

Project Overview: Westat was a subcontractor for this evaluation of Arizona First, which develops community partnerships and programs to address the needs of families in the child welfare system, as well as families who participate in the Temporary Aid for Needy Families and the Job Opportunities and Basic Skills Training programs. The project involved outcome and cost-effectiveness measures and process evaluations of operational issues to evaluate the success of provider services. Westat's major role was to build the evaluation database that will house all data necessary for the evaluation and cost reporting, perform data analysis, and prepare reports on clients' assessments, services, and outcomes.

Responsibilities: Project director and database manager. Ms. Mettenburg directed design, development, and maintenance of an evaluation database; data collection from state human

services databases and service providers; development of outcome measures; data analysis; design and preparation of reports; and technical assistance to service providers.

National Head Start Impact Study

Client: Administration for Children and Families, U.S. Department of Health and Human Services (HHS)

Project Overview: As part of the 1998 reauthorization of Head Start, Congress mandated this national longitudinal study to assess (1) how Head Start participation affects school readiness and (2) under what conditions and for which children the program works best. Working as part of a team, Westat conducted the pilot study and a full-scale study involving a nationally representative sample of 83 grantees/delegate agencies. Assessment data were collected for approximately 5,000 3- and 4-year-olds, who were followed through the spring of their first-grade year. Children were randomly assigned to either a treatment group that participated in Head Start or a non-Head Start control group. The project also included interviews with parents/primary caregivers, surveys of program staff/other care providers and elementary school teachers, assessments of the quality of care settings, and abstracting of administrative records.

Responsibilities: Administrative data manager. Ms. Mettenburg coordinated and ensured delivery and availability of data for all aspects of the study. Her responsibilities included management of databases and project management systems, construction of analysis files and web sites, and incorporation of all linked data sources.

Comprehensive Qualitative Review of the Safety, Permanency, and Well-Being of DCFS Wards

Client: Illinois Department of Child and Family Services (DCFS)

Project Overview: This study determined current levels of child well-being in the domains of safety, permanency, physical and mental health, education, developmental well-being, social functioning, and transition into adulthood. Westat provided and maintained an ACASI interview to collect study data and to prepare the analytical file.

Responsibilities: Project director. Ms. Mettenburg directed the design and development of an ACASI interview for various foster care populations, oversaw the development of statistical files for the analysis of interview and service data, and trained interviewers to use ACASI.

Assessing the Context of Permanency and Reunification in the Foster Care System

Client: U.S. Department of Health and Human Services (HHS)

Project Overview: Working with a subcontractor, Westat reviewed reunification policy and practice at the state, county, and local levels in response to the implementation of the Adoption and Safe Families Act. Project activities included developing a conceptual model of permanency and reunification, documenting patterns of reunification and re-entry through analyses of data from the Adoption and Foster Care Analysis and Reporting System (AFCARS) and the Foster Care Data Archive, examining caseworkers' decisionmaking processes for permanency, and developing a matrix of reunification programs. Data collection included telephone discussions with program administrators and site visits to reunification programs.

Responsibilities: Research interviewer. Ms. Mettenburg assisted in identifying data sources for analysis and interviewed state and provider program staff delivering reunification services to children and their families.

New York City Center for Economic Opportunity (CEO) Program Evaluation

Client: Center for Economic Opportunity/New York City Human Resources Administration

Project Overview: Westat is evaluating initiatives of the CEO Program, New York City's effort to move economically disadvantaged New Yorkers out of poverty. The initiatives are focused on young adults, poor working adults, and families with young children (<5 years). The Westat team is examining approximately 35 programs to determine which can best be evaluated, developing an evaluation design, and working with the selected programs to systematically collect information for evaluating impact, program implementation, and cost-benefit.

Responsibilities: Data manager. Ms. Mettenburg is directing development of a database to store information about clients and the services they receive from the 42 program agencies involved in the CEO. The data will be used to create services performance measures and client outcomes for evaluating program impact in reducing poverty.

Evaluation of Ohio's Title IV-E Waiver Demonstration Project "ProtectOhio"

Client: Ohio Department of Job and Family Services

Project Overview: Westat was a subcontractor for an evaluation of the ProtectOhio demonstration project, which adopts a managed care approach in order to reduce out-of-home placement, increase reunification and permanency for children, and improve family functioning. Westat conducted a participant outcomes analysis to examine the impact of ProtectOhio on children and families. Westat annually captured and conducted secondary analysis of administrative data on all families in 14 demonstration and 14 control counties to examine the mix of services provided and the families' resulting outcomes. A survey was conducted with a sample of 1,000 caseworkers to examine patterns of service utilization by children and families.

Responsibilities: Administrative data manager. Ms. Mettenburg coordinated delivery and analysis using administrative data, conducted site visits, and arranged for the delivery of appropriate and necessary administrative data.

Evaluation of Family Preservation and Reunification Services

Client: Assistant Secretary for Planning and Evaluation, U.S. Department of Health and Human Services (HHS)

Project Overview: Under a 5-year contract, Westat and two subcontractors assisted HHS in describing and evaluating the impact of four selected family preservation programs and one reunification program. For the first major component, an impact evaluation, up to 500 families in each program were randomly assigned to receive family preservation/reunification services (the treatment group) or usual child welfare services (the control group); Westat conducted three rounds of in-person interviews with the family's primary caretaker and two rounds of interviews with the caseworker. Other data collection efforts included an accounting of services provided by caseworkers and self-administered staff questionnaires. The second study was conducted to describe program operations; Westat interviewed child welfare and agency staff, reviewed policy and program materials, and examined administrative data systems and case records. Other activities included monitoring fieldwork, processing data, and preparing analyses and reports. A followup analysis to the reunification study looked at the status of initiatives that use managed care in child welfare efforts.

Responsibilities: Administrative data manager. Ms. Mettenburg coordinated delivery and analysis of administrative data, conducted site visits, and arranged for delivery of appropriate and necessary administrative data. She established mechanisms to link case interview data with administrative data case records. Ms. Mettenburg also coordinated completion of the cost analysis

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report and coauthored Estimating Child Welfare Service Costs: Methods Developed for the Evaluation of Family Preservation and Reunification Programs.

Texas Department of Protective and Regulatory Services (currently the Texas Department of Family and Protective Services), Austin, TX (1992 to 1997)

As director of the Forecasting and Program Statistics Division, Ms. Mettenburg directed the staff responsible for providing, forecasting, analyzing, and ensuring ready availability of client services data on child welfare, adult protective services, and daycare and foster/adoptive home licensing for and to state office and regional program and budget staff, the legislature, DHHS and other Federal agencies, other state agencies, the Governor's Office, HHSC, contractors, consultants, auditors, attorneys, reporters, private agencies, advocacy organizations, and the general public.

Ms. Mettenburg's work on the analysis of administrative data included the development and utilization of client/service outcome measurement for program performance, budgeting, and cost analysis. She also served on several teams involved in the design and development of the Texas Statewide Automated Child and Adult Protective Services System.

Ms. Mettenburg supervised preparation of data submissions to meet the reporting requirements of the National Child Abuse and Neglect Data System (NCANDS) and the Adoption and Foster Care Analysis and Reporting System (AFCARS). She represented the state child welfare agency for AFCARS, NCANDS, the Multi-State National Foster Care Data Archives Project, the Foster Care Longitudinal Event History Evaluation Project, the National Association for Welfare Research and Statistics, and the American Human Services Association Management Reporting Committee.

Texas Department of Human Services, Austin, TX (1974 to 1992)

Ms. Mettenburg was responsible for information for the Protective Services for Families and Children, Aged and Disabled Services, and Medicaid programs. She was responsible for data analysis and statistical information for Child Welfare and Child Protective Services, Adult Protective Services, and Child Care Licensing. She served as Section Leader, Program Statistics for Protective Services; Director, Program Information Section for Protective Services for Children, Aged and Disabled, and Medicaid (1987 to 1989); Director, Data Access Unit for Protective Services for Children, Aged and Disabled, and Medicaid (1984 to 1987); Director, Management Reporting Unit, Office of Programs Budget and Statistics (1980 to 1984); Director, Data Analysis Unit, Data Control and Analysis Division (1977 to 1980); and Statistical Clerk II, Social Services Budget Section, Budget Control and Analysis Division (1974 to 1977).

Awards and Professional Achievements

Federal Interagency Forum on Child and Family Statistics, 2008-present
Technical Advisory Group, Foster Care Longitudinal Event History Evaluation Project, 1993-1997
Technical Advisory Group, AFCARS

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Technical Advisory Group, Multi-State National Foster Care Data Archives Project, 1992-1997
Technical Advisory Work Group, NCANDS, 1991-1997
Board of Directors (1985-1997), President (1994), and Program Chairman (1986), National Association for Welfare Research and Statistics
Management Committee (1987-1989), Federal Reporting Committee (1980-1986), and Technical Advisor to Children, Family, and Adult Services Committee (1989-1991), American Public Welfare Association
Roundtable on Outcome Measures in Child Welfare Services (1993-2002)

Child and Adult Protective Services System (CAPS) Design Teams, Architectural Steering Committee, Management Report Design Committee
Adult Protective Services Workload Evaluation Time Study
Annie E. Casey Foundation Mental Health Initiative for Urban Children
Medicaid Systems Quality Review Team
Developmental Disability Council
Child Protective Service Welnet and Regional Database Committee
Performance Measurement Improvement Project for Child Protective and Aged and Disabled Services
Resource Outcome Modeling Project for Protective Services
Provider Information System Design Committee
SSMS Redesign Committee and Database Development Team
Social Services Block Grant, National Foster Care and Adoption System, and National Child Abuse and Neglect System

Publications, Technical Reports, and Presentations

Technical Reports

- Sedlak, A.J., Mettenburg, J., Basena, M., Petta, I., McPherson, K., Greene, A., and Li, S. (2010). *Fourth National Incidence Study of Child Abuse and Neglect: Report to Congress*. Washington, DC: Administration for Children and Families, U.S. Department of Health and Human Services.
- Sedlak, A., Mettenburg, J., Winglee, M., Ciarico, J., Basena, M., Rust, K., Shapiro, G., Goksel, H., Hartge, J., Park, K., and Clark, J. (2010). *Fourth National Incidence Study of Child Abuse and Neglect: Analysis report* (for Administration for Children and Families, U.S. Department of Health and Human Services). Rockville, MD: Westat.
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Presentations

Mettenburg, J., Brown, J., Ciarico, J., and McInturf, J. (2010). *Enhancing analytic capacity: What do you need to help drive performance?* 13th National Child Welfare Data and Technology Conference, Bethesda, MD.

Sedlak, A.J., Mettenburg, J., Schultz, D., and Cook, D. (2005, April). *Refining maltreatment definitions for the Fourth National Incidence Study of Child Abuse and Neglect (NIS-4)*. Biennial Meeting of the Society for Research in Child Development, Atlanta, GA.

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Jaymie Lorthridge, Ph.D.

Summary

Dr. Jaymie Lorthridge is a Westat Senior Study Director with more than 10 years of experience in the evaluation of community-based programs aimed at improving outcomes for families and children. At Westat, she is the evaluation lead for a site participating in the Permanency Innovations Initiative; she has contributed to evaluation plan development, created materials such as institutional review board applications and a logic model, and collaborated with site partners and child welfare departments to obtain administrative data. In previous work with the Los Angeles Department of Children and Family Services/Casey Family Programs and at the University of Southern California School of Social Work, Dr. Lorthridge was part of multidisciplinary teams that evaluated family preservation, child abuse prevention, and child care training programs and conducted research in areas such as health disparities and family strengthening factors. She also gained valuable experience in the field through a clinical internship at a child and family clinic, and through her work as a police officer in Atlanta, GA.

Education

Ph.D., University of Southern California School of Social Work, 2014
M.S.W., Community Organization, Planning, and Administration, University of Southern California School of Social Work, 2006
B.A., Psychology, Spelman College, 1998

Relevant Project Experience

Westat (2012 to Present)

Foster Youth Strategic Initiative

Client: Conrad N. Hilton Foundation

Project Overview: Westat is joined by two subcontractors to develop and implement an evaluation plan for the Foster Youth Initiative. The initiative promotes an environment of success for older foster youth by (1) increasing the self-sufficiency of transition-age youth through improved college and career readiness, stronger caregivers, and special services for high-risk youth; (2) strengthening collaboration and alignment throughout systems influencing foster youth outcomes; and (3) developing and disseminating knowledge for the field. The Westat team is evaluating progress toward the initiative's objectives by identifying and tracking systems-level outcomes. Data collection also includes review of grantee documents, analysis of program and system-specific administrative data, interviews with key decisionmakers and stakeholders, focus groups, and surveys, including a social network survey.

Responsibilities: Project manager. Dr. Lorthridge is responsible for day-to-day project management, including coordinating the work of the internal team and subcontractors, and completion and submission of deliverables. She led development and implementation of the work plan, prepared the initial logic model, and completed background research to inform the

initial evaluation plan. She developed and submitted the initial IRB package and amendments for Westat, and lead the writing of the first annual report for the client, and for the public, and contractually obligated progress report, and was responsible for development of the dashboard tool that is used by the client to assess achievement of project goals. Dr. Lorthridge also developed, with the support of a technical expert, a social network analysis survey for the project.

Michigan Title IV-E Waiver Demonstration Project, Protect MiFamily

Client: Michigan Department of Human Services

Project Overview: Michigan's Protect MiFamily Program provides an innovative array of prevention services to families with young children who are at high or intensive risk for maltreatment as determined by child protective services. The demonstration is being implemented by private agencies in Kalamazoo, Macomb, and Muskegon Counties. The Children's Bureau of the U.S. Department of Health and Human Services mandates an independent evaluation of each waiver demonstration project. Westat's activities involve evaluation plan and methodology development, including random assignment, statistical measurement, and analysis methodologies; implementation of process and outcome evaluations; primary and administrative data collection; outcome measurement and analysis; cost-benefit and cost-effectiveness analysis; and preparation of reports.

Responsibilities: Fidelity assessment task leader. Dr. Lorthridge was responsible for development and revision of the fidelity assessment instrument, assessment of interrater reliability, and creation of the analysis plan, as well as the design and delivery of fidelity data collection training. She oversees fidelity data collection and data quality assurance activities. She leads the cleaning, assessment, and reporting of fidelity data.

Evaluation of the Permanency Innovations Initiative (PII)

Client: Administration for Children and Families, U.S. Department of Health and Human Services (HHS)

Project Overview: Under the 5-year PII, the Children's Bureau has funded six grantees to develop and implement innovative interventions in their state or county child welfare systems to reduce long-term foster care and improve outcomes for children who experience serious barriers to permanency. Under a task order, Westat and its subcontractors are conducting cross-site and site-specific evaluations of the interventions. Activities include completing the designs of rigorous site-level evaluations (using randomized control groups wherever feasible), implementing the evaluations (monitoring the fidelity of the interventions and collecting primary data on proximal outcomes from treatment and comparison cases), collecting and analyzing administrative data on distal outcomes (children's exit from foster care and permanent placement), studying the implementation process, and conducting a cost study to assess the resource requirements of grantees' interventions. Two sites are in California.

Responsibilities: Evaluation lead for the RISE site. Dr. Lorthridge worked with RISE leaders based at the Los Angeles Gay and Lesbian Center and with project managers, the client, and the training and technical assistance partner to develop a summative evaluation plan for the organizational component of the intervention and to further develop a formative evaluation plan for the child and family component of the intervention, Care Coordination Team (CCT) services. RISE's multi-level interventions aim to reduce foster care placement and length of placement for gay, lesbian, bisexual, transgender, and gender-nonconforming children and youth in Los Angeles. As evaluation site lead Dr. Lorthridge created and refined the qualitative protocol initially used with minor participants, created and updated supporting materials such as a logic model, and participated in data collector hiring and development of training materials. Because of

the target population, RISE's evaluation procedures require extensive regulatory review. Dr. Lorthridge has created numerous IRB packages and amendments, court petitions, and child welfare agency research requests featuring complex assent and consent procedures. In addition, Dr. Lorthridge collaborated with local site partners and child welfare departments to secure administrative data and developed administrative data exchange procedures. She also coordinated forums to facilitate project collaboration and developed strategies for achieving evaluation buy-in by child welfare departments. Dr. Lorthridge oversees data collection, ensuring that the site adheres to pre-established quality standards, and is conducting a site-level case study to document implementation context.

Los Angeles Department of Children and Family Services (DCFS) and First 5 LA, Los Angeles, CA (2005 to 2012)

Process and Outcome Evaluation of the Partnerships for Families Initiative – Working with DCFS and First 5 LA, Dr. Lorthridge was part of a multidisciplinary team selected to evaluate a child maltreatment prevention initiative. She conducted a literature review for the year 1 process evaluation report, as well as theoretical research to guide revision of the evaluation plan. She also reviewed standardized assessment instruments and recommended instruments for use in the outcome evaluation, secured permission to use standardized instruments for the family survey, developed the survey for participating families, and created a survey script for interviewers.

Family Preservation Outcome Evaluation – Dr. Lorthridge was part of a multidisciplinary team evaluating one of the largest service pathways for the Los Angeles County child welfare system. She led content analysis and reporting of open-ended items from an employee survey and supported the analysis and reporting of programmatic costs.

Process and Outcome Evaluation of the Point of Engagement/Prevention Initiative Demonstration Project (PIDP) – Dr. Lorthridge prepared the IRB application, which served as the research protocol; refined the protocol for extracting PIDP data from DCFS case files; and planned tasks for and managed M.S.W. students during data extraction, ensuring quality control. In support of the Up Front Assessment (UFA), she developed a logic model, extracted data from interview transcripts using a grounded theory approach, and interpreted and reported findings to stakeholders involved with the county child welfare system. As part of a team, Dr. Lorthridge developed and pilot tested data collection instruments for multiple levels of staff. She was involved in developing a multimedia team training curriculum. In addition, she conducted staff interviews and focus groups, coordinated M.S.W. student participation in interviews and focus groups, provided notetaking support, transcribed and interpreted the data, and validated data through countywide evaluation meetings. She also provided a narrative translation of data for the final report, using a grounded theory approach; delivered oral and written presentations of findings to stakeholders; and prepared manuscripts for peer-reviewed publications.

University of Southern California School of Social Work, Los Angeles, CA (2006, 2010)

Preparing for Child Maltreatment Prevention: Identifying Community Assets and Parental Protective Factors – As part of her doctoral work, Dr. Lorthridge conducted a study

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of three communities in Los Angeles County and their public preschool population, using the Strengthening Families protective factors approach. She revised the standardized Protective Factors Survey (PFS) for use with a Spanish-speaking sample and then pilot tested, refined, and implemented the English and Spanish versions of the PFS. Using public data, she examined the quality of community assets in the areas of health care, local services such as grocery stores and transportation, employment, housing, mental health services, child care, schools, and recreation.

Analysis of Building Understanding Data: A Study of Transracial and Inracial Adoptive Families – For a graduate social work course, Dr. Lorthridge used secondary data to study the ethnic identity of transracially and inracially adopted children. She created a subsample database in SPSS, derived variables, analyzed data, and prepared a final paper.

Contract Researcher, Los Angeles/Pasadena, CA (2005 to 2007, 2008 to 2009)

LEGACY – Dr. Lorthridge joined a multidisciplinary team that had developed a public health intervention targeting disparities in prenatal and birth outcomes among African American women. The research team partnered with a faith-based institution to deliver a psychoeducational program and conduct a congregation-wide survey. Dr. Lorthridge was responsible for survey database maintenance, including codebook updating, data entry, derivation of variables, and data analysis.

Child Care Training Institute Evaluation, Los Angeles County Office of Education – In support of 2006 and 2007 outcome evaluations, Dr. Lorthridge created an SPSS database, entered survey data, derived variables, and provided analysis and interpretation. She edited the 2006 evaluation report and drafted the 2007 report.

Other Professional Experience

Intercommunity Child Guidance Center, Whittier, CA, 2004-2005 – As a clinical intern Dr. Lorthridge used assessment tools to document the presence of DSM classifiable issues along with clients' needs, and strengths. She then used the assessments to guide interventions for juvenile clients and their families based on cognitive behavioral techniques, advised school administrators and teachers on behavioral interventions, educated parents about developmental stages, tasks and needs of their children, facilitated agreements with parents and educational personnel in regards to appropriate disciplinary tactics and preventative measures.

City of Los Angeles Workforce Investment Board, Los Angeles, CA (2003 to 2004) – As a project program specialist supporting the city's Health Careers Ladder Program, Dr. Lorthridge created and maintained a participant database; developed, edited, and delivered the multimedia program curriculum; and presented oral and written reports to the Workforce Investment Board, the city council, and a project taskforce. She disseminated academic information to case managers, and coordinated and ran program orientations for participants and case managers. As part of the multidisciplinary project management team, Dr. Lorthridge oversaw daily program operations, which included immediate response to requests for information from funders and stakeholders. She worked with the taskforce workgroup to evaluate participants' future academic and remedial needs and to conduct a needs assessment to determine the financial aspects of

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remediation, the desired qualifications of remedial staff, locations for remediation, and alignment of vendor needs with budget forecasts.

Atlanta Police Department, Atlanta, GA (1998 to 2002) – Working as a police officer, Dr. Lorthridge responded to 911 calls for service and to citizen-initiated requests. She also assisted in obtaining goods and services for citizens in need of concrete supports.

Awards and Professional Achievements

Doris Duke Fellow for the Prevention of Child Abuse and Neglect, 2011-2012

Casey Family Programs Doctoral Scholar, 2010-2012

Grant Reviewer, W.M. Keck Foundation and California Community Foundation, 2011

Consultant Pool Member, First 5 LA, 2010-2011

Publications, Technical Reports, and Presentations

Publications

McCroskey, J., Pecora, P.J., Franke, T., Christie, C.A., and Lorthridge, J. (2012). Strengthening families and communities to prevent child abuse and neglect: Lessons from the Los Angeles Prevention Initiative Demonstration Project. *Child Welfare*, 91(2), 39-59.

Lorthridge, J., McCroskey, J., Pecora, P., Chambers, R., and Fatemi, M. (2012). Strategies for improving child welfare services for families of color: First findings of a community-based initiative in Los Angeles. *Children and Youth Services Review*, 34, 281-288.

McCroskey, J., Pecora, P.J., Franke, T., Christie, C., and Lorthridge, J. (2012). Can public child welfare help to prevent child maltreatment? Promising findings from Los Angeles. *Journal of Family Strengths*, 12(1), 1-23.

Technical Reports

McCroskey, J., Yoo, J., Lorthridge, J., Chambers, R., Carter-Williams, S., and Cienfuegos-Mercado, Y. (2010). *Improving child welfare practice in Los Angeles County: Implementing Point of Engagement and other Title IV-E waiver strategies* (for Los Angeles County Board of Supervisors and Department of Children and Family Services). Los Angeles, CA/Seattle, WA: Los Angeles County Department of Children and Family Services/Casey Family Programs.

McCroskey, J., Franke, T., Christie, T., Pecora, P.J., Lorthridge, J., Fleischer, D., and Rosenthal, E. (2010). *Prevention Initiative Demonstration Project: Year two evaluation report volume 1* (for Los Angeles County Board of Supervisors and Department of Children and Family Services). Los Angeles, CA/Seattle, WA: Los Angeles County Department of Children and Family Services/Casey Family Programs.

- McCroskey, J., Lorthridge, J., Kim, J., Chen, G., Fleischer, D., and Pecora, P.J. (2010). *Prevention Initiative Demonstration Project: Year two evaluation report volume 2: Profiles of PIDP networks* (for Los Angeles County Board of Supervisors and Department of Children and Family Services). Los Angeles, CA/Seattle, WA: Los Angeles County Department of Children and Family Services/Casey Family Programs.
- McCroskey, J., Christie, T., Lorthridge, J., Chambers, R., Pecora, P.J., Azzam, T., Fleischer, D., Rosenthal, E., Weisbart, A., Custodio, C., Franke, T., Nunn, P., Carter, S., Yoo, J., Bowie, P., and Wold, C. (2009). *Prevention Initiative Demonstration Project year one evaluation* (for Los Angeles County Board of Supervisors and Department of Children and Family Services). Los Angeles, CA/Seattle, WA: Los Angeles County Department of Children and Family Services/Casey Family Programs.
- Pecora, P.J., McCroskey, J., Lorthridge, J., Chambers, R., Franke, T., Christie, T., Azzam, T., Fleischer, D., and Carter Williams, S. (2009). *Midcourse lessons learned from the Los Angeles County Prevention Initiative Demonstration Project: Early successes, partnerships, and the challenges that lie ahead* (for Los Angeles County Board of Supervisors and Department of Children and Family Services). Los Angeles, CA/Seattle, WA: Los Angeles County Department of Children and Family Services/Casey Family Programs.

Presentations

- Brodowski, Boller, Lorthridge, J., and Rauner. (2012, September). *After you graduate: Opportunities outside the academy* (panel presentation). Doris Duke Fellowship for the Promotion of Child Well-Being Annual Meeting, Chapin Hall at the University of Chicago, Chicago, IL.
- Lorthridge, J., McCroskey, J., and Simon, J. (2011, August). *Involving front-line staff in child welfare research*. National Child Welfare Evaluation Summit, Washington, DC.
- McCroskey, J., Pecora, P., Franke, T., and Lorthridge, J. (2011, August). *The role of evaluation in fostering innovation* (panel presentation). National Child Welfare Evaluation Summit, Washington, DC.
- Pecora, P., Garrison, M., Armstrong, B., and Lorthridge, J. (2011). *Community-based approaches to strengthening families: The Prevention Initiative Demonstration Project (PIDP)*. Education and Learning Committee Meeting, LA Partnership for Early Childhood Investment, Los Angeles, CA.
- Lorthridge, J. (2011, February). *Identification of community and parental protective factors: A step towards preventing maltreatment in early childhood*. Project ABC National Conference, Strive to Thrive: Building Systems That Care for Birth to Fives, Los Angeles, CA.
- Pecora, P., McCroskey, J., Armstrong, B., and Lorthridge, J. (2010). *Community-based prevention of child abuse and neglect: The Los Angeles Prevention Initiative Demonstration Project (PIDP)* (invited). Casey Family Programs and the University of Washington School of Social Work, Seattle, WA.

McCroskey, J., Christie, C., Chambers, R., Azzam, T., and Lorthridge, J. (2009, November). *Findings from the first year evaluation of LA County's Prevention Initiative Demonstration Project (PIDP)*. A New Beginning for Partnerships for Children and Families in Los Angeles County, 14th Annual Partnerships Conference, Los Angeles, CA.

McCroskey, J., Chambers, R., and Lorthridge, J. (2009, November). *Multiple stakeholder evaluation: An essential component for transforming child welfare systems*. Council on Social Work Education 55th Annual Program Meeting, San Antonio, TX.

McCroskey, J., Azzam, T., Christie, C., Icenhower, K., Lorthridge, J., and Marts, E. (2009). *A new approach to preventing child abuse and neglect*. Chadwick Center for Children and Families at Rudy Children's Hospital—San Diego International Conference on Child and Family Maltreatment, San Diego, CA.

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Gail M.L. Thomas

Summary

Gail Thomas is a Westat Senior Study Director with 15 years of experience managing and conducting multimode process and outcome data collections involving at-risk youth, clergy, and the elderly. Ms. Thomas has helped develop and test instruments, trained and directed field staff for quantitative and qualitative studies, and advanced data collection quality and production. She served as field director for both the Assessment and Evaluation of the Tennessee Subsidized Guardianship Waiver Demonstration Project and the Assessment and Evaluation of the Wisconsin Subsidized Guardianship Initiative. Currently, she is a task leader for the Association of American Universities Campus Climate Survey on Sexual Assault and Sexual Misconduct and provides service data analysis for the process evaluation of the Michigan IV-E Waiver Evaluation, Protect MiFamily. Since 2010, she has been the field director for Spirited Life, the Clergy Health Initiative's multiyear health and wellness program and behavioral health study for pastors, a project of the Divinity School of Duke University. Ms. Thomas was the project director for the Clergy Health Initiative Longitudinal Study in 2010, 2012, and 2014. In 2013, she was project director for the Congregational Decision-Making About Clergy Compensation Study for Duke University's School of Sociology and the Lilly Endowment. She also served as field director for the Family Finding Evaluation. Ms. Thomas has helped develop and test instruments, trained and directed field staff for quantitative and qualitative studies, and provided oversight of data collection quality and production.

Education

M.A., Human Sciences, Hood College, 2014

Postbaccalaureate Certificate, International Business, Georgetown University, 1993

B.A., News-Editorial Journalism, University of Wisconsin, 1976

Relevant Project Experience

Westat (2000 to Present)

AAU Campus Climate Survey on Sexual Assault and Sexual Misconduct

Client: Association of American Universities (AAU)

Project Overview: AAU is supporting its member universities in developing their own coordinated responses to preventing and responding to sexual misconduct on campus by sponsoring the development of a survey that measures the incidence and prevalence of sexual misconduct and the campus "climate" around it. Westat is assisting AAU by developing this web-based survey, promoting and administering it at participating universities, and analyzing the data. The survey is being tested with samples of students at several AAU member universities before full implementation.

Responsibilities: Responsible for obtaining Federal NIH Certificate of Confidentiality for Westat and the 27 participating universities. Task manager for survey promotion, co-led

development of customizable promotion campaign materials for schools, including poster images, radio spots and social media. Campaign materials were tailored to address a range of attitudes toward survey subject.

Michigan Title IV-E Waiver Demonstration Project, Protect MiFamily

Client: Michigan Department of Human Services

Project Overview: Michigan's Protect MiFamily Program provides an innovative array of prevention services to families with young children who are at high or intensive risk for maltreatment as determined by child protective services. The demonstration is being implemented by private agencies in Kalamazoo, Macomb, and Muskegon Counties. The Children's Bureau of the U.S. Department of Health and Human Services mandates an independent evaluation of each waiver demonstration project. Westat's activities involve evaluation plan and methodology development, including random assignment, statistical measurement, and analysis methodologies; implementation of process and outcome evaluations; primary and administrative data collection; outcome measurement and analysis; cost-benefit and cost-effectiveness analysis; and preparation of reports.

Responsibilities: Ms. Thomas plans, reports, and provides analysis of service data for the process evaluation area of the demonstration. She set up the e-Deca and Protective Factors Database and trained site liaisons to use these applications. She also developed social worker guidelines for administering study instruments.

Clergy Health Initiative Survey

Client: Duke Divinity School

Project Overview: The purpose of the Clergy Health Initiative is to assess, track, and improve the physical, spiritual, and emotional health of United Methodist Church (UMC) clergy in North Carolina. As a subcontractor, Westat conducted a longitudinal, multimode survey of all UMC clergy in North Carolina. Findings from the 2008 baseline survey led to the creation of Spirited Life, a multiyear health and wellness program and behavioral health study for UMC pastors. The survey was repeated in 2010, 2012, and 2014.

Responsibilities: Deputy project director (2008) and project director (2010, 2012, and 2014).

Clergy Health Initiative Data Collection and Tracking

Client: Duke Divinity School

Project Overview: The Clergy Health Initiative is testing the impact of Spirited Life, a multiyear health coaching and wellness program, on the health and well-being of United Methodist ministers in North Carolina. Approximately 350 pastors have been randomly assigned to participate in each cohort (2011, 2012, or 2013), with the later cohorts serving as a control for the first cohort. Data collection includes web surveys and health screenings every 9 months. Westat tracks participant progress in fulfilling program requirements, prompts participants to complete surveys and sign up for health screenings and workshops, tracks blood collection, and cleans and merges participant and medical provider data. Westat also designed a case management system that Duke health coaches use to track pastors' progress in meeting health goals.

Responsibilities: Field director.

Congregational Decision-Making About Clergy Compensation

Client: Lilly Endowment

Project Overview: Westat assisted the Duke University School of Sociology in surveying Protestant pastors and lay leaders about clergy compensation in their churches. The survey was

first conducted in 2011 with a sample of 100 congregations from 14 Protestant denominations in three North Carolina counties. In 2013, a second site (Allen County, IN) was added, with a sample of 85 congregations in 15 Protestant denominations. Within each church, Westat conducted in-person interviews with the head clergy member, as well as telephone interviews with lay leaders formally involved in clergy compensation decisions. The surveys were qualitative and all interviews were recorded.

Responsibilities: Field director/acting project director (2011) and project director (2013). Ms. Thomas was involved in all aspects of preparing the project for the field and was responsible for all aspects of project performance.

Data Collection for the Family Finding Evaluation

Client: Duke Endowment

Project Overview: From 2009 to 2013, Westat assisted in evaluating Family Finding, an intensive family search program that tries to reconnect children in foster care with blood relatives. Westat conducted in-person interviews with youth (aged 14-22) who were in, or had recently exited, foster care and who were randomly assigned to either the Family Finding treatment group or a control group. Westat field interviewers used a CAPI interview with an ACASI component to interview youth 12 and 24 months after random assignment. The instrument collected youth outcome data in the domains of social support, mental and physical health, education, employment, and risk behaviors.

Responsibilities: Field director.

Assessment and Evaluation of the Tennessee Subsidized Guardianship Waiver

Demonstration Project

Client: Tennessee Department of Children's Services

Project Overview: Under Title IV-E Waiver authority, Tennessee used Federal funds to test whether a subsidized guardianship benefit would increase permanence for children and improve child outcomes. Working as a subcontractor, Westat randomly assigned children to treatment (eligible for subsidized guardianship) and control groups and administered a telephone survey in which caregivers were asked about the factors influencing their permanence decisionmaking. The project included an outcome evaluation to estimate impact on permanence, safety, stability, and child well-being; a process study; and a cost analysis.

Responsibilities: Field director. Ms. Thomas directly supervised field staff in all aspects of data collection. She managed sample release to the field and oversaw productivity and data quality.

Assessment and Evaluation of the Wisconsin Subsidized Guardianship Initiative

Client: Wisconsin Department of Health and Family Services

Project Overview: Under Title IV-E Waiver authority, Wisconsin used Federal funds to test whether a subsidized guardianship benefit would increase permanence for children and improve child outcomes. Westat and two subcontractors conducted a longitudinal study of the status and outcomes of children and families, using a treatment group (eligible for subsidized guardianship) and a control group. The contractors interviewed caregivers at enrollment and collected administrative data on outcomes, case history, and case planning. The study included an outcome evaluation to estimate the impact on permanency, safety, stability, and child well-being; a process evaluation to understand the context in which outcomes exist; and a cost analysis to estimate savings accrued by subsidized guardianship.

Responsibilities: Field manager. Ms. Thomas directly supervised field interviewers. She wrote the field manual and co-led the training. She oversaw productivity, sample release, and data collection quality.

Study of Services for Children and Families in Palm Beach County

Client: Palm Beach County (FL) Children's Services Council

Project Overview: Westat worked with Chapin Hall Center for Children on this longitudinal study, which followed 500 families over a 5-year period. Mothers were recruited in the four neediest target geographic areas soon after they gave birth. Westat conducted annual in-person interviews for 5 years, as well as intermediate 6-month telephone interviews. Interviews were conducted in English, Spanish, and Creole.

Responsibilities: Field director. Ms. Thomas worked closely with field staff, overseeing productivity and the work quality of individual interviewers and managing sample releases.

Program Evaluation Activities and Related Services

Client: Corporation for National and Community Service (CNCS)

Project Overview: The purposes of this task order contract were to conduct policy evaluations and descriptive studies and to provide analytic and technical support services for CNCS. Westat undertook more than 40 tasks. This work included web-based and telephone surveys of program participants, full-scale program evaluations, case studies, database quality assessments, and other activities to evaluate CNCS programs such as AmeriCorps, Senior Corps, Retired and Senior Volunteer Program, Foster Grandparents, and VISTA. Westat also analyzed CNCS's field management organizational structure and helped CNCS develop program performance objectives required under GPRA.

Responsibilities: Operations manager. Ms. Thomas coordinated and directed the administration of three PAPI surveys [The Independent Living Survey (2005, 2006); The Mentoring Children Survey (2005)] by telephone to service recipients of two Senior Corps' programs. Ms. Thomas collaborated on instrument development for the surveys, identifying key issues and writing questions. She developed survey protocols and acted as lead trainer for the surveys.

Neighborhood Survey for the Duke Endowment Child Abuse Prevention Initiative

Client: Duke Endowment

Project Overview: The Duke Endowment funded two projects (the Durham Family Initiative in North Carolina and the Strong Communities project in South Carolina) that implemented strategies to change attitudes toward children and families at the individual, community, and policy levels. As part of the evaluation of the projects, Westat completed a 2004 baseline household survey of a random sample of community residents in the two intervention counties and in comparison counties. In 2007, Westat conducted a followup survey in these neighborhoods to measure change over time.

Responsibilities: Field director. Ms. Thomas directly supervised the field supervisor and 25 field interviewers. She wrote the field manual, co-led the training, and oversaw productivity and data collection quality.

Awards and Professional Achievements

Outstanding Graduate Student Award for the Human Sciences Program, Hood College, 2014-2015

Publications, Technical Reports, and Presentations

Publications

Schneider, S., Burke-Garcia, A., and Thomas, G. (2015). Facebook as a tool for respondent tracing. *Survey Practice*, 8(2). doi:<http://www.surveypractice.org/index.php/SurveyPrac>

Technical Reports

Thomas, G. (2014). *Report on the 2014 Clergy Health Initiative Survey, Round 4* (for Duke Divinity School). Rockville, MD: Westat.

Thomas, G. (2013). *Report on round 2 field data collection for Child Trends' Evaluation of the North Carolina Family Finding Program* (for Child Trends). Rockville, MD: Westat.

Thomas, G. (2012). *Report on baseline field data collection for Child Trends' Evaluation of the North Carolina Family Finding Program* (for Child Trends). Rockville, MD: Westat.

Thomas, G. (2012). *Report on the 2012 Clergy Health Initiative Survey, Round 3* (for Duke Divinity School). Rockville, MD: Westat.

Thomas, G. (2012). *Report on baseline field data collection for Child Trends' Evaluation of the North Carolina Family Finding Program* (for Child Trends). Rockville, MD: Westat.

Thomas, G. (2011). *Report on a Survey of the Thriving Rural Communities Initiative and Thriving Latino/Hispanic Communities Initiative* (for Center for Assessment and Policy Development). Rockville, MD: Westat.

Thomas, G. (2011). *Report on the 2010 Clergy Health Initiative Survey, Round 2* (for Duke Divinity School). Rockville, MD: Westat.

Thomas, G., Silva, P., Kline, A., and Thomas, C. (2005). *Public report on the results of the 2005 Mentoring Children Survey of the Foster Grandparents Program* (for Corporation for National Service). Rockville, MD: Westat.

Thomas, G., Silva, P., Kline, A., and Thomas, C. (2005). *Public report on the results of the 2005 Independent Living Survey of the Senior Companion Program* (for Corporation for National Service). Rockville, MD: Westat.

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Karla Eisen

Summary

Karla Eisen is a Westat Senior Study Director with more than 20 years of experience in research and program evaluation as well as direct service provision for civilian, Native American Indian, juvenile justice, military, and social service programs. Her areas of expertise include qualitative approaches to data collection and analysis as well as survey operations. She has experience in program evaluation, case studies, ethnographic methods, instrument design, and field data collection. Ms. Eisen also uses computer-assisted qualitative data analysis software, primarily NVivo, in her analytic work and has presented on the subject at conferences nationally and internationally. In addition, she has significant content matter expertise on a wide variety of social issues. Some of the content areas in which she has worked include child welfare systems, child abuse and neglect; juvenile justice; Indian Country corrections, treatment and prevention of alcohol, tobacco, and other drug abuse; and maternal and child health care. Ms. Eisen also has direct clinical experience as a social worker in family-centered health care and substance abuse treatment programs for pregnant and parenting women and children at risk for HIV/AIDS. She was involved in public education, training, and technical assistance for personnel working with these populations.

Education

M.P.H., Johns Hopkins School of Hygiene and Public Health, 1994

M.S.W., Hunter College School of Social Work, 1988

B.A., Human Development and Social Relations, Earlham College, 1986

Relevant Project Experience

Westat (1999 to Present)

National Child Welfare Capacity Building Center for Tribes (CBCT)

Client: Administration for Children and Families, U.S. Department of Health and Human Services (HHS)

Project Overview: A service of the Children's Bureau, CBCT serves as the focal point for coordinated and culturally competent training and technical assistance to Title IV-B and IV-E programs in American Indian and Alaska Native Nations. CBCT works collaboratively with other supported initiatives to support tribes in achieving sustainable, systemic change that results in greater safety, permanency, and well-being for children, youth, and families. As a subcontractor, Westat is primarily responsible for developing tools, processes, and data management systems that reflect Constant Quality Improvement for tribes receiving services from the Center.

Responsibilities: Ms. Eisen serves as the project director. She is responsible for managing all aspects of the work and serves on the Executive Steering Committee and the Cross Center Collaborative teams.

Michigan Title IV-E Waiver Demonstration Project, Protect MiFamily

Client: Michigan Department of Human Services

Project Overview: Michigan's Protect MiFamily Program provides an innovative array of prevention services to families with young children who are at high or intensive risk for maltreatment as determined by child protective services. The demonstration is being implemented by private agencies in Kalamazoo, Macomb, and Muskegon Counties. The Children's Bureau of the U.S. Department of Health and Human Services mandates an independent evaluation of each waiver demonstration project. Westat's activities involve evaluation plan and methodology development, including random assignment, statistical measurement, and analysis methodologies; implementation of process and outcome evaluations; primary and administrative data collection; outcome measurement and analysis; cost-benefit and cost-effectiveness analysis; and preparation of reports.

Responsibilities: Process Evaluation Lead. Ms. Eisen Process evaluation lead. Ms. Eisen leads the process evaluation, which includes a fidelity assessment of the program model, a family satisfaction survey, service data analysis, review of agency documentation and on site data collection and analysis of interview and focus group data. leads the process evaluation which includes a fidelity assessment of the program model, a family satisfaction survey, service data analysis, review of agency documentation and on site data collection and analysis of interview and focus group data.

Tasks to Assess Mental Health Care Provided to Veterans of Iraq and Afghanistan

Client: U.S. Department of Veterans Affairs (VA)

Project Overview: As a subcontractor to the Institute of Medicine, Westat is conducting a project to assess the quality of mental health care provided to veterans of Iraq and Afghanistan (Operation Enduring Freedom, Operation Iraqi Freedom, and Operation New Dawn). Westat is (1) designing and administering a survey to assess barriers to VA mental health services, by comparing veterans who have used the VA system for mental health care with VA-eligible veterans who have not, and (2) designing and conducting site visits to all 21 Veterans Integrated Service Networks (VISNs) to determine the quality of the mental health care provided and learn why some eligible veterans are not seeking these services. Westat is responsible for sampling frame development and sample selection; survey development, deployment, and tracking; site visit and focus group development and coordination; and data processing, analysis, and reporting.

Responsibilities: Site visit team leader. Ms. Eisen is conducting site visits to four VISNs. She will conduct an environmental scan to identify community services and providers, conduct interviews with community providers and Veterans Administration staff, and run focus groups with veterans. Ms. Eisen will provide briefings to the IOM as necessary and develop analytic reports of each visit.

Evaluation of the Permanency Innovations Initiative (PII)

Client: Administration for Children and Families, U.S. Department of Health and Human Services (HHS)

Project Overview: Under the 5-year PII, the Children's Bureau has funded six grantees to develop and implement innovative interventions in their state or county child welfare systems to reduce long-term foster care and improve outcomes for children who experience serious barriers to permanency. Under a task order, Westat and its subcontractors are conducting cross-site and site-specific evaluations of the interventions. Activities include completing the designs of rigorous site-level evaluations (using randomized control groups wherever feasible), implementing the evaluations (monitoring the fidelity of the interventions and collecting primary data on proximal

outcomes from treatment and comparison cases), collecting and analyzing administrative data on distal outcomes (children's exit from foster care and permanent placement), studying the implementation process, and conducting a cost study to assess the resource requirements of grantees' interventions. Two sites are in California.

Responsibilities: Evaluation site lead. Using a randomized controlled design, Ms. Eisen is developing an evaluation plan for a multiprong intervention aimed at reducing foster care placement and length of placement for children. She assisted in designing data collection instruments, logic models, IRB applications, and quality assurance tools. Ms. Eisen worked with the site to secure administrative data and is conducting a site-level case study to document the implementation context. She collaborates with project staff and training and technical assistance partners in reviewing implementation plans and protocols.

Survey of Jails in Indian Country

Client: Bureau of Justice Statistics (BJS)

Project Overview: For the 2007 to 2011 Surveys of Jails in Indian Country, Westat collected data from more than 80 correctional facilities operated by tribal authorities or BIA. Westat is also the data collector for the 2012 and 2015 surveys. Westat is working with BJS to ensure that all facilities are listed, conducting the mail surveys, holding meetings with tribal leaders and stakeholders to discuss ways of improving the survey, and preparing written recommendations for improvement. Project staff also conduct analyses comparing Indian jails to similar rural jails on key factors such as capacity and staffing.

Responsibilities: Project director. Ms. Eisen oversees data collection, validation, and data tracking. She supervised development of validation reports. As data manager for the 2009 collection, she assisted with these tasks.

American Community Survey (ACS) Cognitive Testing

Client: U.S. Census Bureau

Project Overview: The American Community Survey and Puerto Rico Community Survey are conducted by the U.S. Census Bureau and provide a rich source of information for Federal agencies and for state and local governments. Under an R&D task order contract with the Census Bureau, Westat will test updated questions on cohabitation/domestic partnership, race and Hispanic origin, health insurance premiums and subsidies, telephone service, computer and Internet use, commuting mode, time of arrival at work, number of weeks worked, class of worker, industry and occupation, and retirement income. Westat and a subcontractor will conduct more than 400 cognitive interviews in English and Spanish over three rounds of testing, summarize and analyze the interviews, and report the findings from each round of testing.

Responsibilities: Database manager and analyst. Ms. Eisen was responsible for constructing and managing the data base for large volumes of qualitative data using the NVivo software, importing and linking quantitative attributes, merging databases routinely from multiple coders, coding data, and producing analytic reports. She assisted in the development of codable note templates, thematic coding structures, training coders, and providing technical assistance on use of the software and coding.

Understanding Urban American Indians' Interactions with ACF Services and Programs

Client: Office of Research, Policy, and Evaluation and Administration for Native Americans, Administration for Children and Families (ACF), U.S. Department of Health and Human Services (HHS)

Project Overview: This exploratory study was conducted to better understand the context for family self-sufficiency among low-income Alaska Natives and American Indians living in urban areas and their interactions with services and programs offered by ACF. Westat reviewed current literature on urban American Indians, convened a technical working group to provide input on the research design, and completed in-depth telephone interviews with directors of 34 Urban Indian Centers across the United States. Project deliverables included a comprehensive review of current literature and a report summarizing findings and recommendations from the in-depth interviews.

Responsibilities: Ms. Eisen conducted interviews and assisted in the thematic analysis of the data.

Planning and Design Options for Evaluation of the Long-Term Foster Care Initiative (Permanency Innovations Initiative)

Client: Administration for Children and Families, U.S. Department of Health and Human Services (HHS)

Project Overview: Under this 5-year initiative, the Children's Bureau funded six grantees to develop and implement innovative interventions in their state or county child welfare systems to reduce long-term foster care and improve outcomes for children who experience serious barriers to permanency. During this planning year, Westat and its subcontractors designed a comprehensive evaluation plan for the initiative. The evaluation team coordinated with grantees to formulate site-specific evaluation plans (including identifying their target populations, interventions, comparison groups, and outcome measures; conducting evaluability assessments of these plans; developing instruments; and obtaining necessary IRB clearances). Additionally, the evaluation team designed a cross-site evaluation plan and generated resource estimates for evaluation activities during future years of the initiative.

Responsibilities: Site team leader for a grantee. Ms. Eisen oversaw evaluability assessment, developed evaluation plans, and provided evaluation technical assistance.

National Evaluation of the Safe Kids/Safe Streets Program

Client: Office of Juvenile Justice and Delinquency Prevention, U.S. Department of Justice (DOJ)

Project Overview: Under this grant, Westat conducted a process and impact evaluation of five sites funded under the Safe Kids/Safe Streets Initiative. The evaluation examined the strategies undertaken to build comprehensive community collaboratives; to plan, implement, and sustain large system reform initiatives; to examine outcomes of such reforms at the community, system, agency, family, and child level; and to ensure successful programs. Project staff provided technical assistance to local evaluators and stakeholders to improve the capability and utility of local data systems and to develop the capacity of program sites to evaluate what works in their communities. The methodologies used included a case study approach to document program experiences and results and cross-site approaches to measure results through interviews with key informants, stakeholders, and agency personnel; the collection of administrative data; and abstracting of outcome data on child abuse cases in the records of multiple agencies.

Responsibilities: Senior research associate. Ms. Eisen served as site coordinator for two sites, including a Native American Indian/Tribal Nation site. She was responsible for data collection, annual case studies, and evaluation technical assistance. For the key informant task, she designed interviews, trained interviewers, and was responsible for analysis and report writing. She presented study findings at national conferences.

Effects of Multiple Deployments on Military-Dense Communities

Client: Institute of Medicine (IOM), National Academy of Sciences

Project Overview: IOM is undertaking a large study to determine the physical and mental health and other readjustment needs of members and former members of the Armed Forces who were deployed in Operation Enduring Freedom (OEF) or Operation Iraqi Freedom (OIF) and of their families and communities. Westat was involved in the Community Subgroup component, which used qualitative methods to understand what issues had emerged in these communities as a result of multiple deployments, how the communities responded to the changes, what emerging challenges were most problematic for these communities, and what, if any, assistance they needed to move forward. The ethnographic data collection strategy included site visits to six communities near large military bases from which service members were deployed multiple times in support of OIF/OEF.

Responsibilities: Site lead. Ms. Eisen served as senior ethnographer on one site visit and assisted in writing the site report.

Tribal Crime Data Collection, Analysis, and Estimation Project

Client: Bureau of Justice Statistics, U.S. Department of Justice (DOJ)

Project Overview: The lack of tribal crime data in the FBI's Uniform Crime Reporting program means that tribes are unable to receive direct grant awards under the Edward Byrne Memorial Justice Assistance Grant program, which supports state and local activities to prevent and control crime and improve the criminal justice system. Westat established and met with tribal advisory groups, collaborated with the FBI and other branches of law enforcement to establish data requirements, and provided training and technical assistance to improve data reporting.

Responsibilities: Senior research associate. Ms. Eisen assisted with and participated in two training conferences on Uniform Crime Reporting tailored to representatives of tribal law enforcement and justice systems.

Analyses and Use of Qualitative Survey Responses

Client: TRICARE Management Activity (TMA), U.S. Department of Defense (DOD)

Project Overview: Westat reviewed, coded, and analyzed respondent data provided in open-ended and free-text format on surveys of participants in the military health system. Deliverables included quarterly and final summative project reports, executive-level briefings, and recommended action plans for TMA.

Responsibilities: Ms. Eisen worked with a team of analysts to review, code, and analyze open-ended comments on TRICARE surveys. She also managed an NVivo qualitative database and produced reports.

Upper Columbia River Tribal Use and Consumption Survey

Client: U.S. Environmental Protection Agency (EPA)

Project Overview: This project was conducted by EPA and the Colville Confederated Tribes (CCT) to quantify exposures to local resources (foods, medicines, and materials used to produce clothing, ornaments, and infrastructure). Westat was responsible for overall study development, including study design and sampling strategies, data collection instruments, forms and procedures, and training of CCT interviewers. Data collection involved up to five in-person visits, with up to four administrations of a dietary recall assessment. Under a more recent contract, Westat continues to revise and refine the final report and databases, after input from all interested parties.

Responsibilities: Field director. Ms. Eisen oversaw development of data collection procedures, automated data tracking systems, training of field supervisor and field interviewers, and ongoing data monitoring.

Comprehensive Review to Assess the Don't Ask, Don't Tell (DADT) Rule

Client: U.S. Department of Defense (DOD)

Project Overview: Westat administered an extensive review of the DADT policy, a law that barred openly gay soldiers from the military. This review obtained the views of 400,000 military personnel and 150,000 spouses from surveys, town hall meetings, focus groups, and confidential communications. Westat developed a comprehensive coding scheme and conducted analysis using NVivo 8. Westat provided a final report describing methods and analytic results.

Responsibilities: Senior research associate. Ms. Eisen worked on the qualitative analysis team, primarily as the manager of the NVivo database. She set up databases from a variety of qualitative sources (focus groups, online chat sessions, and emails) and tied them into quantitative attribute data. She structured and ran reports for the analytic team and also assisted in developing the coding scheme and interpreting findings.

Fourth National Incidence Study of Child Abuse and Neglect (NIS-4)

Client: Administration for Children and Families, U.S. Department of Health and Human Services (HHS)

Project Overview: The NIS-4 gathered data on all children investigated by the child protective services (CPS) agencies in a nationally representative sample of 122 counties, as well as on children identified by nearly 10,800 professional staff in almost 1,100 other community agencies. These other agencies included county sheriff's offices; county departments of juvenile probation, health, and public housing; municipal police departments; hospitals; public schools; daycare centers; shelters; and voluntary social services and mental health agencies. Study cases were reviewed to eliminate duplicates, evaluated to ensure that they met the study's standardized definitions of abuse and neglect, and weighted to represent all maltreated children in the nation. The NIS-4 also included several allied surveys to enhance the quality and interpretability of the main study's findings and to examine how the NIS results relate to National Child Abuse and Neglect Data System (NCANDS) statistics.

Responsibilities: As senior recruiter, Ms. Eisen gained the cooperation of state and county CPS agencies. She explained complex research and sample design issues and facilitated full compliance in all study activities from multiple agency levels over a multiyear period. She also completed applications to state and agency IRBs as needed to ensure their participation. In addition, Ms. Eisen was the senior interviewer for the Study of Screening Practices survey, which involved in-depth structured telephone interviews to identify CPS screening criteria. She was also part of the team responsible for developing a pilot test of data collection forms during the NIS-4 planning project.

Inventory and Evaluation of Clinical Research Networks

Client: National Center for Research Resources, National Institutes of Health (NIH)

Project Overview: This project was part of the NIH Roadmap initiative to improve the speed and effectiveness with which basic scientific discoveries are translated into clinical products and practices that improve health care. Westat (1) oversaw development of an inventory and database of all clinical research networks sponsored by the Federal Government, industry, foundations, and other governments, for posting on the web; (2) designed and conducted surveys of a sample of networks to describe existing practices and described these practices; (3) coordinated the

nomination and selection of network best practices; and (4) planned and facilitated a National Leadership Forum for 500 invited participants, to review project findings. Westat maintained the inventory of networks and funded small grants related to network collaboration.

Responsibilities: Ms. Eisen was part of the team responsible for identifying clinical research networks for the inventory and conducting in-depth descriptive interviews with network leaders both nationally and internationally. Using NVivo software, she served as the senior qualitative analyst of open-ended survey data. Ms. Eisen contributed to the analysis plan and coding structure and developed reports of qualitative data. Based on her experience, she coauthored a paper on the use of NVivo software for the analysis of in-depth interviews.

Evaluation of the HHS National Network of Tobacco Cessation Quitlines Initiative

Client: National Cancer Institute (NCI)

Project Overview: NCI and CDC are collaborating with state tobacco control programs and other partners to implement the National Network of Tobacco Cessation Quitlines, an HHS initiative to ensure access to quitline services for all Americans. Westat conducted a process evaluation and designed an outcome evaluation of this initiative. Contract activities included refining a logic model and evaluation plan, designing and conducting primary and secondary analyses of implementation data, and designing a detailed plan for a multiphase outcome evaluation. Westat also conducted a case study of the early planning and development phases of the initiative.

Responsibilities: Ms. Eisen was the senior qualitative interviewer and analyst for the case study. She conducted in-depth interviews with key informants representing government and private agencies. Ms. Eisen developed thematic categories, used NVivo software to analyze interview data, and wrote key analytic sections of the case study report. She also conducted in-depth structured interviews with senior staff involved in tobacco control as part of the process evaluation.

New York Prevalence Study of Sexually Exploited Youth

Client: New York State Office of Children and Family Services

Project Overview: The objectives of the prevalence study were to identify the number of commercially exploited children and their unique needs, examine the types of programs and services that best meet those needs, and review the capacity of the current children's service system. Using a prospective research design, Westat collected data from agencies most likely to come into contact with commercially sexually exploited children, including municipal and county law enforcement agencies, congregate foster care facilities, child advocacy centers, detention centers, probation offices, runaway and homeless youth programs, shelters, street outreach agencies, and other youth-serving agencies. Data were collected for a 2-month reference period and examined to ensure that cases fit the study definition. Data were then weighted to represent New York City and the sampled upstate counties and a full year.

Responsibilities: Ms. Eisen conducted qualitative interviews with agency staff, analyzed qualitative data, and summarized results for the final report.

Medicare Advantage CAHPS

Client: Centers for Medicare & Medicaid Services (CMS)

Project Overview: For 9 years, Westat was the prime contractor for the Medicare Advantage CAHPS, which annually collects information from approximately 190,000 beneficiaries enrolled in and recently disenrolled from Medicare Advantage plans. The survey provided information on members' experiences with various aspects of the plans. The survey component was conducted

by mail with telephone followup. Westat and a subcontractor conducted the survey, processed the results, and prepared consumer reports. The contract also included work on adjusting the survey results to account for demographic differences in plan enrollment, developing reporting materials for group purchasers, and analyzing survey results by population subgroup.

Responsibilities: Ms. Eisen contributed to two qualitative studies on the experiences of Medicare managed care enrollees. For a study to explore California Medicare Advantage (MA) enrollees' relatively low rating of their plans, the project team conducted cognitive interviews involving items on the MA CAHPS instrument, but within the context of a small group of beneficiaries. Ms. Eisen's responsibilities included project design, site selection, instrument development, data collection and analysis, and final report preparation. Ms. Eisen was co-task leader on the second study, which explored in greater depth the influence of community context on MA enrollees' satisfaction with their plans at four sites. Using rapid ethnographic assessment techniques (including in-depth interviews and focus groups with beneficiaries and caregivers), the study team examined medical and support services at each site, the extent to which enrollees were aware and made use of services, and community factors that impeded or facilitated efforts to receive medical care.

Survey of Youth in Residential Placement (SYRP)

Client: Office of Juvenile Justice and Delinquency Prevention, U.S. Department of Justice (DOJ)

Project Overview: Westat conducted the first national SYRP, which involved interviews with youth in residential facilities under juvenile justice authority. This survey was the first to apply ACASI interviewing in a group context by administering the ACASI to groups of up to 10 youth in order to complete a substantial number of interviews during relatively short facility visits. Westat revised the ACASI instrument developed under its earlier SYRP planning and design project and refined the sampling plan and study procedures for this national implementation. Over a 12-week period, interviews were completed with over 7,000 youth in more than 200 facilities nationwide, obtaining their self-reports about their backgrounds, offenses, needs (emotional, substance abuse, educational, health), services received, conditions of confinement, and experiences in custody.

Responsibilities: Ms. Eisen was the senior recruiter responsible for gaining the cooperation of state and county juvenile justice agencies. She explained complex research and sample design issues and facilitated full compliance with all study activities from multiple agency levels.

Evaluation of the Youth Opportunity (YO) Grant Initiative

Client: Employment and Training Administration, U.S. Department of Labor (DOL)

Project Overview: Westat was part of the team that conducted a 5-year study to evaluate the YO Grant Initiative, a program that provides a comprehensive range of services for in-school and out-of-school youth aged 14 to 21. The project included surveys in 36 YO areas to examine employment, educational attainment, and other factors in each community at program implementation and at subsequent points; process analyses of each area's program to document the service delivery process, including an analysis of management information systems data; analyses of data from the Decennial Census and the American Community Survey to define comparison areas and track changes in those areas between 2000 and 2003-2004; and ethnographic studies of community well-being in each area. As a key subcontractor, Westat conducted three waves of area surveys, participated in the process analysis, and provided staff for process and ethnographic site visits. Westat was also responsible for mapping, sampling, data preparation, and database development.

Responsibilities: Ms. Eisen was part of the process evaluation team and conducted several site visits in the final year of the project.

Communications and Social Marketing Support Services: Program Information for Persons Who Are Homeless

Client: Centers for Medicare & Medicaid Services (CMS)

Project Overview: The objectives of this task order were to compile information about basic eligibility requirements for various Federal programs and to make this information understandable and accessible to homeless people, service providers, and CMS Regional Office staff. Westat and two other contractors conducted an environmental scan and exploratory consumer research, developed and tested materials, prepared a dissemination plan and an evaluation plan, provided dissemination technical assistance, and prepared a final report.

Responsibilities: Task leader. Ms. Eisen supervised the environmental scan and interviews with key informants and also developed content concepts for products to be disseminated.

Parent and Family Strengthening Prevention Interventions: A Dissemination of Innovations Initiative

Client: Center for Substance Abuse Prevention (CSAP) and Office of Juvenile Justice and Delinquency Prevention (OJJDP)

Project Overview: Under a subcontract, Westat provided technical assistance on effective dissemination practices, customer service satisfaction measurement, and a process and outcome evaluation design for the Parent and Family Strengthening Prevention Intervention Project. The project was designed to (1) increase the capacity of communities to deliver best practices in effective parenting and family programs in order to reduce or prevent substance abuse, (2) document decisionmaking processes for the selection and testing of effective interventions in community settings, and (3) determine the impact of the interventions on target families in the study.

Responsibilities: Ms. Eisen assisted in reviewing and modifying the analysis plan, evaluation questions, and overall analysis schemata. She reviewed phase II evaluation data, conducted content analysis, developed coding schemes, and developed spreadsheets that could be imported into the existing database and combined with phase I data. She also wrote sections of the analysis report.

Planning the Survey of Youth in Residential Placement (SYRP) and the Educational Assessment Survey of Youth in Residential Placement (EASYRP)

Client: Office of Juvenile Justice and Delinquency Prevention, U.S. Department of Justice (DOJ)

Project Overview: Westat planned the SYRP, a survey designed to guide policymakers and practitioners in developing appropriate systems of accountability-based sanctions and operating systems of residential placement that meet the treatment needs of juveniles. Westat developed the survey instrument, formulated the methodology, and designed the sample for a periodic national survey of youth in residential facilities. The project team conducted a large field test to demonstrate the survey's utility and refine the design before implementing it nationally. Westat also planned the EASYRP, designed to assess the reading and mathematics abilities of juveniles who are in residential facilities because of offenses. Westat identified appropriate existing instruments, developed additional interview questions, and pilot tested the instruments in several facilities.

Responsibilities: Research associate. Ms. Eisen was part of the team responsible for developing the ACASI, field test design, and implementation procedures. She oversaw recruitment of

juvenile justice facilities for the survey, developed a recruitment database, and convened a practitioner advisory group.

Caliber Associates, Fairfax, VA (1994 to 1999)

National Evaluation Data and Technical Assistance Center (NEDTAC) – Ms. Eisen was a key staff member in the development of NEDTAC, which was funded by HHS’s Center for Substance Abuse Treatment (CSAT). She worked on national cross-site evaluations of the Residential Women and Children and Pregnant and Postpartum Women, HIV/AIDS Outreach, and Criminal Justice Networks. Ms. Eisen served as deputy project manager on a study of sustainability among grantees, which involved developing the research design, conducting an advisory panel meeting, developing data collection protocols and database formats, conducting interviews, and supervising and training other team members. She was involved in developing several technical assistance products to provide grantees with practical evaluation assistance. She also conducted needs assessments and focus groups and developed technical assistance, training, and knowledge development materials for grantees.

As task leader, Ms. Eisen managed collection and analysis of service delivery unit (SDU), project-level, and system-level data from hundreds of local projects. She had lead responsibility for developing the instruments and tailoring them to the needs of the populations of interest. Ms. Eisen supervised the creation of the database and analytic files and conducted qualitative and quantitative analysis. The SDU data reports developed by NEDTAC were the first program-wide statistical profiles of CSAT-funded SDUs that provided a comparative analysis of all projects participating in the cross-site evaluation.

Installation Status Report (ISR) Part III, Services – Ms. Eisen served as deputy project director and then technical director for this performance measurement and decision support system for the U.S. Army. The ISR III presented performance-based assessments of installation services provided by Government and contract employees. Ms. Eisen analyzed and synthesized prototype ISR III data and revised prototype instruments based on input from test installations worldwide. She helped develop beta test surveys, interviewed key personnel on Army installations, and briefed senior-level personnel at Army Headquarters. Ms. Eisen assisted with orientation and training briefings for military and civilian personnel and worked extensively with subject-matter experts and Headquarters proponents to develop performance standards for installation services. She assisted in preparing technical materials and facilitated small working groups at Tiger Team meetings. In addition, Ms. Eisen supervised creation of relational databases and development of a web-based data collection site that used Cold Fusion technology. She was responsible for software testing and the review of computer-based training modules.

Spouse Abuse in the Armed Services – Ms. Eisen was the deputy project director for this congressionally mandated study. She was responsible for development of a research plan for using case studies to evaluate program effectiveness, survey design, on-site data collection, qualitative data analysis, briefing preparation, and technical report writing, editing, and production. She coordinated the efforts of points of contact at military installations and designed and implemented site visit protocols.

Army Family Team Building – Ms. Eisen participated in the evaluation of a training program designed to increase the self-sufficiency of Army family members. She trained local volunteers to conduct focus groups with installation populations and conducted focus groups with civilian employees at several installations.

U.S. Navy Family Advocacy Program – Ms. Eisen was a key staff member on a team working to develop a strategic plan for the Family Advocacy Program, which is concerned with child and spouse abuse. She analyzed focus group data, prepared meeting agendas, facilitated small working groups, and wrote the draft strategic plan.

Target Cities and Rural, Remote, and Culturally Distinct Programs Multi-project Analyses – As task leader, Ms. Eisen coordinated data collection. She designed data collection forms, conducted in-depth interviews with local project directors and evaluators, and developed a data collection and data submission plan with both Native American Indian grantees and grantees located in large urban areas. She was responsible for interpreting qualitative data, preparing reports, and making presentations at grantee workshops.

Sociometrics, Inc., Silver Spring, MD (1994)

Army Family Advocacy Program – Ms. Eisen served as team leader for an evaluation of this program. She collected data at Army installations throughout the United States, prepared briefings, wrote reports, coordinated with installation points of contact, trained other team leaders, and consulted on the site visit protocol.

Johns Hopkins School of Hygiene and Public Health, Baltimore, MD (1993 to 1994)

Ms. Eisen worked with Johns Hopkins University's Eastern Shore Center for Public Health Research and Training, which was funded by HRSA. She conducted needs assessments, collected interview and survey data, and recruited an advisory board from rural health departments on the Eastern Shore of Maryland.

For the Health Program Alliance Council on Linkages Between Academia and Public Health Practice, Johns Hopkins University, Ms. Eisen developed and conducted an evaluation of the educational, training, and practice linkages between schools of public health, community-based organizations, and governmental agencies.

Thomas Jefferson University, Philadelphia, PA (1989 to 1993)

As a clinical supervisor at the Family Center, Ms. Eisen had research, administrative, and clinical responsibilities. In her research role, she worked on a national treatment demonstration project, funded by NIDA, comparing treatment outcomes and cost-effectiveness of residential and outpatient programs for cocaine-abusing pregnant women and their children. She developed data collection instruments, oversaw clinician training, and implemented the research protocol in the clinical setting.

In her administrative role, Ms. Eisen supervised daily clinic operations for high-risk pregnant and postpartum substance-abusing women and their children, developed programming and reporting

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mechanisms in accordance with Federal and state guidelines, provided clinical supervision for master's-level therapists, and coordinated staff development and training. She was also responsible for marketing the program throughout the medical and social service community and advocating for women's health care. In her clinical role, Ms. Eisen provided counseling and psychotherapy, case management, psychosocial evaluations, HIV counseling, and inpatient and outpatient medical social work functions within an urban hospital setting.

New York State Psychiatric Institute/HIV Center for Clinical and Behavioral Studies, St. Luke's-Roosevelt Hospital, New York, NY (1988 to 1989)

Ms. Eisen was the project social worker for a study of the sequelae of prenatal HIV infection in children. She designed and administered data collection instruments, developed systems to integrate the research protocol into the clinical setting, recruited and enrolled women and children at high risk for HIV infection, and tracked participants. Ms. Eisen's clinical responsibilities included case management, psychosocial evaluations, HIV counseling, and inpatient and outpatient medical social work functions.

Gay Men's Health Crisis, New York, NY (1987 to 1988)

Ms. Eisen worked on the first CDC-funded study of HIV and AIDS risk reduction education. She designed and administered data collection instruments, designed program interventions for diverse populations (including gay and bisexual men, criminal justice populations, and substance abusers), provided outreach, recruited field sites, trained and supervised group facilitators, and led an HIV/AIDS educational prevention program with recovering drug users in a residential treatment facility.

Publications, Technical Reports, and Presentations

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Presentations

Eisen, K., and Berkowitz, S. (2009, April). *A hands-on guide to analyzing qualitative data using NVivo software: Dos, don'ts, and lessons learned* (workshop). Eastern Evaluation Research Society Annual Meeting, Absecon, NJ.

Eisen, K., Zandberg, I., and Berkowitz, S. (2006, September). *Using NVivo software as part of a multi team analysis of in depth interview data in a mixed methods evaluation*. Conference on Strategies in Qualitative Research Using QSR Software, Durham, U.K.

Robins, C., Eisen, K., and Heller, A. (2005, October). *Government funding for ethnographic approaches in research* (panel presentation). Annual Meeting of the American Evaluation Association, Toronto, ON, Canada.

Robins, C., and Eisen, K. (2005, June). *Understanding Medicare managed care through surveys and ethnographic methods*. Academy Health Annual Research Meeting, Boston, MA.

Gragg, F., Eisen, K., and Schultz, D. (2005, April). *Leadership through comprehensive community collaboratives: The Safe Kids/Safe Streets experience*. 15th National Conference on Child Abuse and Neglect, Boston, MA.

Gragg, F., Schultz, D., Eisen, K., and Delany-Shabazz, R. (2004, November). *Community collaborative and system reform: Findings from Safe Kids/Safe Streets Demonstration Program*. Annual Meeting of the American Society of Criminology, Denver, CO.

Marneena L. Evans

Summary

Marneena Evans is a research analyst with more than 13 years of experience in child welfare and juvenile justice research and evaluation, qualitative analysis, training and technical assistance, and product development and dissemination. She currently conducts qualitative data collection and analysis for the evaluation of the Michigan Protect MiFamily IV-E waiver demonstration project, the evaluation of the Permanency Innovations Initiative, and the evaluation of the Hilton Foundation's Foster Youth Initiative. Ms. Evans also serves as the data collection manager for the Survey of Juveniles Charged in Adult Criminal Courts and a writer and analyst for the Capacity Building Center for Tribes. Previously, Ms. Evans conducted administrator interviews for the National Survey of Youth in Custody, conducted site visits (including focus groups with staff, youth, and caregivers), a case manager survey, and qualitative analysis for an evaluation of the Wisconsin Subsidized Guardianship Initiative IV-E waiver demonstration; worked with county child welfare agencies on administrative data issues for the ProtectOhio IV-E waiver evaluation; coordinated with county child welfare agencies for the North Carolina Family Finding Evaluation; conducted analysis and product development for the National Resource Center for Child Welfare Data and Technology; and conducted program reviews for a New York City Center for Economic Opportunity Program Evaluation.

Education

B.S., Foreign Service, Georgetown University, 2000

Relevant Project Experience

Westat (2000 to Present)

National Child Welfare Capacity Building Center for Tribes (CBCT)

Client: Administration for Children and Families, U.S. Department of Health and Human Services (HHS)

Project Overview: A service of the Children's Bureau, CBCT serves as the focal point for coordinated and culturally competent training and technical assistance to Title IV-B and IV-E programs in American Indian and Alaska Native Nations. CBCT works collaboratively with other supported initiatives to support tribes in achieving sustainable, systemic change that results in greater safety, permanency, and well-being for children, youth, and families. As a subcontractor, Westat is primarily responsible for developing tools, processes, and data management systems that reflect Constant Quality Improvement for tribes receiving services from the Center.

Responsibilities: Writer and analyst. Ms. Evans develops universal products for Tribal capacity building.

Michigan Title IV-E Waiver Demonstration Project, Protect MiFamily

Client: Michigan Department of Human Services

Project Overview: Michigan's Protect MiFamily Program provides an innovative array of prevention services to families with young children who are at high or intensive risk for maltreatment as determined by child protective services. The demonstration is being implemented by private agencies in Kalamazoo, Macomb, and Muskegon Counties. The Children's Bureau of the U.S. Department of Health and Human Services mandates an independent evaluation of each waiver demonstration project. Westat's activities involve evaluation plan and methodology development, including random assignment, statistical measurement, and analysis methodologies; implementation of process and outcome evaluations; primary and administrative data collection; outcome measurement and analysis; cost-benefit and cost-effectiveness analysis; and preparation of reports.

Responsibilities: Ms. Evans conducts qualitative analysis for the process evaluation. She also conducted site visits to CPS and private agency offices at demonstration sites.

Foster Youth Strategic Initiative

Client: Conrad N. Hilton Foundation

Project Overview: Westat is joined by two subcontractors to develop and implement an evaluation plan for the Foster Youth Initiative. The initiative promotes an environment of success for older foster youth by (1) increasing the self-sufficiency of transition-age youth through improved college and career readiness, stronger caregivers, and special services for high-risk youth; (2) strengthening collaboration and alignment throughout systems influencing foster youth outcomes; and (3) developing and disseminating knowledge for the field. The Westat team is evaluating progress toward the initiative's objectives by identifying and tracking systems-level outcomes. Data collection also includes review of grantee documents, analysis of program and system-specific administrative data, interviews with key decisionmakers and stakeholders, focus groups, and surveys, including a social network survey.

Responsibilities: Ms. Evans serves as an evaluation site liaison and conducts qualitative analysis of grantee activity.

Evaluation of the Permanency Innovations Initiative (PII)

Client: Administration for Children and Families, U.S. Department of Health and Human Services (HHS)

Project Overview: Under the 5-year PII, the Children's Bureau has funded six grantees to develop and implement innovative interventions in their state or county child welfare systems to reduce long-term foster care and improve outcomes for children who experience serious barriers to permanency. Under a task order, Westat and its subcontractors are conducting cross-site and site-specific evaluations of the interventions. Activities include completing the designs of rigorous site-level evaluations (using randomized control groups wherever feasible), implementing the evaluations (monitoring the fidelity of the interventions and collecting primary data on proximal outcomes from treatment and comparison cases), collecting and analyzing administrative data on distal outcomes (children's exit from foster care and permanent placement), studying the implementation process, and conducting a cost study to assess the resource requirements of grantees' interventions. Two sites are in California.

Responsibilities: Ms. Evans conducts qualitative analysis and reporting, manages the dissemination approval and tracking processes between PII grantees and the client, and helped develop the dissemination plan. She also developed and administers the evaluation's SharePoint

site, which is used by Federal staff, grantees, and the training/technical assistance and evaluation teams.

2009 Survey of Juveniles Charged in Adult Criminal Courts (SJCACC)

Client: Bureau of Justice Statistics, U.S. Department of Justice (DOJ)

Project Overview: The 2009 SJCACC is collecting information about the criminal case processing of juveniles in adult criminal courts across the country. This study will provide the first available data on how many youth are charged in criminal court, the characteristics of these youth, the pathways that lead them to criminal court, and the final disposition of their cases. Westat and a subcontractor are responsible for designing a sampling methodology to obtain reliable national estimates of juveniles charged as adults, collecting data on up to 12,000 cases through electronic records extraction and a hard-copy survey, and preparing a public use data set.

Responsibilities: Data collection manager.

Colorado Consortium for Differential Response

Client: Colorado State University

Project Overview: The Colorado Consortium for Differential Response was one of three demonstration projects selected through the Quality Improvement Center for Differential Response project of HHS Children's Bureau. As a subcontractor, Westat participated in a rigorous program evaluation, designed and monitored random assignment procedures and methodology, conducted surveys with parents and caregivers, and conducted quantitative analysis, including survival analysis and multiple regression.

Responsibilities: Ms. Evans contributed to the final evaluation report.

National Resource Center for Child Welfare Data and Technology (NRCCWDT)

Client: Children's Bureau, Administration for Children and Families, U.S. Department of Health and Human Services (HHS)

Project Overview: The goals of the NRCCWDT are to assist state and tribal child welfare agencies in (1) developing and improving information management systems related to child welfare; (2) building capacity in using data from statewide child welfare information systems and other sources; (3) developing and improving use of new technologies; and (4) promoting and assisting in the exchange of data between child welfare agencies and the family and juvenile courts, to better integrate policy and practice and improve service delivery and outcomes for children and families. As a subcontractor, Westat is responsible for providing technical assistance to states and tribes, developing and maintaining the NRCCWDT web site, participating in the NRCCWDT annual conference, and evaluating NRCCWDT activities.

Responsibilities: Content manager. Ms. Evans leads communications planning for the NRCCWDT and regularly contributes to the development and writing of technical assistance documents, specializing in emerging technologies and social media. She has overseen the NRCCWDT web site, has contributed to web site redesign, and serves on the web site team.

Annual Surveys of Probation and Parole, 2011-2014

Client: Bureau of Justice Statistics (BJS)

Project Overview: The Annual Probation Survey and the Annual Parole Survey (the P&P surveys) are two separate data collections through which BJS annually obtains summary counts of the number of adults under probation and parole supervision at the beginning and end of each calendar year, as well as information on selected characteristics of the year-end population. The surveys also collect information on the number and characteristics of adults entering and exiting

probation and parole supervision during the year. The P&P data are obtained from administrative sources maintained by state probation and/or parole agencies; municipal, county, or court agencies; and the Federal system. Westat is administering both surveys for 4 years and will also redesign the survey to use a core survey and supplement approach.

Responsibilities: Ms. Evans conducted pretests for supplements to the annual survey. She also conducted nonresponse followup and refusal conversion with agencies for the annual survey.

First and Second National Survey of Youth in Custody (NSYC-1 and -2)

Client: Bureau of Justice Statistics (BJS), U.S. Department of Justice (DOJ)

Project Overview: These surveys have been conducted in response to the Prison Rape Elimination Act of 2003, which requires BJS to report annually on the incidence and effects of prison rape, including statistical data aggregated at the Federal, state, prison, and prison system levels. BJS initially awarded Westat a grant to develop survey instrumentation and methodology for the survey. Subsequently, Westat received a grant to conduct the first national implementation, which sampled and gathered data from adjudicated youth in 198 facilities in all 50 states and the District of Columbia. In 2012, Westat completed the second implementation of the survey, this time gathering data in 330 facilities.

Responsibilities: Ms. Evans conducted postsite visit debriefings with all facility administrators. She also coordinated interviewer travel arrangements throughout the data collection period.

Data Collection for the Family Finding Evaluation

Client: Duke Endowment

Project Overview: From 2009 to 2013, Westat assisted in evaluating Family Finding, an intensive family search program that tries to reconnect children in foster care with blood relatives. Westat conducted in-person interviews with youth (aged 14-22) who were in, or had recently exited, foster care and who were randomly assigned to either the Family Finding treatment group or a control group. Westat field interviewers used a CAPI interview with an ACASI component to interview youth 12 and 24 months after random assignment. The instrument collected youth outcome data in the domains of social support, mental and physical health, education, employment, and risk behaviors.

Responsibilities: Ms. Evans served as a field manager and coordinated with the county child welfare agencies to contact youth respondents.

Assessment and Evaluation of the Wisconsin Subsidized Guardianship Initiative

Client: Wisconsin Department of Health and Family Services

Project Overview: Under Title IV-E Waiver authority, Wisconsin used Federal funds to test whether a subsidized guardianship benefit would increase permanence for children and improve child outcomes. Westat and two subcontractors conducted a longitudinal study of the status and outcomes of children and families, using a treatment group (eligible for subsidized guardianship) and a control group. The contractors interviewed caregivers at enrollment and collected administrative data on outcomes, case history, and case planning. The study included an outcome evaluation to estimate the impact on permanency, safety, stability, and child well-being; a process evaluation to understand the context in which outcomes exist; and a cost analysis to estimate savings accrued by subsidized guardianship.

Responsibilities: Research assistant. Ms. Evans coordinated the case manager web survey, conducted focus groups and interviews with stakeholders and agency staff, and wrote several sections of the interim and final evaluation reports.

Evaluation of the New York City Justice Corps

Client: John Jay College of Criminal Justice, City University of New York

Project Overview: The New York City Justice Corps is a civic justice re-entry program serving New York City young adults (18-24) who are or were recently involved in the criminal justice system. The program goal is to reduce poverty and recidivism through paid training and services over approximately 6 months. The model includes involvement in a community service project to increase community engagement. Westat and a subcontractor conducted a process and outcome evaluation that examined program startup and implementation, young adult outcomes (recidivism, employment, and civic engagement), and outcomes for the communities in which the program operates. Program applicants were randomly assigned to either receive Justice Corps training and services or be referred to other community services. The evaluation followed these young adults for 30 months.

Responsibilities: Ms. Evans conducted recruitment and data collection activities at both New York City sites.

New York City Center for Economic Opportunity (CEO) Program Evaluation

Client: Center for Economic Opportunity/New York City Human Resources Administration

Project Overview: Westat is evaluating initiatives of the CEO Program, New York City's effort to move economically disadvantaged New Yorkers out of poverty. The initiatives are focused on young adults, poor working adults, and families with young children (<5 years). The Westat team is examining approximately 35 programs to determine which can best be evaluated, developing an evaluation design, and working with the selected programs to systematically collect information for evaluating impact, program implementation, and cost-benefit.

Responsibilities: Program manager. Ms. Evans worked on a program review team for the initial phase of the evaluation. She also coordinated and edited program review reports from all teams. She tracked budget expenditures for all task orders and prepared monthly and quarterly progress and budget reports for the client.

Third Grade Followup to the Head Start Impact Study (HSIS)

Client: Administration for Children and Families, U.S. Department of Health and Human Services (HHS)

Project Overview: Since fall 2000, Westat has conducted the HSIS to assess the impact of Head Start on school readiness, parental practices that contribute to school readiness, and the nature and quality of children's early care and program experiences. The study involves 84 nationally representative Head Start grantees and approximately 5,000 3- and 4-year-olds who were randomly assigned to either a group that had access to Head Start services or a group that could enroll in community non-Head Start services. The Third Grade Followup involves the collection and analysis of data from children, families, teachers, and schools for sample members in their third grade year.

Responsibilities: Research assistant. Ms. Evans coordinated district and school recruitment, updated the training manual, and assisted in trainings.

Extension of the Evaluation of Ohio's Title IV-E Waiver Demonstration

Client: Ohio Department of Job and Family Services

Project Overview: As a subcontractor, Westat is responsible for participant outcomes analysis to examine the continued impact of ProtectOhio on children and families. The 5-year contract includes studies to investigate the impact of new waiver services such as family visitation, family team conferencing, and enhanced kinship services. Westat annually captures and conducts

secondary analysis of administrative data for participants in 14 participating and 14 comparison counties. Analyses will include competing risk survival analysis and counterfactual imputation methodologies to look at foster care length of stay, as well as trajectory analysis to examine service pathways. A data audit and ongoing data committee will examine the local use of statewide data sources, enabling comparative analysis of multiple sources of longitudinal records. Westat is now involved in phase III of the evaluation; phases I and II ran from 1998 to 2010.

Responsibilities: Research assistant. Ms. Evans participated in the county data committee and analyzed data from the audit of county data sources.

Other Professional Experience

Howard University School of Divinity, Washington, DC (1998 to 2000) – As administrative assistant to the dean, Ms. Evans designed and produced a weekly bulletin; arranged travel for the dean, professors, and guests; organized and maintained scheduling and filing systems; and responded to the dean's correspondence.

School for Summer and Continuing Education, Georgetown University, Washington, DC (1995 to 1998) – As an office assistant, Ms. Evans copyedited the continuing education catalog, responded to correspondence from students, installed and upgraded software, and registered students and faculty. In 1996, she administered the Theological Studies Certificate Program.

Office of U.S. Senator Dennis DeConcini, Tucson, AZ (1993) – As an intern, Ms. Evans answered correspondence from constituents and the press and maintained mailing lists.

Adult Loss of Hearing Association, Tucson, AZ (1992) – On a volunteer basis, Ms. Evans copyedited a monthly newsletter, was responsible for telephone reception and TDD/TTY, responded to client information requests, and registered students for and assisted with sign language courses.

Publications, Technical Reports, and Presentations

Technical Reports

Winokur, M., Ellis, R., Orsi, R., Rogers, J., Gabel, G., Brenwald, S., Holmquist-Johnson, H., and Evans, M. (2014). *Program evaluation of the Colorado Consortium on Differential Response: Final report*. Fort Collins, CO: Social Work Research Center, School of Social Work, Colorado State University.

Testa, M.F., Slack, K.S., Gabel, G., Evans, M., and Cohen, L. (2010). *Subsidized Guardianship Assessment and Evaluation: Final evaluation report* (for Wisconsin Department of Health and Family Services). Rockville, MD: Westat.

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Janet L. Ciarico

Summary

Janet Ciarico is a senior research analyst and Westat Senior Study Director with more than 19 years of experience in survey and evaluation research. She has conducted research and evaluation in the areas of child abuse and neglect, foster care, family preservation and reunification programs, subsidized guardianship and adoption, youth aging out of foster care, youth in residential placement and custody, and Head Start. Ms. Ciarico has expertise in research design, survey design and development, development of analysis plans and specifications, quantitative and qualitative data collection, analysis using complex primary and administrative data sets, and dissemination of research findings. She is skilled in analyzing data using WesVar.

Education

M.A., Political Science (with a concentration in Public Policy), George Washington University, 1994
B.A. (magna cum laude), Political Science, San Francisco State University, 1991

Relevant Project Experience

Westat (1995 to Present)

Michigan Title IV-E Waiver Demonstration Project, Protect MiFamily

Client: Michigan Department of Human Services

Project Overview: Michigan's Protect MiFamily Program provides an innovative array of prevention services to families with young children who are at high or intensive risk for maltreatment as determined by child protective services. The demonstration is being implemented by private agencies in Kalamazoo, Macomb, and Muskegon Counties. The Children's Bureau of the U.S. Department of Health and Human Services mandates an independent evaluation of each waiver demonstration project. Westat's activities involve evaluation plan and methodology development, including random assignment, statistical measurement, and analysis methodologies; implementation of process and outcome evaluations; primary and administrative data collection; outcome measurement and analysis; cost-benefit and cost-effectiveness analysis; and preparation of reports.

Responsibilities: Senior research analyst. Ms. Ciarico leads primary data collection and outcomes analysis.

Extension of the Evaluation of Ohio's Title IV-E Waiver Demonstration

Client: Ohio Department of Job and Family Services

Project Overview: As a subcontractor, Westat is responsible for participant outcomes analysis to examine the continued impact of ProtectOhio on children and families. The 5-year contract includes studies to investigate the impact of new waiver services such as family visitation, family team conferencing, and enhanced kinship services. Westat annually captures and conducts

secondary analysis of administrative data for participants in 14 participating and 14 comparison counties. Analyses will include competing risk survival analysis and counterfactual imputation methodologies to look at foster care length of stay, as well as trajectory analysis to examine service pathways. A data audit and ongoing data committee will examine the local use of statewide data sources, enabling comparative analysis of multiple sources of longitudinal records. Westat is now involved in phase III of the evaluation; phases I and II ran from 1998 to 2010.

Responsibilities: Senior research analyst. Ms. Ciarico develops the data files from the State's SACWIS system to perform the trajectory analyses to examine children's service pathways.

Evaluation of the Permanency Innovations Initiative (PII)

Client: Administration for Children and Families, U.S. Department of Health and Human Services (HHS)

Project Overview: Under the 5-year PII, the Children's Bureau has funded six grantees to develop and implement innovative interventions in their state or county child welfare systems to reduce long-term foster care and improve outcomes for children who experience serious barriers to permanency. Under a task order, Westat and its subcontractors are conducting cross-site and site-specific evaluations of the interventions. Activities include completing the designs of rigorous site-level evaluations (using randomized control groups wherever feasible), implementing the evaluations (monitoring the fidelity of the interventions and collecting primary data on proximal outcomes from treatment and comparison cases), collecting and analyzing administrative data on distal outcomes (children's exit from foster care and permanent placement), studying the implementation process, and conducting a cost study to assess the resource requirements of grantees' interventions. Two sites are in California.

Responsibilities: Senior research analyst. Ms. Ciarico developed variables for data mining and modeling to assist states in finalizing intervention plans. She works with grantees and state agencies to coordinate submission of administrative data. Using state agency SACWIS data, she has conducted analyses for the formative and summative evaluation phases. She is also a member of the cross-site evaluation team.

National Child Welfare Capacity Building Center for Tribes (CBCT)

Client: Administration for Children and Families, U.S. Department of Health and Human Services (HHS)

Project Overview: A service of the Children's Bureau, CBCT serves as the focal point for coordinated and culturally competent training and technical assistance to Title IV-B and IV-E programs in American Indian and Alaska Native Nations. CBCT works collaboratively with other supported initiatives to support tribes in achieving sustainable, systemic change that results in greater safety, permanency, and well-being for children, youth, and families. As a subcontractor, Westat is primarily responsible for developing tools, processes, and data management systems that reflect Constant Quality Improvement for tribes receiving services from the Center.

Responsibilities: Senior research analyst. Ms. Ciarico provides tribes with technical assistance on a variety of data-related issues, including data-driven management, continuous quality improvement, and issues related to meeting Adoption and Foster Care Reporting System submission requirements. Additionally, she will facilitate peer learning opportunities and prepare technical briefs and materials on promising practices and lessons learned for data-related topics.

Illinois Permanency for Older Wards Waiver Study

Client: Illinois Department of Children and Family Services

Project Overview: Westat evaluated the extension of the Illinois Subsidized Guardianship Waiver Demonstration, to test whether offering transition services to wards aged 14 and older who were eligible for guardianship or adoption would increase the number of older youth entering into permanent placements. Under the randomized experimental design, eligible youth were assigned to a treatment group (who received enhanced transition services after guardianship or adoption) or a control group (who received standard services but were eligible to enter subsidized guardianship or adoptive placements). Data collection included analysis of administrative data, interviews with youth and caregivers at two points in time, focus groups with agency and court personnel, and collection of additional information through administrative case reviews.

Responsibilities: Senior research analyst. Ms. Ciarico developed the work plan, created youth and caregiver consent forms, and designed and developed the caregiver data collection instrument. She analyzed caregiver survey data and contributed to the interim and final reports.

Evaluation of the Illinois Subsidized Guardianship Waiver Demonstration

Client: Illinois Department of Children and Family Services

Project Overview: Westat evaluated a demonstration program that enables the state to subsidize the cost of care by relative caregivers and foster parents who assume guardianship responsibilities for foster children in their homes. The 5-year study provided estimates of the impact of subsidized guardianship on permanency outcomes, subsequent abuse and neglect allegations, family functioning, and child well-being. The project included (1) a hypothesis-testing evaluation to assess the effect of subsidized guardianship on the outcomes of children and their families and (2) a process evaluation to describe the implementation of guardianship and the context in which it operates. Westat synthesized the findings from both components to develop program and policy recommendations. Children and their caregivers were interviewed at two points in time by Westat staff and specially trained agency staff; children were interviewed using ACASI interviewing, and caregiver interviews made use of CAPI interviewing.

Responsibilities: Research associate. Ms. Ciarico contributed to the analysis for the preliminary findings draft report. She helped develop the analysis plan, clean the database, and create specifications and record data for analysis and was primarily responsible for conducting data analyses.

National Resource Center for Child Welfare Data and Technology (NRCCWDT)

Client: Children's Bureau, Administration for Children and Families, U.S. Department of Health and Human Services (HHS)

Project Overview: The goals of the NRCCWDT are to assist state and tribal child welfare agencies in (1) developing and improving information management systems related to child welfare; (2) building capacity in using data from statewide child welfare information systems and other sources; (3) developing and improving use of new technologies; and (4) promoting and assisting in the exchange of data between child welfare agencies and the family and juvenile courts, to better integrate policy and practice and improve service delivery and outcomes for children and families. As a subcontractor, Westat is responsible for providing technical assistance to states and tribes, developing and maintaining the NRCCWDT web site, participating in the NRCCWDT annual conference, and evaluating NRCCWDT activities.

Responsibilities: Senior research analyst. Ms. Ciarico provides states with technical assistance on a variety of agency data-related issues, including mapping SACWIS data to meet National

Child Abuse and Neglect Data System (NCANDS) submission requirements, addressing problems with unduplicating clients in a SACWIS system, and using agency data to examine Federal compliance issues and for continuous quality improvement. Ms. Ciarico has written and coauthored technical briefs on the identification and resolution of duplicate clients in data systems, the use of data to address Fostering Connections, and promising practices and lessons learned about the youth consent process from initial National Youth in Transition Database (NYTD) site visits. She led and co-led state-level peer-to-peer working groups on managing data to improve child outcomes and using NYTD to improve outcomes for older youth. Additionally, she developed a framework to assist states in analyzing their data to drive case management practices and services. Ms. Ciarico served on the Children's Bureau's team that conducted a site visit in collaboration with Virginia's NYTD implementation team. She has attended NYTD technical meetings and NCANDS technical meetings and has delivered presentations at various professional conferences.

Fourth National Incidence Study of Child Abuse and Neglect (NIS-4)

Client: Administration for Children and Families, U.S. Department of Health and Human Services (HHS)

Project Overview: The NIS-4 gathered data on all children investigated by the child protective services (CPS) agencies in a nationally representative sample of 122 counties, as well as on children identified by nearly 10,800 professional staff in almost 1,100 other community agencies. These other agencies included county sheriff's offices; county departments of juvenile probation, health, and public housing; municipal police departments; hospitals; public schools; daycare centers; shelters; and voluntary social services and mental health agencies. Study cases were reviewed to eliminate duplicates, evaluated to ensure that they met the study's standardized definitions of abuse and neglect, and weighted to represent all maltreated children in the nation. The NIS-4 also included several allied surveys to enhance the quality and interpretability of the main study's findings and to examine how the NIS results relate to National Child Abuse and Neglect Data System (NCANDS) statistics.

Responsibilities: Senior research analyst. Ms. Ciarico led the unduplication of study data. She coauthored the design and methods summary and was a member of the CPS agency recruitment team.

Assessing the Context of Permanency and Reunification in the Foster Care System

Client: U.S. Department of Health and Human Services (HHS)

Project Overview: Working with a subcontractor, Westat reviewed reunification policy and practice at the state, county, and local levels in response to the implementation of the Adoption and Safe Families Act. Project activities included developing a conceptual model of permanency and reunification, documenting patterns of reunification and re-entry through analyses of data from the Adoption and Foster Care Analysis and Reporting System (AFCARS) and the Foster Care Data Archive, examining caseworkers' decisionmaking processes for permanency, and developing a matrix of reunification programs. Data collection included telephone discussions with program administrators and site visits to reunification programs.

Responsibilities: Senior research analyst. Ms. Ciarico developed the research design; guides for telephone discussions with state, county, and local administrators; and a site visit protocol for in-person visits. She completed an extensive literature and program review on reunification and permanency and conducted site visits to reunification programs. Ms. Ciarico collected and analyzed qualitative and quantitative data, cowrote several research papers, coordinated the collection of papers from authors, and edited and compiled the final compendium of papers.

Evaluation of Family Preservation and Reunification Services

Client: Assistant Secretary for Planning and Evaluation, U.S. Department of Health and Human Services (HHS)

Project Overview: Under a 5-year contract, Westat and two subcontractors assisted HHS in describing and evaluating the impact of four selected family preservation programs and one reunification program. For the first major component, an impact evaluation, up to 500 families in each program were randomly assigned to receive family preservation/reunification services (the treatment group) or usual child welfare services (the control group); Westat conducted three rounds of in-person interviews with the family's primary caretaker and two rounds of interviews with the caseworker. Other data collection efforts included an accounting of services provided by caseworkers and self-administered staff questionnaires. The second study was conducted to describe program operations; Westat interviewed child welfare and agency staff, reviewed policy and program materials, and examined administrative data systems and case records. Other activities included monitoring fieldwork, processing data, and preparing analyses and reports. A followup analysis to the reunification study looked at the status of initiatives that use managed care in child welfare efforts.

Responsibilities: Research associate. Ms. Ciarico assisted in preparing OMB clearance materials, analyzed state family preservation and reunification information, and cleaned and prepared data for analysis. She developed a manual and materials for the data tracking system, developed a site coordinator systems manual, and conducted training on the materials. She conducted site visits to obtain information about child welfare agency policies, practices, and procedures. Ms. Ciarico managed the collection of administrative and cost data from the sites and supervised field staff. She contributed to data collection and data analysis and was primarily responsible for writing Family Preservation Today, a report on the current status of family preservation in child welfare.

Assessing the Effectiveness of Discharge Planning to Prevent Subsequent Homelessness

Client: Assistant Secretary for Planning and Evaluation, U.S. Department of Health and Human Services (HHS)

Project Overview: The purpose of this project was to ascertain the evaluability of discharge planning in institutional and custodial settings treating people with mental and/or substance abuse disorders as a strategy to prevent subsequent homelessness. The goals of the evaluability assessment were (1) to determine if it is possible to conduct a rigorous objective evaluation, (2) to identify key evaluation questions by setting and across settings, and (3) to develop alternative evaluation designs. The project included a preliminary literature review and issue paper, ongoing input from a technical expert panel, identification of 20 exemplary discharge planning sites, development of logic models representative of those sites, site visits to 8 of the sites to refine site logic models, development of cross-setting logic models, a logic model report, and an evaluation design options report, final report, and briefing of ASPE staff.

Responsibilities: Senior research analyst. Ms. Ciarico conducted a site visit at a discharge planning program for youth leaving foster care and wrote a description of the program for the study report.

Survey of Youth in Residential Placement (SYRP)

Client: Office of Juvenile Justice and Delinquency Prevention, U.S. Department of Justice (DOJ)

Project Overview: Westat conducted the first national SYRP, which involved interviews with youth in residential facilities under juvenile justice authority. This survey was the first to apply ACASI interviewing in a group context by administering the ACASI to groups of up to 10 youth in order to complete a substantial number of interviews during relatively short facility visits. Westat revised the ACASI instrument developed under its earlier SYRP planning and design project and refined the sampling plan and study procedures for this national implementation. Over a 12-week period, interviews were completed with over 7,000 youth in more than 200 facilities nationwide, obtaining their self-reports about their backgrounds, offenses, needs (emotional, substance abuse, educational, health), services received, conditions of confinement, and experiences in custody.

Responsibilities: Member of the analysis team. Ms. Ciarico developed analysis plans and variables and conducted analyses on safety- and gang-related issues.

First and Second National Survey of Youth in Custody (NSYC-1 and -2)

Client: Bureau of Justice Statistics (BJS), U.S. Department of Justice (DOJ)

Project Overview: These surveys have been conducted in response to the Prison Rape Elimination Act of 2003, which requires BJS to report annually on the incidence and effects of prison rape, including statistical data aggregated at the Federal, state, prison, and prison system levels. BJS initially awarded Westat a grant to develop survey instrumentation and methodology for the survey. Subsequently, Westat received a grant to conduct the first national implementation, which sampled and gathered data from adjudicated youth in 198 facilities in all 50 states and the District of Columbia. In 2012, Westat completed the second implementation of the survey, this time gathering data in 330 facilities.

Responsibilities: Senior research analyst. For the NSYC-1, Ms. Ciarico developed variables and conducted analysis as part of the data validity and outlier identification process.

National Head Start Impact Study

Client: Administration for Children and Families, U.S. Department of Health and Human Services (HHS)

Project Overview: As part of the 1998 reauthorization of Head Start, Congress mandated this national longitudinal study to assess (1) how Head Start participation affects school readiness and (2) under what conditions and for which children the program works best. Working as part of a team, Westat conducted the pilot study and a full-scale study involving a nationally representative sample of 83 grantees/delegate agencies. Assessment data were collected for approximately 5,000 3- and 4-year-olds, who were followed through the spring of their first-grade year. Children were randomly assigned to either a treatment group that participated in Head Start or a non-Head Start control group. The project also included interviews with parents/primary caregivers, surveys of program staff/other care providers and elementary school teachers, assessments of the quality of care settings, and abstracting of administrative records.

Responsibilities: Senior research analyst. Ms. Ciarico coauthored the 2010 study report. She was involved in training, recruitment, data collection, and analysis. She visited Head Start programs to obtain cooperation for the study and conducted telephone surveys with Head Start grantees. Ms. Ciarico also conducted research on state and local community attributes and was responsible for designing, developing, and implementing a survey to capture data from local child care and Head Start program directors. She was a member of the workgroup that developed a descriptive and

impact analysis of children's experiences and outcomes. She also led the team in preparing restricted use files and documentation.

Policy Analysis, Program Assessments, Evaluation, and Data Analysis: Disability-Related Database Development and Data Analysis

Client: Office of the Assistant Secretary for Planning and Evaluation (OASPE), U.S. Department of Health and Human Services (HHS)

Project Overview: Westat was awarded a master agreement for a task order contract to assist OASPE and other HHS agencies in responding to policy-related questions that arise in the area of disability. The contract could be used as a contracting vehicle by any agency in HHS. Westat's activities included the design of evaluations of disability-related programs and support for issues analysis.

Responsibilities: Research associate. Ms. Ciarico participated in a task to conduct secondary analyses of data from the National Study of Protective, Preventive, and Reunification Services Delivered to Children and Their Families. She conducted and delivered to the client a series of analyses for use in reports to Congress on kinship foster care, substance abuse, and child protection services, required by the Adoption and Safe Families Act of 1997. The analyses, performed using WesVarPC, included bivariate analysis and multivariate linear and logistic regression analysis.

National Study of Protective, Preventive, and Reunification Services Delivered to Children and Their Families

Client: U.S. Department of Health and Human Services (HHS)

Project Overview: The purposes of this study were to determine the number and percentage of children and families receiving services and to obtain national data on the number, types, and dynamics of services provided. Westat conducted retrospective telephone interviews with the caseworkers for a nationally representative sample of 2,500 children and their families who received social services over a 12-month period. During the second phase of the study, caseworkers were interviewed by telephone to collect information about current service delivery and casework discussions over the previous 6 months. An extensive pilot study was completed to test sampling and data collection procedures.

Responsibilities: Research associate. Ms. Ciarico analyzed the database and contributed to the final report as a writer and editor.

Institute for Law and Justice, Alexandria, VA (1995)

As a researcher and technical writer, Ms. Ciarico represented the institute at the 1995 Conference on Criminal Justice Research and Evaluation, sponsored by the Office of Juvenile Justice and Delinquency Prevention. She synthesized panel discussions and research results into summaries for publication in the DOJ conference summary.

Kay Lawson, San Francisco, CA (1991 to 1992)

As a research assistant, Ms. Ciarico performed detailed research for the political science text *The Human Polity*, 3rd edition.

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Public Research Institute, San Francisco State University, San Francisco, CA (1990)

As a research intern, Ms. Ciarico trained with the institute director and office manager in research design, survey instrument development, and data input and analysis. She also designed project flow charts and participated in strategy conferences with staff and clients.

Other Professional Experience

San Francisco State University, San Francisco, CA (1990) – As a teaching assistant, Ms. Ciarico conducted lectures and discussion groups, proctored and graded examinations and class assignments, assisted with lesson plans, and counseled students on assignments and examinations.

Awards and Professional Achievements

Recipient, Wasserman Award for Best Paper by an Undergraduate in the Political Science Department, San Francisco State University, 1991

Publications, Technical Reports, and Presentations

Technical Reports

- Puma, M., Bell, S., Cook, R., Heid, C., Shapiro, G., and Broene, P. (2010). *Head Start Impact Study: Final report* (for U.S. Department of Health and Human Services). Rockville, MD: Westat.
- Quinn, L., MacAllum, C., Ciarico, J., and Rogers, J. (2009). *Illinois Permanence for Older Ward Waiver: Final evaluation report* (for Illinois Department of Children and Family Services). Rockville, MD: Westat.
- Sedlak, A., Gragg, F., Mettenburg, J., Ciarico, J., Winglee, M., Shapiro, G., Hartge, J., Li, S., Greene, A., and McPherson, K. (2008). *Design and methods summary* (for Administration for Children and Families, U.S. Department of Health and Human Services). Rockville, MD: Westat.
- Ciarico, J., and Quinn, E. (2005). *Site visit report contributing to the evaluability assessment of discharge planning and the prevention of homelessness: Final report* (for Office of the Assistant Secretary for Planning and Evaluation, U.S. Department of Health and Human Services). Rockville, MD: Westat.
- Ciarico, J. (2001). *Permanency and reunification trends in 25 states* (for U.S. Department of Health and Human Services). Rockville, MD: Westat.
- Ciarico, J., and MacAllum, C. (2001). *Caseworker decision-making* (for U.S. Department of Health and Human Services). Rockville, MD: Westat.

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Cook, R., Schuerman, J., Ciarico, J., MacAllum, C., Hill, R., and Harden, A. (2001). *Permanency, a balancing act* (for U.S. Department of Health and Human Services). Rockville, MD: Westat.

Cook, R., Schuerman, J., Ciarico, J., MacAllum, C., Hill, R., and Harden, A. (2001). *Assessing the context of permanency and reunification in the foster care system* (for U.S. Department of Health and Human Services). Rockville, MD: Westat.

Presentations

Bennett, P., Wieczorek, K., and Ciarico, J. (2012). *Are we counting what counts?* 18th National Conference of the Office of Child Abuse and Neglect, Children's Bureau, Washington, DC.

McInturf, J., Brown, L., Ciarico, J., and Haidi, A. (2011). *NYTD data analysis planning*. National Youth in Transition Database Technical Assistance Meeting, Washington, DC.

Mettenburg, J., Brown, L., Ciarico, J., and McInturf, J. (2010). *Enhancing analytic capacity: What do you need to help drive performance*. 13th National Child Welfare Data and Technology Conference, Bethesda, MD.

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Leanne L. Heaton, Ph.D.

Summary

Dr. Leanne L. Heaton is a licensed clinical social worker and a Westat Senior Study Director with more than 20 years of experience in research, evaluation, and clinical practice experience with adults, children, and families. She has conducted research in the areas of child welfare, juvenile justice, and mental health. At Westat, she works with investigators and collaborators on the design, implementation, and analysis of a wide range of studies, including the National Survey of Youth in Custody-2 and a BJS study on rape and sexual assault. She has experience analyzing large, complex national surveys and developing detailed analytic plans. Dr. Heaton also teaches social work practice at the Virginia Commonwealth University School of Social Work. In previous work, Dr. Heaton served as a researcher, clinical research interviewer, and collaborator on several studies for NIMH, including the National Comorbidity Survey of Adolescents, the child segment of the Hurricane Katrina Study, and research on neurodevelopmental genomics and familial transmission of mental disorders. Dr. Heaton has also conducted extensive program evaluations on behalf of the Fairfax County Department of Family Services and the Virginia Department of Social Services.

Education

Ph.D., Social Work, Virginia Commonwealth University, 2010

M.S.W., Social Work, University of Alabama, 1997

B.A., Social Work, University of Montevallo, 1993

Relevant Project Experience

Westat (2011 to Present)

First and Second National Survey of Youth in Custody (NSYC-1 and -2)

Client: Bureau of Justice Statistics (BJS), U.S. Department of Justice (DOJ)

Project Overview: These surveys have been conducted in response to the Prison Rape Elimination Act of 2003, which requires BJS to report annually on the incidence and effects of prison rape, including statistical data aggregated at the Federal, state, prison, and prison system levels. BJS initially awarded Westat a grant to develop survey instrumentation and methodology for the survey. Subsequently, Westat received a grant to conduct the first national implementation, which sampled and gathered data from adjudicated youth in 198 facilities in all 50 states and the District of Columbia. In 2012, Westat completed the second implementation of the survey, this time gathering data in 330 facilities.

Responsibilities: Lead analyst, NSYC-2 Second Report. Dr. Heaton is coordinating the NSYC-2 second report, focused on the correlates of sexual victimization of youth in juvenile facilities. She and the research team worked with the client to develop a detailed analysis plan that includes multivariate analyses such as ordinary least square regression and multilevel modeling techniques (e.g., hierarchical linear modeling), using complex survey data to identify key facility and youth

characteristics associated with victimization. As assistant field director, Dr. Heaton supervises the work of 5 to 7 field supervisors and 14 interviewers, including monitoring production, response rates, costs, and data quality and communicating with supervisors and the home office on a regular basis. She ensures that field teams pass the criminal background checks required by states and facilities. Dr. Heaton also ensure that field teams follow appropriate procedures for counseling and mandatory reporting. Since NSYC-2 data collection requires extensive travel, she ensures that the field team arranges lodging and transportation via Westat's Travel Office.

Evaluation of the Permanency Innovations Initiative (PII)

Client: Administration for Children and Families, U.S. Department of Health and Human Services (HHS)

Project Overview: Under the 5-year PII, the Children's Bureau has funded six grantees to develop and implement innovative interventions in their state or county child welfare systems to reduce long-term foster care and improve outcomes for children who experience serious barriers to permanency. Under a task order, Westat and its subcontractors are conducting cross-site and site-specific evaluations of the interventions. Activities include completing the designs of rigorous site-level evaluations (using randomized control groups wherever feasible), implementing the evaluations (monitoring the fidelity of the interventions and collecting primary data on proximal outcomes from treatment and comparison cases), collecting and analyzing administrative data on distal outcomes (children's exit from foster care and permanent placement), studying the implementation process, and conducting a cost study to assess the resource requirements of grantees' interventions. Two sites are in California.

Responsibilities: Operations manager. In addition, Dr. Heaton was part of working group that developed an interviewer-administered survey instrument to collect information about lesbian, gay, bisexual, and transgender foster youth experiences.

Testing Alternative Survey Methods to Collect Data on Rape and Sexual Assault

Client: Bureau of Justice Statistics, U.S. Department of Justice (DOJ)

Project Overview: The focus of this research is to develop, implement, and test survey methods for providing estimates of rape and sexual assault and to determine the feasibility of using these procedures in the National Crime Victimization Survey (NCVS) program. Westat is evaluating the estimates of rape and sexual assault from two designs and comparing them with estimates from the existing NCVS. The study has three key objectives: (1) to develop and pilot test an optimal design (e.g., using CAPI and ACASI) for collecting self-report data on rape and sexual assault; (2) to develop and pilot test a comparison design that uses RDD and allows for the sampling of cell phone-only households; and (3) to conduct a detailed analytic comparison of the two designs, examining the accuracy and quality of the estimates and the relative feasibility and costs of each design.

Responsibilities: Operations manager.

Genetic Epidemiology Branch, National Institute of Mental Health, Bethesda, MD (2004 to 2011)

Dr. Heaton collaborated with senior members of the research team to perform literature reviews, prepare manuscripts, conduct secondary analyses of data, and translate results in large public health data sets, including the National Comorbidity Survey–Reappraisal and the National

Comorbidity Survey of Adolescents Supplement. She used her knowledge of DSM criteria to write algorithms for analyses of psychiatric diagnoses.

As a clinical research interviewer manager for the Family Study of Affective and Anxiety Disorders (2004 to 2011), Dr. Heaton defined and directed clinical survey data collection from the development of initial diagnostic assessments to followup screening measures. She was responsible for the design, development, and implementation of clinical research instruments; administration of structured diagnostic interviews for adults and children and application of DSM criteria for mental disorders; and organization, implementation, and supervision of best-estimate diagnostic procedures. She supervised the day-to-day work of clinical research interview team members, including approximately five professional staff and two nonprofessional staff. She also generated monthly progress reports. Dr. Heaton actively participated in research collaborations and preparation of research papers. Her specific projects include those described below.

Neurodevelopmental Genomics: Trajectories of Complex Phenotypes, University of Pennsylvania – As an external collaborator, Dr. Heaton participated in the design, development, and implementation of clinical survey research instruments.

Hurricane Katrina Community Advisory Group Study–Reappraisal, Harvard University – Dr. Heaton oversaw the clinical reappraisal of the child segment of the study. She also administered Katrina KSADS to participants and generated weekly diagnostic data reports.

Harvard University National Comorbidity Survey of Adolescents – Reappraisal – Dr. Heaton conducted on-site reviews of clinical research data to assist with clinical validation. She also administered structured diagnostic interviews to adolescents and applied DSM criteria for mental disorders.

Fairfax County Department of Family Services, Fairfax, VA (2007)

Dr. Heaton conducted extensive program evaluations for two projects: an evaluation of the effectiveness and impact of Domestic Violence Unit services and a project evaluating factors leading to emergency removal affidavits in Child Protective Services (CPS). The domestic violence evaluation was guided by a logic model and included interviews with program staff, an assessment of policies and procedures, a review of agency intake and outcome data, and preparation of a comprehensive written summary and a brief oral summary of results. The CPS project used qualitative and quantitative methods and involved preparation of a comprehensive written summary of results for CPS staff, which resulted in policy revisions regarding emergency removals of children.

Virginia Department of Social Services, Richmond, VA (2006)

To support statewide policy revisions, Dr. Heaton compiled research from an extensive literature review and prepared a comprehensive report on successful adoption predictors and outcomes. For a second project, she conducted an extensive literature review and prepared an executive summary of current research on the dual licensure of foster and adoptive homes.

Other Professional Experience

Virginia Commonwealth University, School of Social Work, Alexandria, VA (2007 to Present) – As an adjunct faculty member, Dr. Heaton teaches Social Work Practice with Individuals, Families, and Groups I and II and Group Methods in Social Work Practice. She also teaches Clinical Social Work Practice with Individuals, Families, and Groups II.

Childhelp USA Children’s Center of Virginia, Fairfax, VA (2004 to 2005) – Dr. Heaton conducted monthly 3- to 4-hour seminars on child abuse recognition and response for elementary and secondary school teachers in Northern Virginia. She trained more than 1,500 teachers.

Child Protective Services/Department of Family Services, Fairfax, VA (2000 to 2005) – As a social worker, Dr. Heaton provided long-term protective supervision to families with court-adjudicated findings of child abuse or neglect. She provided ongoing and intensive crisis intervention to families using strength-based, brief therapy and cognitive-behavior therapy models. She developed and implemented family service plans and completed risk assessments while providing clinical case management to all family members. In addition, Dr. Heaton conducted investigations and assessments of suspected child abuse or neglect within birth families, foster homes, and daycare facilities; interviewed child victims, suspected perpetrators, and collateral contacts; and co-investigated criminal allegations with county, city, and state law enforcement agencies. She referred clients to medical forensic examiners, psychiatric and psychological examiners, legal advocates, and foster care case managers and secured placements for children within relative and foster care homes. Dr. Heaton coordinated and facilitated Comprehensive Services Act (CSA) case management to access community resources for at-risk children. She wrote affidavits and filed court documents, including petitions for emergency removals and protective supervision orders; testified in numerous civil and criminal court proceedings; and wrote case narratives and documented investigation outcomes in a statewide database. She participated in multidisciplinary meetings to create best practice standards, trained new staff on rapport building and interviewing, and presented community training programs on child abuse and neglect and the role of CPS.

Court-Appointed Special Advocate Program, Rockville, MD (1998 to 2000) – Dr. Heaton coordinated, developed, implemented, and facilitated six 40-hour preservice trainings for approximately 55 volunteers. She screened potential volunteers extensively, provided monthly supervision to approximately 20 volunteers, and coordinated volunteer assignments to child welfare clients. In addition, she maintained and recorded statistical data for fundraising purposes, attended court hearings, and wrote case summaries from court records.

Omni House Behavioral Health Services, Glen Burnie, MD (1998) – Dr. Heaton provided individual psychotherapy in an outpatient community mental health center, facilitated group psychotherapy in an outpatient and a partial hospitalization program, and developed and implemented individual treatment plans. She participated in multidisciplinary treatment planning, interviewed patients, and conducted comprehensive biopsychosocial assessments.

Gateway Family and Child Services, Birmingham, AL (1997 to 1998) – Dr. Heaton provided intervention and outpatient treatment for 12 foster care children with DSM-IV

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diagnoses. She co-led group therapy, provided individual therapy, provided in-home support for foster parents, documented and evaluated current level of functioning, and wrote and implemented multidisciplinary treatment plans.

John Howard Pavilion, St. Elizabeth's Hospital, Washington, DC (1997) – As a graduate student, Dr. Heaton conducted biopsychosocial assessments for pretrial evaluations on a forensic inpatient unit, as well as comprehensive substance abuse assessments for the inpatient intensive treatment unit. She facilitated psychoeducational competency groups for patients awaiting competency hearings, co-facilitated social skills groups for patients re-entering the community, and participated in multidisciplinary diagnostic team evaluations for treatment planning.

Department of Human Resources, Birmingham, AL (1994 to 1996) – Dr. Heaton investigated and assessed reports of child abuse and neglect and provided case management services to at-risk families, using individualized service plans to access community services. She used community resources to reduce the number of foster care placements, conducted court-ordered home evaluations and made recommendations for custody placements, and participated in multidisciplinary staffings with local law enforcement agencies and hospitals to determine the disposition of child abuse and neglect cases. She coordinated other social service, law enforcement, and educational agencies to provide comprehensive services for populations served and directed crisis intervention for at-risk families.

Awards and Professional Achievements

Training Award, National Center on Child Abuse and Neglect Week-Long Summer Research Institute at Cornell University, 2011

Distinguished Performance Award, Kelly Government Solutions Management Team, 2009 and 2011

Graduate School Tuition Reimbursement Award, Virginia Commonwealth University, 2006-2007

Graduate School Fellowship and Tuition Reimbursement Award, Virginia Commonwealth University, 2005-2006

Rebuilding the Nest Award, Fairfax, VA, Court-Appointed Special Advocate Program Awards Dinner, 2005

Publications, Technical Reports, and Presentations

Publications

Merikangas, K.R., Zhang, J., Emsellem, H., Swanson, S., Vgontzas, A., Belouad, F., Blank, M. M., Chen, W., Einen, M., He, J. P., Heaton, L., Nakamura, E., Rooholamini, S., and Mignot, E. (2014). The Structured Diagnostic Interview for Sleep Patterns and Disorders: Rationale and Initial Evaluation. *Sleep Medicine*, 15, 530-535.

Merikangas, K.R., Cui, L., Heaton, L., Nakamura, E., Roca, C., Ding, J., Qin, H., Guo, W., Shugart, Y.Y., Zarate, C., and Angst, J. (2013). Independence of familial transmission of mania and depression: Results of the NIMH Family Study of Affective Spectrum Disorders. *Molecular Psychiatry*, 19(2), 214-219.

Lateff, T., Heaton, L., Cui, L., Nakamura, E., and Merikangas, K. (2013). Validation of a headache interview for children and adolescents. *Pediatrics*, 131(1), 96-102.

Merikangas, K.R., He, J.P., Burstein, M. E., Swendsen, J., Avenevoli, S., Case, B., Georgiades, K., Heaton, L., Swanson, S., and Olfson, M. (2011). Service utilization for lifetime mental disorders in U.S. adolescents: Results of the National Comorbidity Survey of Adolescent Supplement (NCS-A). *Journal of the American Academy of Child and Adolescent Psychiatry*, 50(1), 32-45.

Schmitz, A., Merikangas, K., Swendsen, H., Heaton, L., and Grillon, C. (2011). Measuring anxious responses to predictable and unpredictable threat in children and adolescents. *Journal of Experimental Child Psychology*, 110(2), 159-170.

Presentations

Smith, T., Heaton, L., Zack, S., and Cantor, D. (2014, May). *Obtaining assent from minors – Assessing comprehension in the National Survey of Youth in Custody*. 69th Annual Conference of the American Association for Public Opinion Research, Anaheim, CA.

Heaton, L., and O'Connor, M.K. (2011). *Paternal mental health and child neglect: The relevance to social work education* (roundtable). 57th Annual Program Meeting of the Council on Social Work Education, Atlanta, GA.

Zagar, K., and Heaton, L. (2011). *Assessing parenting capacity of sexually abusive youth* (workshop). Third Annual Multidisciplinary Child Abuse Conference, Children's Advocacy Centers of Virginia, Salem, VA.

Heaton, L.L., Cui, L., Burstein, M., He, J.P., and Merikangas, K.R. (2011). *Perceptions of child neglect on adulthood psychopathology*. 101st Annual American Psychopathological Association Meeting, New York, NY.

Calkins, M.E., Richard, J., Merikangas, K.R., Burstein, M., Heaton, L., Qiu, H., Mentch, F.D., Hermannsson, L., Connolly, J., Abrams, D.J., Chiavacci, R., Grundmeier, R.W., Sleiman, P.M., Loughhead, J., Gur, R.C., Hakonarson, H., and Gur, R.E. (2010). *Identification of children and adolescents at-risk for psychosis: Results of a screen for subpsychotic symptoms in a community sample*. American College of Neuropsychopharmacology 49th Annual Conference, Miami, FL.

Zagar, K. and Heaton, L. (2010). *Assessing parenting capacity of sexually abusive youth* (workshop). Association for the Treatment of Sexual Abusers 29th Annual Conference, Phoenix, AZ.

Patel, D., Keefe, K., Heaton, L., Cui, L., and Merikangas, K.R. (2010). *How accurate are adolescents in reporting parental mental health?* National Institutes of Health Summer Research Festival, Bethesda, MD.

He, J.P., Heaton, L., and Merikangas, K.R. (2008). *Association between mental disorders with marital status, functioning, and disability in a representative sample of U.S. adults: Results from the National*

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Comorbidity Survey Replication Study (NCS-R). National Institute of Mental Health Intramural Research Festival, Gettysburg, PA.

Heaton, L., Hearn, J., and O'Connor, M.K. (2006). *Evidence-based practice when politics govern policy: A case for expedited permanency* (workshop). Influencing State Policy Conference, Washington, DC.

Heaton, L. (2006). *Religious-based child maltreatment: Legally sanctioned?* (workshop). Influencing State Policy Conference, Washington, DC.

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SUMMARY

Dr. Robert Baskin is a senior statistician with over 25 years of experience in conducting and managing statistical research. At the Agency for Healthcare Research and Quality (AHRQ), he is responsible for conducting a broad range of statistical research and analyses and providing expert statistical and methodological consultation to support AHRQ's intramural and extramural research efforts.

EDUCATION

Ph.D., Statistics, University of Florida, 1991

M.S., Mathematics, Oklahoma State University, 1979

B.A., Mathematics, University of Arkansas, Little Rock, 1976

B.S., Music Education, Arkansas Polytechnic College, 1972

EXPERIENCE AND ACCOMPLISHMENTS

Staff Service Fellow (Mathematical Statistician), Agency for Healthcare Research and Quality (2003 to Jan 2015)

- Identify and conduct research on statistical methods and use of statistics in survey design and in health services and health policy research.
- Carry out broad range of statistical projects including estimating random effects models, research on impact of imputation on variance estimation, and efficient subsampling in MEPS.
- Consult on the sample design, weighting, sample allocation and statistical estimation issues in the Insurance Component of the MEPS.
- Produce Bayesian models for small domain estimates of insurance coverage and expenditures using MEPS data.
- Provide expert statistical consultation for a broad range of statistical issues within AHRQ relating to health care policy.
- Provide expert statistical consultation to other government agencies on complex study designs and analytical techniques.

Senior Statistician, Westat (2001 to 2003)

- Carried out nonresponse adjustments and raking for development of weights for the National Youth Anti-Drug Media Campaign NYAMC. Carried out propensity analysis for development of longitudinal weights.
- Conducted research on sample allocation and control overlap for the sample redesign of the Drug Abuse Warning Network. Identified use of SPC control charts for purposes of data quality control.
- Conducted research on building a frame and stratification for sampling of aquaculture facilities for the Environmental Protection Agency.

Supervisory Mathematical Statistician and Mathematical Statistician, Bureau of Labor Statistics, Washington, D.C. (1992 to 2000)

- Supervised a staff of statisticians who supported statistical aspects of the Consumer Price Index (CPI)
- Conducted statistical research to meet long-term goals of quality improvement in the CPI.
- Conducted and directed broad range of statistical projects, including conversion to computer-aided data collection.

- Managed resources for monthly production and performed long-term planning for the 1998 revision of the CPI.
- Used SAS extensively on the mainframe, UNIX, and PC for database management and index estimation.
- Used C in the UNIX and DOS environments

Consultant, Environmental Services Permitting, Inc., Alachua, Florida (1991)

- Served as a SAS consultant for the management of a large water-management database.
- Designed SAS macros for statistical analysis and database management.

OTHER PROFESSIONAL EXPERIENCE

University of Florida, Gainesville, FL (1985-1991)

Full-time instructor (1990-1991).

- Taught the following courses: Introduction to Statistics for Social Scientists, Introduction to Mathematical Statistics, and Statistical Computing.

Graduate research assistant (1987 to 1990)

- Served as a statistical consultant to faculty and graduate students in the Center for Instructional and research Computing Activities.
- Interviewed prospective clients and designed sampling and experimental research.
- Analyzed data using SAS, SPSS, and BMDP as well as such specialized software as LIMDEP and GLIM. Consulted on statistical computing and tested new software.
- Prepared reports, documentation, and grant proposals.

Graduate teaching assistant (1985 to 1987)

- Taught Introduction to Statistics and Introduction to Sampling.

College of St. Benedict, St. Joseph, MN (1984 to 1985)

- Taught College Algebra, Calculus I, Introduction to Mathematical Statistics, and Introduction to Statistics.
- Directed independent studies on mathematical projects and advised actuarial students.
- Served as assistant mathematics club advisor, supervised teaching assistants, and led seminars for other mathematics faculty.
- Performed occasional consulting services.

Purdue University, West Lafayette, IN (1981 to 1984)

Graduate teaching assistant

- Taught College Algebra; Calculus I, II, and III; Honors Calculus I and II; Differential Equations; and Linear Algebra.
- Supervised other graduate teaching assistants during the summer session.

University of Illinois, Urbana, IL (1979 to 1981)

Lecturer

- Taught Trigonometry, Linear Algebra, Business Calculus, and Calculus I and II.

Oklahoma State University, Stillwater, OK (1976 to 1979)

Graduate teaching assistant

- Taught College Algebra, Trigonometry, and Calculus I and II.

PUBLICATIONS

Baskin, R. M. and Wun, L.M., “Subsampling the Medical Expenditure Panel Survey for High-Expenditure Cases”, Proceedings of the Survey Research Methods Section, American Statistical Association, 2013.

Baskin, R. M., and Thompson, M. S., “Anomalies under Jackknife Variance Estimation Incorporating Rao-Shao Adjustment in the Medical Expenditure Panel Survey Insurance Component”, Proceedings of the Fourth International Conference on Establishment Surveys, 2012

Baskin, R. M., Sangl, J. A., and Zodet, M. W., “Effect of Different Imputation Methods on Factor Analyses of CAHPS Nursing Home Survey”, Proceedings of the Federal Committee on Survey Methodology Conference, 2012

Baskin, R.M., Yu, W., and Machlin, S., “Evaluation of PPS Sampling for the Medical Expenditure Panel Survey”, Proceedings of the Survey Research Methods Section, American Statistical Association, 2009.

Baskin, R.M. and Fay, R.E., “Comparison of Imputation Adjustment Techniques on Variance Estimation in the Medical Expenditure Panel Survey”, Proceedings of the Survey Research Methods Section, American Statistical Association, 2009.

Baskin, R.M. and Sommers, J., “Comparison of Direct, Mixed Model, and Bayesian Metropolitan Statistical Area Estimates for the Insurance Component of the Medical Expenditure Panel Survey”, Proceedings of the Survey Research Methods Section, American Statistical Association, 2008.

Baskin, R.M., Zodet, M.W. and Ezzati-Rice, T.M., “Comparison of Imputation Adjustment Techniques for Variance Estimation in the Medical Expenditure Panel Survey”, Proceedings of the Survey Research Methods Section, American Statistical Association, 2008.

Wun, L.M., Ezzati-Rice, T.M., and Baskin, R.M., “Evaluation of the Prediction Model and Oversample of Low Income Persons the Medical Expenditure Panel Survey”, Proceedings of the Survey Research Methods Section, American Statistical Association, 2008.

Ezzati-Rice, T.M., Baskin, R.M., Goksel, H., Digaetano, R., and Rohde, F., “Investigation of the Impact of Imputation on Variance Estimation in the Medical Expenditure Panel Survey”, Proceedings of the Survey Research Methods Section, American Statistical Association, 2008.

Baskin, R.M. and Ghosh, M., “Investigation of Empirical Bayes Confidence Intervals for Expenditure Data in the Medical Expenditure Panel Survey”, Proceedings of the Survey Research Methods Section, American Statistical Association, 2007.

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- Baskin, R. and Johnson, W.H. "Estimation of Variance Components for Commodities and Services in the U.S. Consumer Price Index", Proceedings of the Survey Research Methods Section, American Statistical Association, 1995
- Baskin, R. "Imputation of Vacant Units in the Residential Rent Index of the U.S. Consumer Price Index", Proceedings of the Survey Research Methods Section, American Statistical Association, 1994
- Baskin, R. "Estimation of Variance Components for the U.S. Consumer Price Index Via Gibbs Sampling", Proceedings of the Survey Research Methods Section, American Statistical Association, 1993
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PRESENTATIONS

- Baskin, R. Imputation for Missing Data. AHRQ Emerging Centers Intramural Research Seminar. February 3, 2003.
- Baskin, R. Bayesian Analysis versus Frequentist Analysis in Clinical Trials. AHRQ/CPTA Staff Meeting. April 2, 2003.
- Baskin, R. Applications of Propensity Scores in Health Surveys and in Case-Control Matching. Emerging Centers Intramural Research Seminar. June 26, 2003.
- Baskin, R. Statistical Issues in the National Healthcare Quality/Disparity Reports. Interagency Subcommittee on Disability Statistics Meeting. July 9, 2003.
- Baskin, R. Meta-Analysis and Bayesian Meta-Analysis. Emerging Centers Intramural Research Seminar. October 30, 2003.
- Fleishman, J. and Baskin, R. Random Effects Modeling Using MEPS Data. CFACT Seminar. October 9, 2003.
- Sridharan, S. and Baskin, R. Entropy, Capriciousness and Prosecutorial Certification Practice in the Virginia Juvenile System. WESTAT Brownbag Seminar. March 25, 2004.
- Baskin, R. Entropy, Disease Mapping: Likelihood and Bayesian Approaches to Disease Mapping with Examples. Thursday Morning Seminar Series. April 15, 2004.
- Baskin, R. Discussion of "Theory and Methods for Nonparametric Survey Regression Estimators". Federal Committee on Survey Methodology Funding Seminar. June 21, 2004.
- Baskin, R., et. al. Investigation of the Impact of Imputation on Variance Estimation in the Medical Expenditure Panel Survey. Joint Statistical Meetings. August 9, 2004.
- Baskin, R. Superiority versus non-Inferiority Hypothesis Tests. COE Journal Club. April 6, 2005.
- Baskin, R. A Technical Review of Fixed Effect versus Random Effect Statistical Models. Thursday Morning Seminar Series. July 7, 2005.
- Baskin, R., et. al. Investigation of Random Effects Models for Time Varying Variables with Missing Values in the Medical Expenditure Panel Survey. Joint Statistical Meetings. August 9, 2005.
- Baskin, R. Dealing with Missing Survey Data in Longitudinal Data Analysis. Statistics Canada Symposium 2005. October 25, 2005.
- Baskin, R. Weird Math Tricks I've Learned this Year, Part I: "Algebraic Statistics". Cfact Seminar. November 3, 2005.
- Baskin, R. Investigation of Variance Components in the Medical Expenditure Panel Survey. FCSM 2005. November 14, 2005.

Baskin, R. Discussion of: "Provider Profiling" by Racz and Sedransk. WSS 2006. June 4, 2006.

Baskin, R. A Review of Superiority and NonInferiorty Trials. CAG Evidence Forum. July 12, 2006.

Baskin, R. A Review of Superiority and NonInferiorty Trials, Part 2. CAG Evidence Forum. October 11, 2006.

Baskin, R. Introduction to R and WinBUGS. JPSM One Day Course. November 7, 2006.

Baskin, R., and Ghosh, M. Investigation of Empirical Bayes Confidence Intervals for Expenditure Data in the Medical Expenditure Panel Survey. Joint Statistical Meetings. August 2, 2007.

Baskin, R., and Sommers, J. Comparison of Direct State Estimates and Bayesian State Estimates for the Medical Expenditure Panel Survey. SAE 2009, Pisa Italy. September 3, 2007.

Baskin, R. Introduction to R and WinBUGS. JPSM Two Session Course. September 12 and December 7, 2008.

Baskin, R., and Sommers, J. Comparison of Direct, Mixed Model, and Bayesian Metropolitan Statistical Area Estimates for the Insurance Component of the Medical Expenditure Panel Survey. Joint Statistical Meetings. August 7, 2008.

Baskin, R., Zuvekas, S. and Ezzati-Rice, T, Proxy Pattern-Mixture Analysis of Missing Health Expenditure Variables in the Medical Expenditure Panel Survey. ITSEW, June 22, 2011

Baskin, R., Sangl, J., and Zodet, M "Effect of Different Imputation Methods on Factor Analyses of CAHPS Nursing Home Survey", FCSM 2012

Baskin, R., Owens, P., and Sroka, K "A Comparison of Small Area Models Used in the Quality Indicator Program Sponsored by Agency for Healthcare Research and Quality", FCSM 2013

Yong K. Lee

Summary

Yong Lee is a senior systems analyst with 26 years of experience supporting the analytic and programming needs of survey research. His specific areas of expertise include working with complex data systems and performing statistical analyses, sampling, weighting, and imputation. Mr. Lee also leads a team of programmers assigned to various analytic task order contracts. He prioritizes their work, develops and maintains schedules, and provides technical guidance as needed.

Education

B.S., Electrical Engineering, University of Maryland, 1987

Relevant Project Experience

Westat (1998 to Present)

Extension of the Evaluation of Ohio's Title IV-E Waiver Demonstration

Client: Ohio Department of Job and Family Services

Project Overview: As a subcontractor, Westat is responsible for participant outcomes analysis to examine the continued impact of ProtectOhio on children and families. The 5-year contract includes studies to investigate the impact of new waiver services such as family visitation, family team conferencing, and enhanced kinship services. Westat annually captures and conducts secondary analysis of administrative data for participants in 18 participating and 18 comparison counties.

Responsibilities: Mr. Lee supervises programmers providing support for the analysis of Ohio's SACWIS data. He plans the workload of the systems team and performs SAS programming to support data analysis. He has also provided support for the analysis of Ohio's FACSIS data for the project.

Evaluation of the DC Opportunity Scholarship Program

Client: Institute of Education Sciences, U.S. Department of Education (ED)

Project Overview: Westat and its research partners are conducting an evaluation of a program that provides need-based annual scholarships to DC children to attend a participating private school. The evaluation team is (1) providing technical assistance to the program operator, particularly with respect to the design and implementation of the random assignment of participants, and (2) conducting a 5-year impact evaluation. The study design includes student assessments; parent, student, and school surveys; and collection of information from school and program operator records.

Responsibilities: Mr. Lee leads a team of programmers in support of evaluation data collection, weighting, imputation, and analysis. He plans and schedules work to produce ad hoc reports and listings; analyze application, survey, and test data across cohorts; and prepare data/file deliverables. He is also (1) supervising development of web applications for parent and principal

surveys; (2) supervising programmers in developing SAS code to weight and impute analysis data, to produce ad hoc reports and listings and to analyze the impact data; and (3) supervising modifications and enhancements to the MS Access tracking system for collecting test data. Earlier, Mr. Lee supervised SAS and MS Excel programming support for the design and implementation of the applicant lottery. He also helped develop the user's guide.

Integrated Evaluation of ARRA Funding, Implementation, and Outcomes

Client: U.S. Department of Education (ED)

Project Overview: The 2009 American Recovery and Reinvestment Act (ARRA) awarded approximately \$100 billion in new education funding through a variety of programs. This evaluation is examining the potential role of ARRA programs in reform efforts and exploring the challenges educators have faced in implementing reforms. The study includes (1) review and use of extant data and (2) surveys of all 50 states and the District of Columbia, involving nationally representative samples of 1,700 districts and 3,800 schools.

Responsibilities: Mr. Lee supervises programmers providing technical support for the design, development, and maintenance of the SQL*Server/ASP.NET web-based data collection system for the ARRA surveys. He also supervises SAS programming support for sampling, weighting, analysis, and preparation of ad hoc reports.

2009 Residential Energy Consumption Survey (RECS): Energy Supplier Survey (ESS)

Client: Energy Information Administration (EIA)

Project Overview: RECS is EIA's instrument for collecting energy use data for households. The ESS collected cost and consumption data from companies that supplied electricity, natural gas, fuel oil, and propane to households in the RECS household survey. Approximately 1,500 suppliers were contacted in a multimode survey (mail, fax, telephone, and web) to collect information for approximately 21,000 customers.

Responsibilities: Mr. Lee supervised SAS programming support for data collection and analysis. He supervised programmers in developing SAS code to load varying MS Excel data into the database, produce reports, and update status flags for tracking data through the process.

Measures of Effective Teaching (MET)

Client: Bill and Melinda Gates Foundation (BMGF)

Project Overview: Westat provided a MET Service Center to serve as the intermediary between BMGF and six school districts participating in information collection activities aimed at developing measures of effective teaching. Westat also coordinated student assessment data collection activities, provided field management, and prepared post-data collection data file deliveries.

Responsibilities: Mr. Lee analyzed district-supplied class- and student-level data (using SAS and MS Excel) to identify relationships in the data and to other data sources. He also analyzed data consistency and cleanliness. In addition, Mr. Lee developed SAS code to match data sources by ID and/or name and presented them in Excel for continued data cleaning. He provided technical direction to the project programmer and filled in for the deputy project lead as necessary.

Personnel Preparation Performance Reporting Support

Client: Office of Special Education Programs (OSEP), U.S. Department of Education (ED)

Project Overview: Westat's primary activities under this contract are (1) to develop and maintain a web-based data collection system used by grantees funded under OSEP personnel preparation program, to report data on students in their programs; (2) to collect data annually on students trained under OSEP personnel preparation grants; (3) to provide grantees with technical assistance on data entry; and (4) to analyze student data reported by grantees.

Responsibilities: Mr. Lee supervised programmers in the design, development, and maintenance of a SQL*Server/ASP web-based data collection system for this project. He also supervised SAS programming support for data analysis and ad hoc reports.

Initial Technical and Random Assignment Support for the DC Choice Program

Client: Institute of Education Sciences (IES), U.S. Department of Education (ED)

Project Overview: Westat was awarded this contract to provide initial technical support to IES and the program operator for the reauthorized DC Choice Program by designing a rigorous applicant lottery. Westat and its subcontractor worked closely with IES to consider design options. A user's guide and programming code for the lottery were prepared.

Responsibilities: Mr. Lee supervised SAS and MS Excel programming support for the design and implementation of the applicant lottery. He also helped develop the user's guide.

Impact Evaluation of the DC Choice Program

Client: National Center for Education Evaluation and Regional Assistance, Institute of Education Sciences, U.S. Department of Education (ED)

Project Overview: The first federally funded U.S. voucher program includes a requirement that the program be rigorously evaluated using the strongest possible design. Westat and its partners were responsible for design of the analyses, data collection, and preparation of annual reports to Congress. Data collection included administration of a standardized test, parent and student surveys, and principal surveys each spring.

Responsibilities: Mr. Lee led a team of programmers in support of data collection, sampling, weighting, imputation, and analysis. He planned and scheduled work to produce ad hoc reports and listings and to analyze the application, survey, and test data across cohorts. He supervised programmers in (1) developing SAS code to randomly select scholarship winners, given the number of scholarship slots and applicants in multiple strata; (2) developing SAS code to randomly place scholarship winners into their preferred school, given the availability of seats in the school, by grade and sibling preference for the same school; (3) redesigning and modifying the MS Access/SQL Server data entry application; (4) developing SAS code to weight and impute the analysis data; and (5) developing Stata code to analyze the impact data. He also supervised development of an MS Access tracking system for collecting test data.

Followup Evaluation of the Gaining Early Awareness and Readiness for Undergraduate Programs (GEAR UP)

Client: U.S. Department of Education (ED)

Project Overview: Westat conducted a followup evaluation of GEAR UP, which is intended to increase postsecondary enrollment and success rates among disadvantaged students. The evaluation followed a sample of GEAR UP and comparison students who were studied through their middle school years. Data collection included web or CATI interviewing with students (according to their preference) at the end of high school and telephone interviews with parents 6 months later.

Responsibilities: Mr. Lee planned and scheduled SAS programming support for imputation and analyses of data from the National Education Longitudinal Study, the Education Longitudinal Study, and GEAR UP. He supervised production of restricted use data files for the client.

Technical Assistance in Data Collection, Analysis, and Report Preparation

Client: Office of Special Education Programs (OSEP), U.S. Department of Education (ED)

Project Overview: Westat's primary activities under this contract were (1) to prepare and produce the annual reports to Congress on the implementation of the Individuals with Disabilities Education Act (IDEA); (2) to maintain and annually update the OSEP database of state-reported data required by IDEA; (3) to assist the states in building the capacity to collect valid and reliable data; (4) to perform substantive research on topics in special education; and (5) to produce policy analyses on current topics in special education.

Responsibilities: Mr. Lee provided programming support for enhancements, modifications, disproportionality analyses, and other ad hoc analyses of the IDEA data. He also supported analyses of a limited English proficiency survey and analyses of data from the Early Childhood Longitudinal Study, Kindergarten Cohort. He reviewed the work of other team members and mentored them in SAS conventions and techniques.

Operation, Maintenance, and Enhancement of the Education Data Exchange Network (OME-EDEN)

Client: Office of Planning, Evaluation, and Policy Development, U.S. Department of Education (ED)

Project Overview: The OME-EDEN assists ED in implementing a central repository and reporting system for state-reported elementary and secondary education data (EDFacts) to replace the separate data collection instruments and processes sponsored and managed by various elementary and secondary education program offices. As a subcontractor, Westat led the data definition and data governance task to integrate program office data collection requirements into EDFacts, eliminate data redundancy across program offices, and establish a framework for setting the rules, policies, and procedures related to EDFacts.

Responsibilities: Mr. Lee planned and scheduled maintenance of the MS Access tracking system and provided programming support to generate OMB reports using SAS, MS Excel, and Word mail merge. In addition, Mr. Lee planned and scheduled SAS programming support for analyses of General Education Provisions Act and GAPS data for FY 2002-2004. He supervised programmers in developing SAS code to read and clean Excel data received in flexible formats, analyzing the data, and producing Excel tables to be used in reports.

Evaluation of the Milwaukee School Choice Program

Client: University of Arkansas

Project Overview: As a subcontractor for an evaluation of the Milwaukee Parental Choice Program (MPCP), Westat trained teachers to administer standardized assessment tests to a randomly selected panel of MPCP students in grades 3 to 10 and also designed and processed six teacher-administered surveys for MPCP students in grades 4 to 9 (both activities occurred annually for 5 years). Mail surveys were administered to MPCP public and private school principals and to approximately 1,000 MPCP public school teachers in years 1, 3, and 5. Westat also designed and administered telephone surveys to a random sample of students and parents.

Responsibilities: Mr. Lee planned and scheduled work to produce ad hoc reports and listings and to analyze application, survey, and test data. He supervised the programmers who developed

the MS Access tracking system for collecting test and survey data, developed SAS code to name-match multiple sources of data, and developed SAS code to draw the sample.

Technical Support for Postsecondary Education Analyses

Client: Office of the Under Secretary, U.S. Department of Education (ED)

Project Overview: Beginning in 1989, Westat provided technical support to the Office of the Under Secretary in areas relating to postsecondary education. This support was provided through three consecutive task order contracts administered by the Postsecondary, Adult, and Vocational Education Division of the Planning and Evaluation Service.

Responsibilities: Mr. Lee designed and developed a system, in SAS and MS Excel, to simulate the benefits of student loans, using the Beginning Postsecondary Students Longitudinal Study and data from the Current Population Survey (CPS) March supplement. Using the National Postsecondary Student Aid Study (NPSAS) and Pell Grant data, he designed and developed a system to enhance ED's model for simulating the effects on college enrollment of different Pell grant maximums. Both systems permit multiple user input and options. In addition, Mr. Lee has calculated the unmet need of students in the NPSAS data set by relating NPSAS, Pell, National Student Loan Data System (NSLDS), and Integrated Postsecondary Education Data System data. Using NSLDS and CPS data, he also modeled repayment projections for income-contingent loans in the NSLDS. He planned the workload of the systems team, oversaw project deliverables, reviewed the work of his team, and programmed in SAS to support data analysis.

Budget Service Technical and Analytical Support

Client: Office of the Under Secretary, Budget Service, U.S. Department of Education (ED)

Project Overview: Under this task order contract, Westat provided a broad range of support services to assist the Budget Service in developing budget policies for ED. Major activities included development and manipulation of formula-based allocation models; analysis of existing databases; design and implementation of data collection activities; and development of policy briefs, analytic reports, program evaluations, and oral briefings.

Responsibilities: Mr. Lee provided analysis and programming support for reformatting, imputation, and sampling frame development on a task involving the 2004 Office of Civil Rights survey. Westat analyzed the reported data, reformatted the data and produced a file for web publication, imputed for survey nonresponse, updated the time-series file and documented all survey data from 1968 to the present, and developed the sampling frame for the 2006 survey.

Employment Service Performance Measurement Project

Client: Washington Employment Security Department

Project Overview: The U.S. Employment Service has an elaborate system for measuring the performance of its labor exchanges in each state. Under contract to the Washington Employment Security Department, Westat compared and contrasted the views of the labor exchange given by a range of possible measures.

Responsibilities: Mr. Lee planned the workload of the systems team and performed SAS programming to support data analysis.

Advisory and Assistance Services to Support the Census Bureau's Year 2000 Census: Statistical and Methodological Research

Client: U.S. Bureau of the Census

Project Overview: Westat statisticians and survey methodologists provided support services, on a task order basis, in preparation for the Year 2000 Census and in support of other Bureau surveys.

Responsibilities: For the Census Payrates task, Mr. Lee planned the workload of the systems team and programming in SAS for data analysis.

UTA, Arlington, VA (1996 to 1998)

As a computer specialist, Mr. Lee worked on site at BLS in Washington, DC. He supported programming needs (SAS, SuperWYLBUR, Sun Solaris, IBM MVS), procured hardware and software, and performed server administration for five Sun and three NT machines for the Statistical Methods Division, Office of Employment and Unemployment Statistics.

CBSI, Fairfax, VA (1991 to 1996); Orkand Corporation, Silver Spring, MD (1990 to 1991)

As a senior programmer/analyst, Mr. Lee supported the SAS programming needs of the Office of Research and Evaluation within the Office of Employment and Unemployment Statistics, BLS. He performed requirements analysis, design, and coding for a unification of databases project using Systems Architect, FoxPro, and PowerBuilder. He also maintained and enhanced the production system in PL/1, SAS, and Clipper and served as the liaison between the systems group and the production group for the International Prices Program.

Federal National Mortgage Association, Washington, DC (1989 to 1990)

Mr. Lee's activities included analysis, design, and coding in PL/1 and EASYTRIEVE+ for the Credit Policy Management Reporting System. He modified COBOL production programs for the Delinquency Reporting System and wrote small utility programs and extracts in PL/1 and SAS.

ORI, Inc., Rockville, MD (1986 to 1987)

Mr. Lee analyzed, designed, developed, coded, and wrote unit test plans. He performed system testing, updated a database using Clipper, and updated and edited program specifications and documentation for a FORTRAN-based (MS-DOS) submarine baseline simulations project.

Mustafa C. Karakus, Ph.D.

Summary

Dr. Mustafa C. Karakus is a health economist with a strong background in applied microeconomics, health economics, and econometrics and with training in micro simulations modeling and cost-effectiveness analysis. At Westat, Dr. Karakus has conducted economic analysis and evaluation of data for projects funded by New York City and the following federal agencies: U.S. Department of Health and Health Services; HHS agencies, Centers for Disease Control and Prevention and the Substance Abuse and Mental Health Administration (SAMHSA); U.S. Department of Labor; U.S. Social Security Administration; and the Veterans Benefit Administration. His work has centered on all aspects of economic evaluations, including cost-effectiveness, cost-benefit, and decision-making analysis in programs involving subpopulations such as people with serious mental illness, ex-offenders, drug court clients, the chronically homeless. He is leading the multi-site evaluation of Title IV-E waiver in Michigan. He has previously led multi-site cost evaluation of SAMHSA grantees in the of drug court initiation and/or enhancement grants. Dr. Karakus' research papers have been published in *PharmacoEconomics*, *Applied Economics*, *Atlantic Economic Journal*, *Journal of Behavioral Health Services and Research*, *Administration and Policy in Mental Health* and other reputable public policy and health care financing journals. He recently served as the guest editor of a special section on "Affordable Care Act and Behavioral Health Services" for the *Journal of Behavioral Health Services and Policy* that came out in fall 2014. He also has presented scientific papers at numerous national and international conferences.

Education

Postdoctoral Fellowship, Johns Hopkins Center for Prevention and Early Intervention, 2005
Ph.D., Health Economics, Johns Hopkins University, 2004
M.A., Economics, University of Colorado, 1997
B.S., Managerial Engineering, Istanbul Technical University, Istanbul, Turkey, 1994

Relevant Project Experience

Westat (2005 to Present)

Assessment of the Barriers That Constrain the Adequacy of SNAP Allotments

Client: U.S. Department of Agriculture (USDA)

Project Overview: The goal of this project is to determine individual, household, and environmental barriers faced by Supplemental Nutrition Assistance Program (SNAP) participants that prevent them from accessing a healthy diet. Along with describing the interaction between these barriers, Westat is determining whether and how these barriers can be accounted for in determining SNAP allotments. The study design is based on a mixed-methods approach that includes a quantitative survey of 4,800 SNAP participants followed by 120 in-depth interviews. Westat is responsible for sampling, survey and interview administration, data analysis, and report writing.

Responsibilities: Project director. Dr. Karakus is responsible for all aspects of project performance.

Access, Participation, Eligibility, and Certification Study (APEC-II): Erroneous Payments in the National School Lunch Program (NSLP) and the School Breakfast Program (SBP)

Client: Food and Nutrition Service, U.S. Department of Agriculture

Project Overview: Westat is a subcontractor for this replication study, conducted to produce national estimates of overpayments, underpayments, and overall erroneous payments as a result of misclassification of students' school meal eligibility status and other noncertification errors. Westat is conducting data collection activities, including record abstracting, observations of meals transactions, aggregate data abstracting, and administration of school director questionnaires, including week-long site visits to 130 school districts and 390 schools.

Responsibilities: Senior researcher for administrative error analysis/final report author.

Options to Improve the Effectiveness of the United States Behavioral Health System Through Existing Federal Programs

Client: U.S. Department of Health and Human Services (HHS)

Project Overview: This project was designed to identify ways for Federal programs to improve and strengthen the behavioral health care system and complement changes resulting from the Affordable Care Act. The Westat team identified strategies in three target areas (practice improvement, financing of effective care, and integration and coordination of general and behavioral health care), studied HHS grant programs that could benefit from specific strategies, and produced a final report that matched strategies for the target areas with HHS programs where the strategy might be applied.

Responsibilities: Project director.

Veterans Benefits Administration (VBA) Longitudinal Studies

Client: U.S. Department of Veterans Affairs (VA)

Project Overview: Westat is assisting VBA in conducting two parallel longitudinal studies to address the outcomes of its Chapter 31 and Chapter 33 programs. The Chapter 31 program (VetSuccess) assists veterans with service-connected disabilities to get and keep jobs. The Post-9/11 GI Bill (Chapter 33) program offers substantial education and housing benefits to eligible veterans who attend college. Both studies will assess, over a 20-year period, the long-term outcomes of three cohorts of veterans entering the programs in 2010, 2012, and 2014. Westat is responsible for collecting data on the samples of veterans and reporting annually on the primary outcomes associated with program participation.

Responsibilities: Project director.

Farmers' Market Client Survey

Client: Food and Nutrition Service, U.S. Department of Agriculture (USDA)

Project Overview: The purpose of this evaluation was to examine the facilitators and barriers to shopping at farmers' markets among recipients of Supplemental Nutrition Assistance Program (SNAP) benefits. Based on SNAP use at farmers' markets, a nationally representative sample of SNAP recipients was assigned to either an Electronic Benefit Transfer (EBT) user or EBT nonuser group. A total of 3,700 SNAP recipients completed surveys. Westat also conducted 12 focus groups with EBT users and nonusers. GIS data were used to examine the services available

near farmers' markets, as well as distances to specified places of interest around farmers' markets that serve SNAP recipients.

Responsibilities: Project director.

Regional Office Review of Applications (RORA)

Client: Food and Nutrition Service, U.S. Department of Agriculture (USDA)

Project Overview: This study is examining administrative errors that occurred during local education agencies' approval of applications for free and reduced-price meals in the National School Lunch Program. As an independent reviewer, Westat abstracts data from the 2010-2011 school year and analyzes and assesses administrative errors in sampled applications.

Responsibilities: Project director.

Evaluation of the Summer Food Service Program (SFSP) Enhancement Demonstrations Study

Client: Food and Nutrition Service (FNS), U.S. Department of Agriculture (USDA)

Project Overview: The Agriculture, Rural Development, Food and Drug Administration, and Related Agencies Appropriations Act of 2010 directed the Secretary of Agriculture to carry out demonstration projects to develop and test methods of providing access to food for urban and rural children during the summer months. The purpose of this project, a task under a blanket purchase agreement with FNS, was to evaluate four types of FNS enhancement demonstration projects established to increase participation in the SFSP. Westat conducted an outcome and process evaluation. The outcome evaluation design consisted of telephone interviews with parents of project participants in the summer and fall 2011 and 2012. The process evaluation design included site visits and key informant interviews to assess recruitment and outreach, roles and responsibilities, methods for delivering the program, and training of food providers. Westat also reviewed demonstration materials and collected and analyzed data on demonstration costs.

Responsibilities: Task lead on cost data collection and analysis.

Child Nutrition Analysis and Modeling

Client: Food and Nutrition Service (FNS), U.S. Department of Agriculture (USDA)

Project Overview: Westat assisted FNS in assessing current and emerging policy issues pertinent to several special nutrition programs, such as the National School Lunch Program, the School Breakfast Program, the Child and Adult Care Food Program, the Summer Food Service Program, and several smaller child nutrition and food distribution programs. Westat reviewed participant applications and conducting independent assessments of administrative error rates to determine eligibility for child nutrition programs. In addition, Westat developed a coding system for extracting nutrient and food group data, analyzed nutrient and food group data for child nutrition programs, and fielded participant surveys to evaluate the pilot Summer Food Service Programs.

Responsibilities: Task leader. Dr. Karakus worked on all aspects of the study, including design, analysis, and reporting.

New York City Center for Economic Opportunity (CEO) Program Evaluation

Client: Center for Economic Opportunity/New York City Human Resources Administration

Project Overview: Westat is evaluating initiatives of the CEO Program, Mayor Bloomberg's effort to move economically disadvantaged New Yorkers out of poverty. The initiatives are focused on young adults, poor working adults, and families with young children (<5 years). The Westat team is examining approximately 35 programs to determine which can best be evaluated,

developing an evaluation design, and working with the selected programs to systematically collect information for evaluating impact, program implementation, and cost-benefit.

Responsibilities: Dr. Karakus led economic evaluations. He implemented cost analysis and cost-benefit analysis of selected programs.

TRICARE Preventive Health Demonstration Projects

Client: TRICARE Management Activity (TMA), U.S. Department of Defense (DOD)

Project Overview: Westat developed and implemented two demonstration projects to evaluate the efficacy of (1) providing incentives for healthful behaviors among a non-Medicare eligible, retired population enrolled in TRICARE Prime (and their dependents over age 21) and (2) providing an annual preventive health services allowance to active-duty military service members and their enrolled dependents. The projects required that Westat operate a dedicated office at TMA headquarters. A total of 15,000 individuals were invited to participate. Westat worked with TMA and other contractors to access electronic medical records and also collected proof of health activity completion directly from participants; determined compliance and, for one demonstration, disbursed incentives; and collated and analyzed data on an annual basis.

Responsibilities: Senior analyst. Dr. Karakas examined the cost information and led the analysis of claims data.

New Start Employment Options Project (NSEOP)

Client: City of Los Angeles

Project Overview: The NSEOP builds on the California Department of Corrections and Rehabilitation's (CDCR's) investment in vocational training by allowing the Workforce Development System to incorporate and systematically improve service delivery to ex-felons. Westat implemented a process evaluation, along with outcomes reporting and analysis. Qualitative and quantitative data were collected during interviews with employment specialists, New Start coordinators, and staff from partner agencies; from information systems used by participating agencies; and from monthly project reports submitted to the CSDCR.

Responsibilities: Project director.

Federal Financing of Supported Employment and Customized Employment for People with Mental Illnesses

Client: U.S. Department of Health and Human Services (HHS)

Project Overview: The purpose of this project was to increase Federal and state understanding of mechanisms that could be used to finance supported employment (SE) and customized employment (CE) services for people with mental illness. Westat gathered information from members of the Federal Employment Workgroup, conducted site visits to states with promising financing mechanisms, and reviewed literature on the cost-effectiveness of SE and CE services.

Responsibilities: Project director.

Evaluation of the Los Angeles Re-Entry Employment Options Project (REEOP)

Client: City of Los Angeles

Project Overview: Westat evaluated the implementation and outcomes of REEOP, which provides a formal mechanism linking job creation, training, and job placement for men and women who leave prison with no direct access to specialized programs. REEOP staff assess skills and employment history and match participants with a job within 30 days if there are no significant employment barriers. The program also provides linkages to job training resources and

services, as well as substance dependence treatment, mental health, and related services as needed.

Responsibilities: Project director and lead economist.

Tuberculosis Epidemiologic Studies Consortium (TBESC) Monitoring

Client: Centers for Disease Control and Prevention (CDC)

Project Overview: The purpose of this contract was to provide quality assurance support for research conducted by the TBESC, which includes 22 sites in the United States and Canada. The consortium conducts epidemiologic, behavioral, economic, laboratory, and operational investigations. Westat developed standard operating procedures, trained clinical site personnel, developed protocol procedures, and conducted site monitoring.

Responsibilities: Health economist. Dr. Karakus led decision tree analysis, sensitivity tests, and cost estimation. Westat implemented decision analysis and sensitivity analysis for potential proposals to obtain estimates of cost per case and cost per case averted.

Vocational Rehabilitation and Employment (VR&E) Service Employment Outcome Study

Client: Veterans Benefits Administration, U.S. Department of Veterans Affairs (VA)

Project Overview: During this 1-year study, Westat reviewed the vocational rehabilitation literature and determined how to create employment outreach activities. The design included (1) how to structure followup contacts at the first-quarter, third-quarter, and year intervals; (2) how to collect followup employment outcome data, such as earnings and career progression; and (3) methods for assessing outcomes gained from participation in an employment-based program. In addition, Westat developed four strategies for completing employment outcome followup activities with VR&E participants, as well as recommendations on how to adapt and incorporate successful strategies into the VR&E service delivery process. The study also involved a cost-benefit analysis of the various options proposed.

Responsibilities: Dr. Karakus was the task lead for cost-benefit analyses of the four alternative models of employment outreach.

Evaluation of Adult Treatment Drug Courts

Client: Center for Substance Abuse Treatment (CSAT), Substance Abuse and Mental Health Services Administration (SAMHSA)

Project Overview: Westat conducted a multisite evaluation of 20 adult treatment drug courts receiving funding to enhance and/or expand their treatment services. The main question addressed by this impact and outcome evaluation was whether the addition of substance abuse treatment resources increased the positive results of drug courts. From the drug court clients, Westat collected GPRA and other quantitative data on procedural justice, mental health, and treatment satisfaction 6 months postdischarge from the drug court. Additional quantitative data included clients' criminal records and interviews with drug court staff and treatment providers. Qualitative data were collected through drug court observations and focus groups with clients during site visits to the drug courts. Using a mixed-methods approach, Westat incorporated quantitative data and qualitative site visit data in a realist evaluation framework that explored how and why the interventions worked rather than merely whether or not they worked.

Responsibilities: Dr. Karakus conducted a cost-effectiveness analysis and contributed to the development of reports and briefings.

Washington Families Fund High-Level Service Model (HLSM) Initiative

Client: Washington Families Fund (WFF)

Project Overview: The WFF's HLSM initiative is a coordinated, intensive housing and services model for high-need families in the State of Washington. Westat is assessing the extent to which the initiative is successful in helping families connect with community-based services, decrease their use of high-cost services, and achieve stability in their lives. The evaluation has both implementation and outcome components and is expected to continue over a 6-year period. Westat is leading development of a family assessment tool, initial reviews of the design and early implementation of grantee sites, development of a framework and measures for assessing site implementation of the model, and design of a study of the effectiveness and costs of the demonstration, to be conducted in subsequent years. The evaluators are collaborating with WFF staff, an evaluation advisory committee, HLSM grantees, and other stakeholders in all aspects of evaluation design and development.

Responsibilities: Dr. Karakus participated in the development and refinement of the family data collection strategy, design of the outcome study, and development of reports and briefings.

Evidence to Support Mental Illness Employment Policy Development

Client: Office of Disability Employment Policy (ODEP), U.S. Department of Labor (DOL)

Project Overview: ODEP requested that Westat conduct a study to examine the effectiveness of providing customized employment services to people with mental illness and to identify the factors associated with positive employment outcomes. Westat identified employment-related policy developments important for people with disabilities; analyzed quantitative employment outcome data from two databases developed for an independent evaluation of ODEP demonstration programs, also conducted by Westat; and conducted in-depth interviews with former demonstration program participants with mental illness, to determine their program experiences and other outcomes since leaving the program.

Responsibilities: Dr. Karakus was task leader for quantitative data analysis.

Medical Respite Care for Persons Experiencing Homelessness

Client: Office of the Assistant Secretary for Planning and Evaluation, U.S. Department of Health and Human Services (HHS)

Project Overview: Westat is leading a retrospective study to evaluate the costs, quality, and outcomes of respite care for homeless people, specifically whether respite care leads to fewer or shorter hospitalizations compared to routine services and whether there are relative long-term savings associated with medical respite care compared to hospital care. In collaboration with the Boston Health Care for the Homeless Project, Westat reviewed the literature on respite care programs and convened an expert panel to inform development of a retrospective study design. To identify sites that best met the outcome criteria established by the panel, Westat conducted evaluability assessments of 12 medical respite programs and partnering hospitals, including key informant interviews and extensive document reviews. Five sites were selected for the full study, in which Westat is collecting retrospective patient data from respite programs and associated hospital systems and conducting site visits to observe program operations and interview key informants.

Responsibilities: Dr. Karakus was the task co-lead for development of the data collection strategy and for data analysis.

Mental Health Treatment Study (MHTS)

Client: Social Security Administration (SSA)

Project Overview: Westat was the prime contractor for this 6-year, randomized controlled trial involving Social Security Disability Insurance beneficiaries with schizophrenia or affective disorder. The study assessed the impact of evidence-based supported employment and behavioral health treatments, systematic medication management, and access to health insurance on beneficiaries' employment and functioning. The study included 2,238 beneficiaries in 23 cities in 17 states and the District of Columbia. Data collection included a baseline CAPI interview, seven quarterly interviews, and a followup interview with the treatment and control groups. The intervention used an integrated approach in which all services were delivered by a treatment team at the community mental health center. Off-site treatment specialists monitored treatment quality and fidelity to evidence-based practices, while on-site staff recruited and enrolled beneficiaries, conducted CAPI interviews, and performed quality management activities. All study operations and treatment services were managed through a complex web-based study management system.

Responsibilities: Dr. Karakus participated in the development and organization of data collection, focusing on health insurance coverage, utilization of health services, and outcome measures related to work, income, and other economic values. He also served as task co-leader for outcomes analysis.

Evaluation of Disability Employment Policy Grants—Phases I to VI

Client: Office of Disability Employment Policy (ODEP), U.S. Department of Labor (DOL)

Project Overview: ODEP contracted with Westat to conduct an independent evaluation of its demonstration program of grants and cooperative agreements on employment for people with disabilities. For phase I, Westat designed detailed evaluation plans for the four major areas in which ODEP supports the New Freedom Initiative Act, developed a protocol for evaluating the effectiveness of existing grant programs, and collected baseline data. During phase II, Westat revised and finalized site visit plans and protocols for seven program areas, conducted 72 site visits across the United States, collected employment outcomes data from grant sites, and completed six interim reports of findings. In phase III, Westat conducted initial site visits to newly funded grant sites and in-depth site visits to selected sites, further analyzed and updated data from an outcomes analysis project, and wrote seven reports. In phase IV, Westat conducted followup site visits to demonstration projects, as well as outcomes analysis. In phase V, Westat completed the final analysis and synthesis of data from all previous phases and preparation of final reports to ODEP.

Responsibilities: Dr. Karakus was the task leader for the design and development of a data system to evaluate the efficacy and effectiveness of intervention programs. He also provided expertise as a health economist and contributed to reports analyzing the labor market outcomes of people with disabilities.

Karakus/8

Bloomberg School of Public Health, Johns Hopkins University, Baltimore, MD (2000 to 2005)

As a postdoctoral research fellow in the Prevention and Early Intervention Research Center, Department of Mental Health (2004 to 2005), Dr. Karakus studied the effects of several interventions on school-age children's proximal and distal economic and social outcomes. He worked on economic evaluations of policies targeting behavioral and cognitive problems among at-risk children.

In his work as a research assistant in the health economics research unit at the Bloomberg School of Public Health (2000 to 2004), Dr. Karakus analyzed the health outcomes and labor market transitions of people with serious mental illness. He applied microeconomic foundations and econometric techniques to measure mental health outcomes, with a focus on people with schizophrenia, bipolar disorder, and major depression.

University of Memphis, Memphis, TN (1997 to 2000)

As a research assistant, Dr. Karakus participated in several projects that resulted in articles on the socioeconomic determinants of health and mortality and the macroeconomic analysis of national health expenditures.

Other Professional Experience

Loyola College of Maryland, Baltimore, MD (2005) – Dr. Karakus taught a course in microeconomic principles.

Johns Hopkins University, Baltimore, MD (2000 to 2002) – Dr. Karakus worked as a teaching assistant for health economics and introductory microeconomics.

University of Memphis, Memphis, TN (1999 to 2000) – Dr. Karakus taught microeconomics, managerial economics, and graduate-level quantitative methods.

Shelby State Community College, Memphis, TN (1998 to 2000) – Dr. Karakus taught microeconomics and business statistics.

Awards and Professional Achievements

NIH Postdoctoral Fellowship, 2005

MedStat Corporation Dissertation Support Grant, 2004

NIH Predoctoral Fellowship, 2000-2004

NIH Training Fellowship, 2000-2004

Graduate Student Research Travel Award, Johns Hopkins University, 2001-2003

Graduate Student Research Travel Award, Department of Health Policy and Management, Johns Hopkins University, 2001-2003

Excellence in Research Award, University of Memphis, 2000

Barbara Tuckman Memorial Scholarship, University of Memphis, 1999
Reviewer, Health Economics, Journal of Health Care Finance, and Psychiatric Services

Publications, Technical Reports, and Presentations

Publications

- Karakus, M. (2014). Affordable Care Act and behavioral health services: Special section editor's note. *Journal of Behavioral Health Services and Research*. [Advance online publication: June 18, 2014]
- Goldman, H.H., and Karakus, M. (2014). Do not turn out the lights on the public mental health system when the ACA is fully implemented. *Journal of Behavioral Health Services and Research*.
- Goldman, H., Karakus, M.C., Frey, W., and Beronio, K. (2013). Economic grand rounds: Financing first-episode psychosis services in the U.S. *Psychiatric Services*, 64(6), 506-508.
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- Karakus, M.C., and Okunade, A.A. (2012). Obesity, depression, and employment-related outcomes among workers near retirement. *Aging International*, 37(2), 238-253.
- Karakus, M.C., and Patton, L.C. (2011). Depression and the onset of chronic illness in older adults: A 12-year prospective study. *Journal of Behavioral Health Services and Research*, 38(3), 373-382.
- Okunade, A.A., Hussey, A.J., and Karakus, M.C. (2009). Overweight adolescents and on-time high school graduation: Racial and gender disparities. *Atlantic Economic Journal*, 37, 225-242.
- Slade, E.P., Stuart, E.A., Salkever, D.S., Karakus, M.C., Green, K.M., and Ialongo, N. (2008). Impacts of age of onset of substance use disorders on risk of adult incarceration among disadvantaged urban youth: A propensity score matching approach. *Drug and Alcohol Dependence*, 95, 1-13.
- Salkever, D.S., Johnston, S., Karakus, M.C., Ialongo, N.S., et al. (2008). Enhancing the net benefits of disseminating efficacious prevention programs: A note on target efficiency with illustrative examples. *Administration and Policy in Mental Health*, 35(4), 261-269.
- Okunade, A.A., and Karakus, M.C. (2007). Pharmaceutical industry. In W.A. Darity (Ed.), *International encyclopedia of the social sciences*, 2nd ed. New York, NY: Macmillan Reference USA.
- Salkever, D.S., Karakus, M.C., Slade, E.P., et al. (2007). Measures and predictors of community-based employment and earnings of persons with schizophrenia in a multisite study. *Psychiatric Services*, 58, 315-324.

- Salkever, D.S., Slade, E.P., and Karakus, M.C. (2006). Earnings as an outcome of maintenance antipsychotic treatment for schizophrenia: Instrumental variables estimates from a prospective naturalistic study. *PharmacoEconomics*, 24(2), 123-139.
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- Okunade, A.A., Karakus, M.C., and Okeke, C. (2004). Determinants of health expenditure growth of the Organisation for Economic Co-operation and Development countries: Jackknife resampling plan estimates. *Health Care Management Science*, 7(3), 173-183.
- Salkever, D.S., Slade, E.P., and Karakus, M.C. (2003). Employment retention by persons with schizophrenia employed in non-assisted jobs. *Journal of Rehabilitation*, 69(4), 19-26.
- Okunade, A.A., and Karakus, M.C. (2003). Breast cancer mortality among U.S. women: The role of managed care, screening methods, and socio-economic determinants. *Health Care Management Science*, 6(4), 237-248.
- Salkever, D.S., Slade, E.P., and Karakus, M.C. (2003). Gender differences in employment transitions for persons with schizophrenia. In D. Marcotte and V.W. Gok (Eds.), *Research in human capital and development* (pp. 109-132). Stamford, CT: JAI Press.
- Okunade, A.A., and Karakus, M.C. (2001). Testing unit root and cointegration in Organisation for Economic Co-operation and Development health care expenditure models. *Applied Economics*, 33(9), 1131-1137.
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Technical Reports

- Karakus, M., and Roeser, A. (2014). *Regional Office Review of Applications for School Meals 2013*. Beltsville, MD: Food and Nutrition Service, U.S. Department of Agriculture. Available at: <http://www.fns.usda.gov/sites/default/files/ops/RORA2013.pdf>.
- Goldman, H., Karakus, M., and Frey, W. (2012). *Early Intervention Financing and Resources: Final report* (for U.S. Department of Health and Human Services). Available at <http://aspe.hhs.gov/daltcp/reports/2012/EarlyInt.pdf>.
- Karakus, M., Riley, J., Kawata, J., and May, L. (2012). *VRE Longitudinal Study: Annual report to Congress for FY 2011* (for Veterans Benefits Administration, U.S. Department of Veterans Affairs). Rockville, MD: Westat.

- Karakus, M., Riley, J., and May, L. (2012). *Chapter 33 Graduation and Employment Longitudinal Study. Annual Report for FY 2011* (for Veterans Benefits Administration, U.S. Department of Veterans Affairs). Rockville, MD: Westat.
- Elinson, L., Bethel, J., Deak, M.A., Li, S., Karakus, M., Borger, C., and Milfort, R. (2012). *Evaluation of the Summer Food Service Program Enhancement Demonstrations. 2011 Demonstration evaluation report* (for U.S. Department of Education). Alexandria, VA: Food and Nutrition Service, U.S. Department of Agriculture. Available at www.fns.usda.gov/ora/MENU/Published/CNP/FILES/eSFSP_2011Demo.pdf.
- Karakus, M., Frey, W., Goldman, H., Fields, S., and Drake, R. (2011). *Federal financing of supported employment and customized employment for people with mental illnesses* (for U.S. Department of Health and Human Services). Available at <http://aspe.hhs.gov/daltcp/reports/2011/supempFR.pdf>.
- Elinson, L., Bethel, J., Machado, J., Milfort, R., and Karakus, M. (2011). *Evaluation of the Summer Food Service Program Enhancement Demonstrations: 2011 Status report* (for U.S. Department of Agriculture). Alexandria, VA: Food and Nutrition Service, U.S. Department of Agriculture. Available at www.fns.usda.gov/ora/menu/DemoProjects/SummerFood/Default.htm.
- Frey, W.D., Stewart, K.R., Karakus, M., McCoy, M., Elinson, L., Palan, M.B., and Gollapudi, B. (2008). *Chronic Homelessness Demonstration Program: A synthesis of key findings, issues, and lessons learned* (for Office of Disability and Employment Policy, U.S. Department of Labor). Rockville, MD: Westat.
- Salkever, D.S., Johnston, S.S., Karakus, M.C., et al. (2007). *Using target efficiency to select program participants and risk-factor models: An application to child mental health interventions for preventing future crime* (NBER Working Paper No. 12377). Washington, DC: National Bureau of Economic Research.
- Karakus, M.C., Elinson, L., and Frey, W.D. (2007). *Evaluation of Chronic Homelessness Demonstration Programs: Interim progress report* (for U.S. Department of Labor). Rockville, MD: Westat.
- Frey, W., Azrin, A.T., Azrin, T.S., Ratner, J., Karakus, M.C., and Goldman, H.H. (2007). *A health benefits plan for the MHTS: Development, implementation, and monitoring* (for Social Security Administration). Rockville, MD: Westat.
- Azrin, T.S., Goldman, H.H., Karakus, M.C., Frey, W., and Sood, R. (2006). *Mental Health Treatment Study demonstrations site billing procedures* (for Social Security Administration). Rockville, MD: Westat.
- Azrin, T.S., Garner, D., Karakus, M.C., and Frey, W. (2006). *Documenting Mental Health Treatment Study insurance coverage* (for Social Security Administration). Rockville, MD: Westat.
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Presentations

- Karakus, M.C. (2010, April). *Cost-benefit analysis to supplement program evaluation*. 33rd Eastern Evaluation Research Society Annual Conference, Galloway, NJ.
- Salkever, D.S., Karakus, M.C., Frey, W., and Marcotte, D. (2008, November). *Mental Health Treatment Study: Preliminary evidence on the demand for employment assistance and supports by SSDI beneficiaries with mental disorders*. Annual Meeting of the American Evaluation Association, Denver, CO.
- Karakus, M.C., and Okunade, A. (2008, June). *Premature adult mortality, ethnicity, and disparities in wealth*. Second Biannual Conference of the American Society of Health Economists, Duke University, Durham, NC.
- Karakus, M.C., and Okunade, A. (2008, June). *Implication of obesity with comorbid musculoskeletal disorders and premature retirement for spinal implants*. Second Biannual Conference of the American Society of Health Economists, Duke University, Durham, NC.
- McCoy, M., Karakus, M.C., and Frey, W. (2008, June). *Improving access to disability benefits among the chronically homeless population: SSA-HOPE evaluation outcomes*. AcademyHealth Annual Research Meeting, Washington, DC.
- Karakus, M.C., and Okunade, A.A. (2007, July). *Obesity with comorbid depression and early retirement*. Sixth World Congress of the International Health Economics Association, Copenhagen, Denmark.
- Okunade, A.A., Suraratdecha, C., Okunade, A.K., Karakus, M.C., and Mukherjee, D. (2007, July). *Dying slowly but surely: A multi-period model of the delayed effects of pathological BMI on all cause mortality of US adults, 2000-2005*. Sixth World Congress of the International Health Economics Association, Copenhagen, Denmark.
- Karakus, M.C. (2007, April). *Introduction to economic evaluations*. Chronic Homelessness Grantees Meeting, Office of Disability Employment Policy, U.S. Department of Labor, Portland, OR.
- Karakus, M.C., Salkever, D.S., Slade E., Ialongo, and N. (2006). *Middle school behavioral problems, high school completion and employment outcomes in early adulthood (working paper)*. Inaugural Conference of the American Society of Health Economists, Madison, WI.
- Karakus, M. (2004, June). *Managed behavioral health carve-outs and rehospitalization risks for patients with affective psychosis*. AcademyHealth Meetings of the National Research Service Award Trainees Conference, San Diego, CA.
- Karakus, M. (2003, July). *Economics of managed behavioral health carve-outs*. Biennial World Conference of the International Health Economics Association, San Francisco, CA.

- Karakus, M. (2002, November). *Relationships between alcohol use and sexual behavior among school-based adolescents in Mexico*. 130th Annual Meeting of the American Public Health Association, Philadelphia, PA.
- Karakus, M. (2001, July). *Mortality from breast carcinoma among U.S. women: The role and implications of socio-economics, heterogeneous insurance, screening mammography, and geography*. Third Biennial World Conference of the International Health Economics Association, York, U.K.
- Karakus, M. (2001, March). *Microeconometrics of demand for employer sponsored health screening programs*. 65th Annual Meeting of the Midwest Economics Association, Cleveland, OH.
- Karakus, M. (2000, March). *Testing unit root and cointegration in Organisation for Economic Co-operation and Development health care expenditure models*. 64th Annual Meeting of the Midwest Economics Association, Nashville, TN.
- Karakus, M. (1999, August). *Policy and other determinants of Organisation for Economic Co-operation and Development health expenditure growths, 1968-97: New evidence with expanded data*. Joint Statistical Meetings, Baltimore, MD.
- Karakus, M. (1999, April). *Gatekeepers effect on health expenditures: Analysis of Organisation for Economic Co-operation and Development countries*. Second Annual Interdisciplinary Conference for Graduate Students at the University of Southern California, Los Angeles, CA.

Jacky Man-Kwan Choi

Summary

Jacky Choi is a research assistant with experience in health education, research, and project development. At Westat, he assists senior-level staff in conducting literature reviews; performing geocoding; developing, editing, and revising survey content; annotating and coding surveys; drafting recruitment materials; and writing proposals and client reports. Mr. Choi has served as a liaison among various stakeholders on health-related projects or activities. He offers health communication skills, as well as experience in social science research and writing.

Education

B.A., Biology and Society (with minors in Global Health/Nutrition and Health), Cornell University, 2014

Relevant Project Experience

Westat (2014 to Present)

Assessment of the Barriers That Constrain the Adequacy of SNAP Allotments

Client: U.S. Department of Agriculture (USDA)

Project Overview: The goal of this project is to determine individual, household, and environmental barriers faced by Supplemental Nutrition Assistance Program (SNAP) participants that prevent them from accessing a healthy diet. Along with describing the interaction between these barriers, Westat is determining whether and how these barriers can be accounted for in determining SNAP allotments. The study design is based on a mixed-methods approach that includes a quantitative survey of 4,800 SNAP participants followed by 120 in-depth interviews. Westat is responsible for sampling, survey and interview administration, data analysis, and report writing.

Responsibilities: Research assistant. Mr. Choi serves as a liaison between Westat and 30 states in executing, finalizing, and obtaining Data Use Agreements (DUAs) before sample data is collected.

Veterans Benefits Administration (VBA) Longitudinal Studies

Client: U.S. Department of Veterans Affairs (VA)

Project Overview: Westat is assisting VBA in conducting two parallel longitudinal studies to address the outcomes of its Chapter 31 and Chapter 33 programs. The Chapter 31 program (VetSuccess) assists veterans with service-connected disabilities to get and keep jobs. The Post-9/11 GI Bill (Chapter 33) program offers substantial education and housing benefits to eligible veterans who attend college. Both studies will assess, over a 20-year period, the long-term outcomes of three cohorts of veterans entering the programs in 2010, 2012, and 2014. Westat is responsible for collecting data on the samples of veterans and reporting annually on the primary outcomes associated with program participation.

Responsibilities: Research assistant. Mr. Choi updated the tables and figures in the 2015 Annual Report (for FY 2014) regarding the VA Vocational Rehabilitation and Employment (VR&E) program; revised the report; and helped finalize the submission of the draft to the client.

Child and Adult Care Food Program (CACFP) Improper Payments Study

Client: Food and Nutrition Service (FNS), U.S. Department of Agriculture (USDA)

Project Overview: Westat is designing a study to determine the estimated annual amount of erroneous payments in CACFP-participating child care centers as a result of certification and non-certification errors. The study's primary objectives are to (1) provide FNS with a reliable estimate of erroneous payments, (2) develop models that FNS can use to update estimates annually, and (3) prepare a white paper on methodologies for computing state-level estimates. The Westat team is responsible for sampling frame development and sample selection; survey development; on-site data collection at 450 CACFP centers; 4,500 household interviews; and data processing, analysis, and reporting.

Responsibilities: Research assistant. Mr. Choi assists with OMB submission; drafting and finalizing recruitment materials; organizing and scheduling cognitive interviews; developing the Study Management System (SMS); and serving as a general point of contact for any sort of help..

Survey of Veteran Enrollees' Health and Reliance Upon VA (Survey of Enrollees)

Client: Veterans Health Administration (VHA)

Project Overview: The Veterans Health Administration's (VHA) Office of the Assistant Deputy Under Secretary for Health for Policy and Planning oversees the annual VHA Survey of Veteran Enrollees' Health and Reliance upon VA (Survey of Enrollees). The Survey of Enrollees was developed in 1999 in order for the VHA to better understand enrolled Veterans' health care needs. In addition to collecting basic demographic information, the survey explores insurance coverage, VA and non-VA health care use, pharmaceutical use, attitudes and perceptions about VHA services, perceived health status, and smoking habits of Veterans enrolled in the VHA system. The purpose of the survey is to provide critical and essential information on Veteran utilization of health services. This information supports annual VHA projections of enrollment, utilization, and expenditures, as well as a variety of high level VHA budget and policy-related analyses.

Responsibilities: Research assistant. Mr. Choi documents and logs survey decisions and changes; creates, codes, and annotates web survey specifications; tests the survey; creates a crosswalk of questions across all modes; performs internal quality control tasks; and is involved in editing and revising the survey.

Survey to Assess Veteran Resilience to Disasters

Client: Department of Veterans Affairs (VA); Veterans Emergency Management Evaluation Center (VEMEC)

Project Overview: Westat is working with the Veterans Emergency Management Evaluation Center (VEMEC) on a population-based survey to assess the relationship between multiple indicators of community resilience and disaster preparedness among Veterans, their families, and the organizational and social networks in which they are embedded.

Responsibilities: Research assistant. Mr. Choi helped screen scholarly articles and publications; conduct a literature review; write and edit part of the literature review report; and perform internal quality control tasks.

Family Life, Activity, Sun, Health, and Eating (FLASHE) Study

Client: National Cancer Institute (NCI)

Project Overview: FLASHE is intended as a one-time administration to a nationally representative sample of 12- to 17-year-olds, paired with a parent. The study focuses on the psychosocial, intergenerational, and environmental correlates of cancer-preventive behaviors. The Westat team is recruiting 4,500 parent/adolescent dyads and conducting two web surveys with adolescents and two with parents (one on physical activity and the other on diet). In addition, a subsample of 1,500 adolescents are being asked to participate in a 1-week motion sensor study.

Responsibilities: Research assistant. Mr. Choi used Google Maps to pinpoint school intersections and names of schools based on other information.

Cornell University, Ithaca, NY (2014)

As a collaborating researcher, Mr. Choi investigated how communities organize themselves and evaluated the correlation between crime rates and natural disasters, to inform and influence global and public health preparedness programs. He reviewed academic publications, conducted literature reviews, edited drafts, extracted and interpreted quantitative data, and analyzed results under the guidance and mentorship of a professor.

Cornell University Global Health Program/UBELONG, Ghana (2013)

As an international volunteer, Mr. Choi launched an independent public health research project to gauge a community's knowledge, attitudes, and practices regarding HIV/AIDS and supervised a public health team in completing the task. He developed questionnaires, conducted in-person interviews with residents, and compiled responses into a comprehensive final report that was presented to UBELONG staff and volunteers. After researching and studying cholera with UBELONG staff, Mr. Choi delivered health lectures about the disease to school groups ranging from 20 to 300 students. He also led an educational performance on malaria that was ultimately presented to the entire student body at Prince Derrick Academy. He worked closely with staff at Kasoa Polyclinic to monitor and evaluate mother and child health via physical examinations, educational posters and lectures, and health data.

Other Professional Experience

Division of Nutritional Sciences, Cornell University, Ithaca, NY (2012) – Mr. Choi was a teaching assistant Nutrition, Health, and Society. He lectured on topics such as environmental determinants of eating and nutrition-related diseases. He researched class-related topics and issues, formulated lesson plans and a curriculum, graded assignments, directed group presentations, performed data entry, and helped students master course material.

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Process Evaluation Questions (Q4.1 – Q4.9)

Process Evaluation Questions (Q4.1 – Q4.9)

Overview of the Approach to the *Safe at Home West Virginia* Process Evaluation

Background

The Bureau for Children and Families (BCF) has engaged multiple collaborators and cross-system partners to identify the needs of children and youth in out-of-home care, and at risk of out-of-home placement. *Safe at Home West Virginia*, the resulting plan to transform child welfare practice, combines evidence-based and evidence-informed strategies with a wraparound approach, and builds upon West Virginia's unique cultural and systemic strengths.

The process evaluation is a critical component to the overall evaluation. The outcomes evaluation examines the safety, permanency, and well-being outcomes that result from the demonstration while the process evaluation contributes the context necessary to fully understand those outcomes.

Through the process evaluation, we understand how well the demonstration was implemented, what facilitators or barriers impacted the implementation, and what factors are necessary for replication of the demonstration in other counties.

The process evaluation will comprehensively examine the implementation of the demonstration, including implementation readiness and fidelity to the wraparound approach. The evaluation team will also obtain and analyze the policies and procedures that have been put in place, the types and volumes of services delivered, and the characteristics of the population served. Through the process evaluation, the evaluation team will be able to provide early feedback to BCF as to whether or not the demonstration has proceeded as intended, identify barriers that have been encountered and pinpoint changes that are needed to allow for successful continued implementation. The evaluation team will plan and conduct the process evaluation in close collaboration with BCF, its partners, and key stakeholders. A collaborative approach has worked successfully in the past in fostering positive working relationships between key participants in the demonstration process.

Methods

The evaluation team proposes using **interview and focus groups** to gather information from key program staff and stakeholders, at the state, regional, and county levels, about planning the demonstration, barriers and facilitators to the implementation of the demonstration; and organizational aspects of the demonstration, staffing, service provision, the role of the courts, and key social, economic, and political forces that may influence the implementation. Where stakeholders can be naturally grouped, we will conduct focus groups instead of individual interviews to minimize the burden on the respondents and evaluation resources. The proposed process evaluation staff has extensive experience designing qualitative protocols and conducting focus groups and interviewing stakeholders at all levels. These staff will design the interview protocols to directly address important and relevant areas of inquiry as efficiently as possible. The evaluation team proposes conducting interview and focus groups during site visits in year 1, year 3, and year 5. Visiting all 11 initial implementation counties will likely be cost-prohibitive. Thus, we propose selecting a sample of counties to visit, likely at least two in each region that are the most representative of the region as a whole.

The evaluation team will also **gather and review relevant documents**, such as assessment reports, meeting notes, announcements, significant correspondence, formal policy statements, and any other documentation related to the demonstration planning and implementation. This information will be useful for capturing such data as the service delivery system and other organizational aspects of the demonstration. As we interview stakeholders, we will also ask them to identify relevant documents for inclusion in our analysis.

To capture information on the number and type of services received, the evaluation team will extract **administrative data on program services** from FACTS or Results-Based Accountability (RBA) service monitoring. The team will also use a **fidelity assessment tool** to examine and monitor fidelity to the wraparound model. Another method that the evaluation team will employ is the use of **family satisfaction surveys**. These surveys will seek to capture additional information about service delivery as well as the perceived benefit of the services.

During the development of the evaluation plan we will ask BCF to review the protocols for content and clarity and after protocols are finalized we will obtain approval for use from the Westat Institutional Review Board (IRB).

Analysis Plan

Our overall approach to qualitative data analysis is summarized in Chapter 4 of the User Friendly Guide to Mixed Method Evaluations.¹ Qualitative data analysis is about discovering and exploring systematic patterns in the data through a process of “constant” back-and-forth comparison. Qualitative analysts ask a series of questions regarding emergent patterns and common themes in the data that relate to the research questions or issues at hand: What are the main patterns and common themes? How do these help to illuminate the broader study and survey questions? What are the exceptions or deviations from these patterns, and how might these be explained? What are the key stories or illustrative vignettes that emerge from these data?

We propose to involve multi-level informants in semi-structured interviews and focus groups and suggest using a grounded theory analytical approach.² This approach supports examination of implementation across varying contexts and supports inclusion and preservation of multi-level viewpoints. Grounded theory can be used inductively and deductively.³ Inductively it facilitates the open coding of the data and creation of patterns and themes. The analytic team will work together to create a common coding structure or “coding tree” with categories responsive to the major research questions. We will use it deductively during the final stage of analysis wherein two overarching frames, demonstration service implementation barriers and facilitators, and service differences between demonstration and non-demonstration youth and families will be examined. Our team is experienced in using computer-assisted qualitative software packages such as NVivo for qualitative analysis and we will assess its usefulness for this part of the process evaluation. NVivo is well suited to grounded theory work and its use can increase the efficiency of coding, thematic identification, and reporting especially with large volumes of data.⁴

Content analysis will be performed on the data extracted from the agency documentation, taking the diverse and possibly disparate pieces of information and unifying them by patterns. Content analysis can focus on frequently mentioned concepts, absence of concepts, and concept context during

¹ Berkowitz, S. (1997). Analyzing qualitative data. In J. Frechtling & L. Sharpe (Eds). *User friendly handbook for mixed method evaluations*. Arlington, VA: National Science Foundation.

² Gilgun, J. F. (1994). Hand into glove: The grounded theory approach and social work practice research. In E. Sherman & W.J. Reid (Eds.), *Qualitative research in social work* (pp. 115–134). New York: Columbia University Press.

³ Patton, M.Q. (2002). *Qualitative research & evaluation methods*, 3rd ed., Sage: Thousand Oaks, CA.

⁴ Hutchison, A., John, J., Lynne, H., and Breckon, J.D. (2010). Using QSR-NVivo to facilitate the development of a grounded theory project: an account of a worked example. *International Journal of Social Research Methodology*, 13 (4), 283-302.

cross-source analysis.⁵ NVivo is also well suited to facilitate content analysis as it accommodates different types of documents including graphical documents. As needed, we will refine analyses to maximize conclusion-drawing and verification; that is, stepping back to consider what the analyzed data mean and to assess their implications. Verification, integrally linked to conclusion-drawing, entails “revisiting” the data as many times as necessary to cross-check or verify emergent conclusions, and to entertain other possible interpretations of the data.

Frequencies and percentages will be computed for the service data to depict the number and types of services received by clients.

Reporting

The evaluation team will report fidelity assessment, focus group and interview findings, document review findings, service data and family satisfaction survey results in the semi-annual, interim, and final evaluation reports. Table 1 presents the proposed process evaluation activities, data sources, and the frequency of reporting of the findings. The frequency of reporting can be negotiated and coordinated with BCF in the development of the Evaluation Plan.

Table 1. Process evaluation activities

Goal/Objective	Activity	Data Source	Frequency of Report
4.1	Assess the planning process for the demonstration including whether any formal needs assessment, asset mapping, or assessment of community readiness was conducted.	<ul style="list-style-type: none"> ■ Stakeholder interviews and focus groups ■ Document review 	Semi-annual, Interim and Final Reports
4.2	Assess the organizational aspect of the demonstration, such as staff structure, funding committed, administrative oversight, and problem resolution at various organization levels.	<ul style="list-style-type: none"> ■ Stakeholder interviews and focus groups ■ Document review 	Semi-annual, Interim and Final Reports
4.3	Assess the number and type of staff involved in implementation, including the training they received, as well as their experience, education, and characteristics.	<ul style="list-style-type: none"> ■ Stakeholder interviews and focus groups ■ Document review 	Semi-annual, Interim and Final Reports

⁵ Ibid.

Table 1. Process evaluation activities (continued)

Goal/Objective	Activity	Data Source	Frequency of Report
4.4	Assess the service delivery system, including procedures for determining eligibility, referring clients for services, the array of services available, the number of youth/families served and the type and duration of services provided.	<ul style="list-style-type: none"> ■ Administrative data ■ Stakeholder interviews and focus groups ■ Document review ■ Satisfaction surveys 	Semi-annual, Interim and Final Reports
4.5	Assess the role of the courts in the demonstration and the relationship between the child welfare agency and court system, including any efforts to jointly plan and implement the demonstration.	<ul style="list-style-type: none"> ■ Stakeholder interviews and focus groups ■ Document review 	Semi-annual, Interim and Final Reports
4.6	Assess contextual factors, such as the social, economic, and political forces that may have a bearing on the replicability of the intervention or influence the implementation or effectiveness of the demonstration.	<ul style="list-style-type: none"> ■ Stakeholder interviews and focus groups ■ Document review 	Semi-annual, Interim and Final Reports
4.7	Assess the degree to which demonstration programs and services are implemented with fidelity to their intended service models.	<ul style="list-style-type: none"> ■ Satisfaction surveys ■ Monitoring data ■ Fidelity assessment tool(s) 	Semi-annual, Interim and Final Reports
4.8	Assess the barriers encountered during implementation, the steps taken to address these barriers, and any lessons learned during implementation.	<ul style="list-style-type: none"> ■ Stakeholder interviews and focus groups ■ Document review 	Semi-annual, Interim and Final Reports

Section 4, Subsection 4.1: Goal/Objective 1

Q1. The planning process for the demonstration including whether any formal needs assessment, asset mapping, or assessment of community readiness was conducted.

A1. Vendor Response:

Background

The Bureau for Children and Families has undertaken an extensive planning process to develop and prepare for the *Safe at Home West Virginia* demonstration. BCF, along with multiple collaborators and cross-system partners, have identified the needs of youth in out-of-home care, and at risk of out-of-home placement, as well as selecting the initial demonstration counties based on their need and readiness for participation in the demonstration services. The demonstration's planning process will continue throughout service development, initial implementation and the eventual statewide rollout of *Safe at Home West Virginia* in phase 2.

Proposed Methodology

The evaluation team will examine and document the process of planning for the overall project, including:

- Formal needs assessments and asset mapping and analyses conducted;
- Formation of the project planning team(s);
- Identification and selection of the target populations and criteria used to select initial demonstration counties (i.e. indicators of community readiness);
- Elevation of the IV-E penetration rate;
- Involvement of key stakeholders in planning for the demonstration;
- Development of the Waiver IV-E application;
- Development of new and existing collaborations with courts, the education system, regional and county offices, service providers, and other community partners.

The evaluation team will also examine how BCF continues to plan for the phased, county-by-county implementation. Phased implementation will give us a valuable opportunity to generate data that can be used in a plan, do, study, act cycle, a common approach used for initial implementation.

The following data collection methods and sources will provide the information needed to document the *Safe at Home Virginia* planning processes.

- **Interviews and Focus Groups** – The evaluation team proposes conducting interviews and focus groups with key program staff and stakeholders, at the state, regional, and county levels to capture information for the process evaluation. We will work with BCF to identify important stakeholders involved in planning for the waiver or who can provide important contextual information. These stakeholders may include, but are not limited to key representatives from:
 - BCF and DHHR project leadership teams, such as members of the DHHR Safe at Home Oversight Team and the BCF Home Team; and BCF direct services staff involved in the demonstration;
 - Coordinating local agencies;
 - State agencies such as the West Virginia Department of Education;
 - Cross-discipline workgroups that support the demonstration project such as the Practice Development Workgroup;
 - The Wraparound Advisory Team (Regional Summits and local Community Collaboratives);
 - Service array partners;
 - Court personnel; and
 - Collaborators from other partnering or informative institutions and initiatives such as the West Virginia Commission to Study Residential Placement of Children, the Three Branch Institute, West Virginia System of Care, the West Virginia Child Advocacy Centers, and the Court Improvement Project.

- **Document Review** – The evaluation team will gather and review relevant documents to capture and uncover themes related to the planning process for *Safe at Home West Virginia*. For example, we will need to document differences in planning for initial implementation across counties. Documents may include assessment reports, meeting notes, announcements, significant correspondence, formal policy statements, and any other documentation related to the waiver planning. As we interview stakeholders, we will also ask them to identify relevant documents for inclusion in our analysis.

Section 4, Subsection 4.2: Goal/Objective 2

Q2. The organizational aspect of the demonstration, such as staff structure, funding committed, administrative oversight, and problem resolution at various organization levels.

A2. Vendor Response:

Background

The organizational elements are the core of the demonstration project and will help inform findings for all aspects of the process evaluation. Implementation success or failure is often a function of organizational level factors and may be compromised if organizational resources are not sufficient. A key organizational resource includes the financial capabilities to support implementation through training, addition or replacement of staff, or restructuring of work units. Leadership support is also a key resource that can facilitate or impede implementation.⁶ West Virginia is establishing a vertical structure with the Wraparound Advisory Team connecting the BCF Wraparound Home Team with the community-level workforce. The evaluation team will document the project and funding structure within BCF, the Wraparound Advisory Team, and the Coordinating Local Agencies and other providers, as well as the communication and supervisory relationship between all levels of the organizational structure. Indicators will include clear and documented staff roles and responsibilities; sufficient program funding secured and maintained; documented monitoring and oversight procedures; and channels of communication between state project team regional and county offices.

Proposed Methodology

In order to evaluate the organizational aspects of *Safe at Home West Virginia* we propose a similar data collection approach as for the first goal/objective:

- **Interviews and Focus Groups** – Our informants/respondents for documenting the organizational aspects of the demonstration will include the BCF Wraparound Home Team, the Wraparound Advisory Team, and the Coordinating Local Agencies. We will work with BCF to identify additional informants during the development of the evaluation plan and throughout implementation, as appropriate.

⁶ Fox, D., Gottfredson, D., Kumpfer, K., & Beatty, P. (2004). Challenges in disseminating model programs: a qualitative analysis of the Strengthening Washington DC Families Program. *Clinical Child Family Psychology Review*, 7(3), 165–76.

- **Document Review** – The evaluation team will collect and review relevant documents, such as program reports, written policies and procedures, meeting notes, organizational charts, and documentation on BCF’s continuous quality improvement (CQI) work and results-based accountability (RBA) processes. We will extract information on the formal organizational structure of the project, the decision making process, supervisory and administrative channels, any funding issues, and the type and amount of communication and problem-solving between the administrative, supervisory, and community levels of the project.

Section 4, Subsection 4.3: Goal/Objective 3

Q3. The number and type of staff involved in implementation, including the training they received, as well as their experience, education, and characteristics.

A3. Vendor Response:

Background

Staffing and training will be particularly vital issues for *Safe at Home West Virginia* due to the amount of service development planned. Experienced staff and consistent and thorough training are key elements in successful implementation and are crucial for maintaining fidelity to the wraparound approach. The rate of staff turnover and how the agency handles ongoing hiring and training will be important for both BCF and the evaluation team to monitor.

Proposed Methodology

To capture staffing process and procedures, the evaluation team will focus on the *Safe at Home West Virginia* Next Steps Care Coordinators and Intensive Wraparound Care Coordinators responsible for implementing and managing the wraparound treatment plan. We propose two data sources for this goal/objective:

- **Interviews and Focus Groups** – We propose conducting focus groups with local agency staff and partners. We also propose interviews or a focus group with the BCF Training Workgroup members and will gather staffing information in our interviews with the BCF Home Team and the Wraparound Advisory Team.
- **Document Review** – The evaluation team will request and review training attendance logs, training materials, position hiring requirements, staff qualifications, and other documentation as available. We will extract information on the number of training hours for each staff, frequency of training or “refreshers,” procedures for training new staff, staff education and experience, frequency of staff turnover, and reasons for turnover.

Section 4, Subsection 4.4: Goal/Objective 4

Q4. The service delivery system, including procedures for determining eligibility, referring clients for services, the array of services available, the number of children/families served and the type and duration of services provided.

A4. Vendor Response:

Background

Safe at Home West Virginia services intends to make a fundamental shift in how child welfare services are coordinated and delivered to youth and their families in West Virginia. The demonstration relies on evidence- and community-based services, which will vary in availability from county to county. As existing services are enhanced and new services are developed and implemented, BCF will need as much on-the-ground feedback as possible about the individual service array in each county and the progress of each county in serving eligible clients.

Proposed Methodology

The evaluation team will examine the service delivery system for *Safe at Home West Virginia* by documenting how youth become eligible for *Safe at Home West Virginia* services (e.g., the CANS threshold to determine the level of services required), referral processes, processes for coordinating services, and processes for partnering with community-based providers. We will capture the service array available in each county in relation to the needs of the youth and families served there, the development of necessary services and supports where they are not currently available, how services differ from the services offered pre-demonstration, the number of youth and families who are served in each county, and the type and duration of the services. We propose the following data sources for this goal/objective:

- **Administrative Data** – The evaluation team will explore the use of existing service data (e.g., from FACTS or RBA service monitoring) to track the number of youth and families served and the type and duration of services received. If this data are not currently available from an existing database, we will work with the Bureau to develop methods to collect the data.
- **Family Satisfaction Surveys** – The Wraparound Advisory Team has been tasked with developing satisfaction surveys for families. We propose working closely with the Wraparound Advisory Team to develop the family satisfaction survey and procedures

for administration. We will analyze these surveys to measure the availability, impact, and perception of care coordination planning and services within the context of the needs of each family and community. We propose that the families complete one initial and one post-survey. The initial satisfaction surveys will be administered at the conclusion of the Initial Engagement and Planning phase for Intensive Care Coordination and the end of the Pre-community Engagement phase of Next Steps to collect information on the concentrated case planning during the first 90 days of both interventions. We propose administering the second round of surveys at the conclusion of the Maintenance phase of the Intensive Care Coordination intervention and the Intensive Reunification phase of the Next Steps intervention. We will work with BCF to make decisions about survey administration and other key data collection protocols.

- **Interviews and Focus Groups** – The evaluation team will conduct focus groups or individual interviews to gather information on service planning, service availability, unmet service needs, and service array partnerships. We have identified the Services Implementation Workgroup, the Practice Development Workgroup, the BCF Home Team, the Wraparound Advisory Team, the Coordinating Local Agencies, and local service array partners as potential sources of information on services.
- **Document Review** – The evaluation team will review policies and procedures, service plans, agreements with service array partners, referral forms, and other agency documentation around services. The documentation will inform our analyses of the wraparound service structure and procedures as planned and implemented.

Section 4, Subsection 4.5: Goal/Objective 5

Q5. The role of the courts in the demonstration and the relationship between the child welfare agency and court system, including any efforts to jointly plan and implement the demonstration.

A5. Vendor Response:

Background

BCF has a longstanding collaborative relationship with the courts and the Court Improvement Project, but has identified a need to further develop their relationship with the courts to support the *Safe at Home West Virginia* demonstration. As the cooperation of the courts is essential to any system change in child welfare, the process evaluation will examine and document the role the courts in the planning and implementation of *Safe at Home West Virginia*. Some key items the evaluation team will capture include the development of further supports for the demonstration from the courts and the communication and collaboration processes between the courts and BCF in the implementation of the demonstration.

Proposed Methodology

Information on the role of the courts in the demonstration will come from two main sources:

- **Interviews and Focus Groups** – As part of our stakeholder interviews and focus groups, we will inquire about court involvement with the DHHR Safe at Home Oversight Team and other key court personnel identified as active or knowledgeable about the court’s role in the demonstration. Interviews and focus groups with the BCF Home Team, Wraparound Advisory Team, and other stakeholders will also include questions on court collaboration, as appropriate.
- **Document Review** – The evaluation team will review project reports, memos, policies and procedures, and other documentation with information on court involvement in the planning and implementation of *Safe at Home West Virginia*. We will extract information on court procedures as relate to the demonstration and how the court serves as a facilitator or barrier to implementation.

Section 4, Subsection 4.6: Goal/Objective 6

Q6. Contextual factors, such as the social, economic, and political forces that may have a bearing on the replicability of the intervention or influence the implementation or effectiveness of the demonstration. This discussion will note any possible confounding effects of changes in these systems, or changes resulting from other demonstrations or reforms that were implemented during the Title IV-E demonstration.

A6. Vendor Response:

Background

West Virginia has been and continues to be extremely active in system reforms geared toward improving child welfare practice and outcomes for West Virginia children and families. Recent changes to the IV-E program and programs like the Building Bridges Initiative and the CIP's New View Project may support and enhance *Safe at Home West Virginia*. The evaluation team will seek to understand these and other changes in practice order to provide context for understanding the outcomes findings. We will also document the social, economic, political, and cultural elements in each county, region, and in the state as a whole, that may affect the demonstration. It is particularly important to document the extent that community needs (poverty, low education, unemployment) or lack of needs facilitate or create a barrier for implementation.

Proposed Methodology

Contextual information will be gathered through two main sources:

- **Interviews and Focus Groups** – The evaluation team will interview both state office, and regional- and county-level stakeholders about the contextual factors affecting implementation of the *Safe at Home West Virginia* services across the state and in their individual communities. We will ask for stakeholder perceptions on community strengths and barriers and the intersection of *Safe at Home West Virginia* with other programs serving the target population.
- **Document Review** – We will also collect information from project reports, media reports, and other documentation as available to document larger contextual factors, community perception of the demonstration, policy changes, and any system-level factors that may affect implementation *Safe at Home West Virginia* services in participating counties.

Section 4, Subsection 4.7: Goal/Objective 7

Q7. The degree to which demonstration programs and services are implemented with fidelity to their intended service models.

A7. Vendor Response:

Background

Determining whether the demonstration program is being implemented with high fidelity to the wraparound model is a crucial factor in obtaining reliable and replicable evaluation outcomes as well as collecting and disseminating data to monitor and support *Safe at Home West Virginia's* implementation. However, measuring fidelity for the wraparound model can be complicated due to its complexity and high degree of individualization. Assessing whether wraparound is being implemented as intended requires assessing: (1) adherence to the key principles of wraparound; (2) whether the basic activities of facilitating a wraparound process are occurring, and (3) supports at the organizational and system level. Thus more than one method for measuring fidelity will be needed.⁷

Proposed Methodology

The evaluation team will work with BCF to develop appropriate measures of fidelity in concordance with the assessment and evaluation approach developed by the National Wraparound Initiative's Wraparound Evaluation and Research Team. This work will entail the following:

- Identifying essential functions of the wraparound team within the *Safe at Home West Virginia* context;
- Obtaining profiles for the interventions;
- Determining indicators for occurrence of essential functions;
- Determining indicators for delivery of interventions; and,
- Mapping indicators to the essential functions and intervention profiles.

⁷ Bruns, E. (2008). Measuring wraparound fidelity. In E. J. Bruns & J. S. Walker (Eds.), *The resource guide to wraparound*. Portland, OR. Retrieved from <http://www.nwi.pdx.edu/NWI-book/Chapters/COMPLETE-RG-BOOK.pdf>.

We will also work with BCF, its partners, and key stakeholders to determine efficient methods of collecting data. For example, the family satisfaction surveys discussed above in Goal/Objective 4.4 will likely provide a significant amount of fidelity information. The evaluation team will also explore what fidelity information is available through the Office of Planning and Quality Improvement and the RBA or additional contract monitoring systems. Some key questions that the evaluation team will seek to answer include the following:

- **Q1.** Were CANS and other appropriate measures administered within the testing window?
- **Q2.** Were the Multidisciplinary Team and Initial Family Joining meetings held within the designated timeframe?
- **Q3.** Did caregivers/natural supports attend the meeting?
- **Q4.** Were the service referrals responsive to the family's needs?
- **Q5.** Did the case plan build on family strengths?
- **Q6.** Were services delivered as intended? Were services of sufficient quality and duration?
- **Q7.** Did the family advance to the next phase in the allotted time?

Section 4, Subsection 4.8: Goal/Objective 8

Q8. The barriers encountered during implementation, the steps taken to address these barriers, and any lessons learned during implementation.

A8. Vendor Response:

Background

West Virginia is implementing a complex demonstration project in diverse communities. Implementation will inevitably involve addressing both anticipated and unanticipated barriers. The evaluation team will identify and document implementation barriers and their effects, the steps taken at the state-, regional-, and county-level to address the barriers, and the progress made. The evaluation team, through regular communication and reports, will provide real-time feedback to BCF that facilitates a continuous developmental or quality improvement loop.

Proposed Methodology

We propose gathering information on implementation barriers through:

- **Stakeholder Interviews and Focus Groups** – The evaluation team will interview both state office and regional- and county-level stakeholders about their perceptions of current and potential barriers to the implementation of *Safe at Home West Virginia*. We propose conducting interviews and focus groups with members of the DHHR Safe at Home Oversight Team, the BCF Wraparound Home Team, the Wraparound Advisory Team, and the Coordinating Local Agencies. We will work with BCF to determine if there are additional sources that would be appropriate to engage in data collection.
- **Document Review** – We will also extract information about barriers from project reports, meeting notes, and other available documentation. This information will provide insight on implementation barriers, steps taken to overcome them, as well as the impact of the steps taken.

Section 4, Subsection 4.9: Goal/Objective 9

Q9. Any additional data collection identified as needed.

A9. Vendor Response:

The evaluation team will work with BCF to determine if additional data collection is needed. For example, BCF may wish to examine specific process questions regarding juvenile justice involvement or coordination with the education system.

Outcome Evaluation Questions (Q4.10 – Q4.19)

Outcome Evaluation Questions (Q4.10 – Q4.19)

Overview of the Approach to the *Safe at Home West Virginia* Outcomes Evaluation

Background

West Virginia's Title IV-E Child Welfare Demonstration Project, *Safe at Home West Virginia*, will roll out a full continuum of intensive and innovative community-based services using a wraparound approach, tailored to the needs of individual youth and families, to improve outcomes for youth age 12 to 17 in or at risk of congregate care placement. The West Virginia waiver demonstration aims to improve youth **well-being** and family functioning, increase the number of youth staying in their home communities, and reduce reliance on congregate care, so that youth can remain **safely and permanently** in their own homes and communities. More specifically, the demonstration intends to improve outcomes in the following areas:

- Number of youth placed in congregate care;
- Length of stay in congregate care;
- Number of youth remaining in their home communities;
- Rates of initial foster care entry;
- Number of youth re-entering any form of foster care;
- Youth safety;
- Well-being of youth;
- Educational achievement; and
- Improved family functioning.

The evaluation team offers the skills and expertise in developing methodologies for analyzing comparative outcome measures for safety, permanency, and well-being. Our outcomes evaluation approach proposes a rigorous method to test the hypotheses of the demonstration, a series of outcome measures to assess the impact of the demonstration on each goal, and a strategy for determining the impact of each demonstration component on outcomes.

Research Questions and Methods

West Virginia's demonstration will include a series of research questions, with the overriding question: When compared to youth involved with West Virginia's Department of Health and Human Resources, Bureau for Children and Families prior to the demonstration:

Q. Do youth ages 12 to 17 in or at risk of congregate care, and their families, receiving *Safe at Home West Virginia* experience improvements in safety, permanency and well-being outcomes, and reduced time in congregate care?

The West Virginia Bureau for Children and Families (BCF) hypothesizes that *Safe at Home West Virginia* will reduce the number of youth in congregate care, reduce the length of stay for youth in congregate care, achieve permanency in a more timely manner, improve the safety and well-being of youth, and improve family functioning so that youth can remain in their own home safely. Specific research questions, and related hypotheses, are presented in the subsections dedicated to each goal/objective. The evaluation team proposes to test the overriding hypothesis that *Safe at Home West Virginia* will improve outcomes for youth in congregate care and at risk of congregate care, and assess change for each goal identified as part of the outcomes evaluation, using a matched case design to compare outcomes using rigorous matching and analytic procedures. Further, we suggest a strategy to examine the impact of individual components of the evaluation to gain a richer understanding about what is working to achieve desired outcomes.

Matched Case Design

BCF proposes the evaluator use a retrospective matched case design with historical data from the Families and Youth Tracking System (FACTS) and other data as available. Westat's evaluation team will work with West Virginia BCF to develop procedures for matching demonstration youth to similar historical comparison youth, building on our demonstrated success in designing rigorous evaluations for other waiver states. The RFP specifies that the evaluation team may propose to use propensity score matching (PSM) or a comparable statistical matching methodology. In our opinion, PSM may not be the best choice to provide valid and reliable outcomes comparisons for this evaluation. PSM assumes that each child has a non-zero probability of receiving each intervention (no *Safe at Home West Virginia* services versus *Safe at Home West Virginia* services); however, historical youth have no chance of receiving *Safe at Home West Virginia* services, so this assumption does not hold. Therefore, based on our experience and the state of West Virginia's preferences to use a

statistical matching methodology, we propose using an alternative statistical matching methodology, a “distance-matching” method to match demonstration youth with historical youth on their case characteristics that are known to correlate with the proposed outcomes. This method helps to identify matched demonstration and historical youth in the target population (age 12 to 17) with similar expected outcomes in the absence of an effect of the demonstration interventions. Outcomes of the demonstration youth will be compared to outcomes of matched youth served historically.

Using the distance-matching method, we will match demonstration youth and comparison youth based on demographics, service characteristics (e.g., custody status, permanency goals) and covariates that may be related to outcomes (e.g., length of time in out-of-home placement prior to the start of *Safe at Home West Virginia* or congregate care services, length of time in congregate care placement prior to the start date, assessment scores and family and child service needs). The proposed matching variables, to be discussed with BCF, include:

- Age;
- Gender;
- Race/ethnicity;
- Custody status;
- Primary removal reason;
- Contributing factors for removal (child behavior/mental health, substance use/abuse, truancy, domestic violence, parental mental health);
- Prior out-of-home placement experience (prior to current entry during the study period);
- Prior congregate care placements;
- Time in out-of-home care placement;
- Time in congregate care placement;
- Permanency goal at time of service referral;
- Involvement with juvenile justice (dual involvement);
- Region of the state;
- Disability status (e.g., no diagnosis or disability, disability or DSM diagnosis); and

- Needs and strengths identified in assessments at start of the intervention/referral/admission to placement (e.g., risk areas identified, or assessment scores, if available for both groups).

Matching requires specifying a pool of youth from the historical period that can be matched with the youth served by *Safe at Home West Virginia*. For the target population of youth age 12 to 17 who are in, entering, or at risk of entering congregate care during the *Safe at Home West Virginia* demonstration period, the ideal comparison pool will be youth who were in, entering, or at risk of entering congregate care during a historical period. Although it is straight forward to identify youth in or entering congregate care, identifying the “at-risk” population consistently in the historical and demonstration period—whether or not they entered congregate care—will be key to ensuring the matched youth are selected from a pool of youth comparable to those in the target population for *Safe at Home West Virginia*. If quality data are available, criteria such as diagnosis, dual involvement with juvenile justice and child welfare, history of placement disruption, and history of psychiatric hospitalizations can be used to identify youth at risk of congregate care placement for inclusion in the target population and historical pool of youth. The evaluation team will work closely with BCF to clearly define the best method to identify youth at risk of congregate care placement in the historical and demonstration periods.

Child-level data from FACTS and other sources (as available) will be used for matching procedures and to analyze outcomes pertaining to goals identified in the RFP. Data quality of variables impacts the validity of the analyses, so the team will assess data quality and availability for both historical and *Safe at Home West Virginia* youth before finalizing the list of variables to include in matching and outcome analyses. SAS will be used to make the matches between *Safe at Home West Virginia* youth and historical youth and to conduct quantitative analyses.

Outcome Measures and Data Sources

The evaluation team has identified a series of outcome measures for each goal of the demonstration, to be discussed with BCF. These measures and data considerations are described in the subsection for each goal. Child-level data from FACTS will serve as the primary data source for outcome measures, and will be supplemented with data from the Child and Adolescent Needs and Strengths Assessment (CANS), West Virginia Education Information System (WVEIS), other CAPS assessments, and any other sources identified by the state. The quality and completeness of data for each variable will be assessed, to ensure reliable and valid data are used for each outcome measure.

Descriptive Analyses

The evaluation team will conduct descriptive analyses to describe the population of youth served by *Safe at Home West Virginia* and the pool of youth served historically (unmatched) semi-annually, depending on availability of data.⁸ Data will include the number of youth served, the number of youth served by county and by service location (in-state placement, out-of-state placement, and in community), and demographics, child and family characteristics, and service-related characteristics (e.g., child's race, sex, age, reason for removal, circumstances of removal, risk factors, etc.). The number of youth served will be presented by intervention type (i.e., Intensive Care Coordination and Next Steps) and county for *Safe at Home West Virginia* youth. Selected outcome indicators will also be presented descriptively for the *Safe at Home West Virginia* and historical pool of youth, although no conclusions should be drawn based on the descriptive, unmatched data. SAS will be used for all quantitative analyses.

Testing the Demonstration Hypothesis

To test the overriding hypothesis that *Safe at Home West Virginia* will improve outcomes for youth in or at risk of congregate care placements, the primary method will be to match *Safe at Home West Virginia* youth with similar youth served historically, as described earlier, and conduct statistical analyses to compare the outcomes of these matched pairs of youth. Descriptive analyses, survival analyses (Cox regression and Kaplan Meier procedure), growth modeling, and other multivariate analyses (linear regression, conditional logistic regression, and repeated measures analyses) will be used to compare *Safe at Home West Virginia* youth with the matched youth with similar characteristics. The categorical intervention variable, matched pair identifier and a series of demographic, child and family characteristics, and service-related covariates (including service components) will be entered into each regression. The county will be included as a covariate to help account for any discrepancy in services provided (e.g., based on service accessibility). In addition, the date their services began will be entered into the analysis to help control for time trends, as this study includes youth from two different time periods and extends over several years. The parameter for the categorical intervention variable will be used to assess the effect of implementing *Safe at Home West Virginia* after adjusting for the effect of other predictors. Although the matching

⁸ The first Semi-annual Report may be limited to the numbers served, whereas later reports may provide additional descriptive data. Additionally, some outcome data may be available annually (e.g., standardized tests), not semi-annually, and thus will be reported on that schedule.

procedure creates balanced groups on matching variables, matching variables may be included in the analyses to adjust for any remaining imbalance.

Several outcomes require a different approach to test the hypothesis. An interrupted time series design will be used to assess change in the number of youth placed in congregate care, because counts of youth in care cannot be estimated from matched pairs. Repeated measures analyses may be used to assess change in well-being within the *Safe at Home West Virginia* population when the outcome data are unavailable for the historical group.

Data quality checks will be conducted prior to conducting any quantitative analyses.

Strategy for Determining the Impact of Each Demonstration Component on Outcome(s)

West Virginia's demonstration includes two *Safe at Home West Virginia* Wraparound Interventions: Intensive Care Coordination (ICC) and Next Steps. Both interventions begin with the completion of the Comprehensive Assessment Planning System (CAPS), including the CANS assessment. With the Initial Family Joining Meeting, *Safe at Home West Virginia* aims to engage the family to participate in the planning process. With these assessments, a multi-disciplinary team approach, and the Initial Family Joining Meeting, the State aims to better identify the needs of each youth and subsequently address those needs within an extensive service array to improve the safety, permanency and well-being of youth and their families.

West Virginia is committed to employing a retrospective matched case design to test the impact of *Safe at Home West Virginia* on safety, permanency and well-being outcomes. By comparing outcomes between the demonstration and historical conditions, an evaluator can make a summary statement about whether the demonstration "did" or "did not" work. Although this finding or summary judgment on a program would be interesting, the utility or usefulness of this claim would be limited in terms of the development of future policies or practices. Rigorous evaluations require more than a "yes" or "no" response. Rigorous evaluations investigate the past, monitor the present, and prepare for the future by providing answers about the practical and critical questions agencies need to

successfully serve families and youth. The evaluation we propose will accomplish this by answering the following questions:

Q. Which youth and families benefited most from the demonstration, and why?

Q. Which Wraparound interventions and program components were most effective for youth and families with regards to safety, permanency and well-being? How might the State of West Virginia modify the demonstration to achieve even better outcomes?

Our strategy to determine the impact of each demonstration component and its specific outcomes is to approach the evaluation as intervention research. We are committed to an evaluation that identifies the specific mechanisms of change. That is, although it will be important to know if the demonstration group achieved better outcomes through the demonstration intervention services and whether the desired outcomes were achieved in a cost neutral manner, our analyses will also focus on modeling the relationship between individual interventions (ICC and Next Steps) and individual outcomes. We will also examine the relationship between specific program components and outcomes, depending on the availability of data, to gain a deeper understanding of what works to achieve better outcomes.

To do this, we will explore with BCF which components of *Safe at Home West Virginia* are being tracked and measured, for possible inclusion in the model. For example, does family participation in the Initial Family Joining meeting predict improved desired outcomes? Does the quality and completeness of the service array in the youth's county predict desired outcomes? The array of services received by families will vary according to a wide range of factors including but not limited to risk of further maltreatment, cooperation, age of the youth, the presence of certain co-occurring problems (e.g., substance abuse may impact treatment engagement in ways different than a behavioral or mental health diagnosis), and the availability of services within the communities. The variation in services across youth and families will provide the opportunity to investigate the unique effects of each component of the demonstration.

This is an approach we have used repeatedly in our prior work with child welfare services. Our evaluation will include specific analyses that investigate the unique contribution of each service within the wraparound program. For example, how well does *Safe at Home West Virginia* (Intensive Care Coordination and Next Steps) work to address youth behavioral problems and prevent placement in foster care? It is also important to note however, that certain interventions may work

better for certain populations/demographics. These types of analyses are critical for future program planning and will be well represented in our evaluation reports to the state of West Virginia.

Reporting

Descriptive data analyses conducted semi-annually will be presented in the semi-annual report. Results of the analyses testing the demonstration hypotheses will be presented in the interim and final reports.

The evaluation team will work with West Virginia BCF, its partners, and key stakeholders to finalize our approach, including research questions, outcomes and indicators, comparison populations, and other evaluation methods as we develop the demonstration Evaluation Plan. The following sections of this proposal present the evaluation team's initial ideas regarding methods for each goal presented in the RFP.

Section 4, Subsection 4.10: Goal/Objective 10

Q10. Number of youth placed in congregate care.

A10. Vendor Response:

Background

West Virginia has relied heavily on congregate care in recent history, particularly for older youth. As of September 2013, 61 percent of youth age 12 to 17 in out-of-home care were in congregate care settings. Moreover, during fiscal year 2013, 71 percent of youth entering care at age 12 to 17 were placed in congregate care. West Virginia BCF seeks to reduce its reliance on congregate care by implementing *Safe at Home West Virginia*, initially with the target population of youth age 12 to 17 in congregate care.

Proposed Research Question and Methods

To help understand the impact of *Safe at Home West Virginia* on the number of youth in congregate care, the evaluation will ask the following research question:

Q. Does the *Safe at Home West Virginia* demonstration project result in a decline in the number of youth age 12 to 17 placed in congregate care?

BCF hypothesizes that *Safe at Home West Virginia* will reduce the number of youth in congregate care and reduce the length of stay for those youth. We propose to examine the extent to which *Safe at Home West Virginia* reduces the number of youth age 12 to 17 in congregate care using descriptive case flow data for youth age 12 to 17 served by congregate care, including data from the historical and demonstration period on the following:

- Number of youth in congregate care (point in time);
- Number of youth entering congregate care placement;
- Number of youth exiting congregate care placement;
- Number and percentage of youth in out-of-home care by placement type (congregate care, kinship care, foster home care, other);

- Number and percentage of youth placed in congregate care in-state vs. out of state; and
- Rate of youth placed in congregate care per 1,000 youth age 12 to 17 in the WV population.

Graphical presentation of these data will allow a visual assessment of historical trends, and provide insight as to whether or not there is movement in the correct direction (a reduction in youth in congregate care). The descriptive data may be examined in the semi-annual reports during the evaluation period, although no conclusions should be drawn based on this semi-annual review. Because counts of youth in congregate care cannot be estimated from matched pairs as described above, for the final report, the analysis will include an interrupted time series design, using perhaps quarterly data, to test for statistically significant trends in the data over time.

Data sources will include WV BCF's FACTS system and the U.S. Census Bureau.

Reporting

Descriptive data for these indicators will be reported semi-annually. The final analysis of trends will be reported in the Interim and Final Reports.

Section 4, Subsection 4.11: Goal/Objective 11

Q11. Section 4, Subsection 4.11: Goal/Objective 11: Length of stay in congregate care.

A11. Vendor Response:

Background

Once placed in congregate care, West Virginia's youth may remain in congregate placement for an extended period of time rather than leaving to permanency or stepping down to a less restrictive placement. For instance, among youth placed out of state, the average length of stay among discharged youth was 14 months, for the period from July 1, 2011, to June 30, 2012. As part of West Virginia's effort to reduce its reliance on congregate care, the implementation of *Safe at Home West Virginia* intends to reduce the length of time youth stay in congregate care.

Proposed Research Question and Methods

In regard to length of stay in congregate care, the evaluation will ask the following research question: When compared to youth served by West Virginia BCF prior to the demonstration:

Q. Do youth age 12 to 17 served by the *Safe at Home West Virginia* demonstration project experience shorter lengths of stay in congregate care?

West Virginia BCF hypothesizes that youth served with *Safe at Home West Virginia* will experience reduced length of stay in congregate care compared to similar youth served with traditional care. To test this, the evaluator will compare length of stay outcomes for *Safe at Home West Virginia* youth

in or entering congregate care during the study period to matched historical youth. Using administrative data from FACTS, the evaluation team will examine the following descriptive indicators for youth in congregate care:

- **Length of Congregate Care Placement** – The number of days from the start date of a congregate care placement to the end date of the congregate care placement, or the end date of the last continuous congregate care placement,⁹ or to the end of the reporting period for those still in care. This measure examines length of placement separately for those still in congregate care and those who left congregate care (point in time).
- **Length of Congregate Care Placement After *Safe at Home West Virginia* Implemented, Among Youth Already in Care** – For the subset of youth already in care when *Safe at Home West Virginia* was implemented, the number of days from the implementation date of the *Safe at Home West Virginia* intervention to the end date of the last consecutive congregate care placement, or to the end of the reporting period for those still in care. This measure examines length of placement separately for those still in congregate care and those who left congregate care (point in time).
- **Proportion of Youth in Congregate Care for <6 months, 6 to 12 Months, and >12 Months** – The proportion of youth for whom the indicated amount of time is (<6 months, 6 to 12 months, and >12 months) in congregate care from the start date of a congregate care placement to the end date of the congregate care placement, or the end date of the last continuous congregate care placement. This measure examines the proportion separately for youth still in congregate care and those who left congregate care.
- **Cumulative Time in Congregate Care** – The total number of months spent in congregate care placement at any time, whether or not the child left and re-entered congregate care, including all congregate care placement settings (non-detention).
- **Congregate Care Exits** – The number and percentage of youth leaving congregate care within 12 months.
- **Congregate Care End Reasons** – The placement end reason for youth leaving congregate care within 12 months, including number and percentage of youth:
 - Moving to a less restrictive placement setting within 12 months;
 - Moving to a more restrictive setting (e.g., hospitalization);

⁹ The length of congregate care placement refers to the number of days youth spend in one or more consecutive congregate care placements, without any gaps in placement records lasting more than 1 day. If a youth is in one congregate care placement setting, we count the number of days from the day the youth is placed in the congregate care setting to the day the youth leaves the congregate care setting. If the youth was placed in two or more consecutive congregate care settings, we count the number of days from the start date of the first congregate care placement to the end date of the last consecutive congregate care placement.

- Exiting foster care to permanency (reunification, guardianship, adoption); and
 - Exiting foster care for other reasons (e.g., emancipation, death).
- **Congregate Care Re-entries** – The number and percentage of youth re-entering congregate care within 3, 6, or 12 months, of those who left congregate care within 12 months.

The primary outcome measure to test the hypothesis that length of stay will be shorter for youth served by *Safe at Home West Virginia* compared to matched youth will be:

- **Timing (days) and Likelihood of Returning to the Community From Congregate Care After *Safe at Home West Virginia* Implemented within 12 and 24 Months (Survival Analysis)** – This measure examines the number of days from the start date of a congregate care placement to the end date of congregate care, censoring on cases where youth leave congregate care to more restrictive settings or exit care for other reasons (e.g., emancipation, incarceration, death). Return to the community refers to moves to less restrictive settings or exits to permanency.

Descriptive and multivariate statistics will be used to examine these indicators. Descriptive data will be summarized semi-annually for *Safe at Home West Virginia* youth and youth served historically, by region and by in-state vs. out of state placements. Descriptive and multivariate analyses will be conducted for the interim and final reports, comparing outcomes for *Safe at Home West Virginia* youth with matched historical youth to test the hypothesis that the demonstration will reduce time in congregate care. The unit of analysis will be matched pairs of youth. The evaluation will present descriptive data for the demonstration and matched youth, by region¹⁰ and total.

Cox regression analysis will test differences in time to event for demonstration and matched youth, examining both the timing and occurrence of youth returning to the community (leaving congregate care to permanency or less restrictive setting). The Kaplan Meier procedure will provide a visual illustration of the time to event for each group (*Safe at Home West Virginia* youth, matched youth). The categorical intervention variable, matched pair identifier and a series of demographic, child and family characteristics, and service-related covariates (including service components) will be entered into the regression. In addition, the date their services began will be entered into the analysis to help control for time trends, as this study includes youth from two different time periods and extends over several years. The parameter for the categorical intervention variable will be used to assess the effect of implementing *Safe at Home West Virginia* after adjusting for the effect of other predictors.

¹⁰ Region will include all counties within the region that are participating in the implementation and evaluation; in other words, for BCF Region II data will be aggregated for all 8 counties, and for BCF Region III data will be aggregated for the three participating counties.

Although the matching procedure creates balanced groups on matching variables, matching variables may be included in the analyses to adjust for any remaining imbalance. Covariates will include factors associated with length of stay in congregate care such as DSM diagnosis, behavior problem, placement instability, parental substance abuse, and medication status.¹¹

Reporting

Descriptive data will be reported semi-annually. Multivariate outcome analyses will be presented in the Interim Report and Final Reports.

¹¹ U.S. Department of Health and Human Services, Administration for Children and Families, Children's Bureau. (2015). *A national look at the use of congregate care in child welfare*. Washington, DC: Author; Hussey, D.L., and Guo, S. (2005). Forecasting length of stay in child residential treatment. *Child Psychiatry and Human Development*, 36(1), 95–111.

Section 4, Subsection 4.12: Goal/Objective 12

Q12. Number of youth remaining in their home communities.

A12. Vendor Response:

Background

The state of West Virginia has a long history of placing children, especially those requiring congregate care for intensive problems, in out of state placement. The state ranks sixth highest across the nation in the percentage of children placed in out of state congregate care. While the proportion of these youth placed out of state has decreased over several years, there was an increase in 2013, at about 25 percent, well above the 13.7 percent national average.¹²

Placing youth in close proximity to their home communities helps preserve continuity of family relationships and connections with the youth's community. Close proximity facilitates frequent visitation with family and opportunities to stay connected with friends, relatives, churches, and others in the youth's existing support network. At the same time, it is more feasible for youth to attend their neighborhood schools and use the same health care providers familiar with their history.

The *Safe at Home West Virginia* approach to ensuring youth remain in their home communities whenever safely possible is two-pronged — first, to provide a full-continuum of services to youth and their families using a wraparound approach, and especially the necessary supportive services needed to provide relief and support to parents and caregivers, to help families build long-term connections and supports in their communities. Additionally, the demonstration plans to develop the needed wraparound services within communities that will allow youth currently in out of state congregate care, to return and live safely in his or her home community.

¹² West Virginia Department of Health & Human Resources. *Initial Design and Implementation Report, Safe at Home West Virginia*. 2015.

Research Questions and Proposed Methodology

The demonstration intends to evaluate outcomes regarding youth remaining in their home communities by testing the following research question:

Qa. Among youth ages 12 to 17 at risk of entering congregate care, are youth served by *Safe at Home West Virginia* more likely to remain in their home communities than youth not served by the demonstration?

Qb. Among youth ages 12 to 17 in *out of state* congregate care facilities, are youth served by *Safe at Home West Virginia* more likely to return to their home communities than youth not served by the demonstration?

The evaluation team proposes to use data from the West Virginia FACTS to examine the extent to which the *Safe at Home West Virginia* program maintains youth in their home communities, and is able to move youth in out of state congregate care back to their home communities, both for the demonstration and historical groups. We propose to define “in the home community” to include youth served (1) in-home and (2) in an out-of-home placement within 20 miles¹³ of the known home location. This proximity makes routine connection to families, neighborhood schools, health care providers, and support networks more feasible on a daily or weekly basis. At the same time, we recognize that the need for specialized care sometimes precludes placement in home communities, and such specialized care may still be needed for some youth even with *Safe at Home West Virginia* services in place. Thus, we also wish to examine placement within 50 miles of the removal home, and in-state versus out of state, consistent with measures established by the West Virginia Commission to Study Residential Placement of Children. Further, because being in the home community suggests access to relatives and known schools, we propose to examine the extent to which youth who come into care are placed with relatives and whether or not they continue to attend the same schools.

The descriptive analyses will include the following indicators for youth served by *Safe at Home West Virginia* and a pool of youth served historically:

- Number and percentage of youth remaining in their home communities;

¹³ We will work with BCF to revise this definition if 20 miles is not agreeable.

- Number and percentage of youth in **out-of-state congregate care** returning to their home communities;
- Proximity of foster care placement to the known home location, among youth in out-of-home placement
 - Number and percentage placed **in West Virginia vs. out of state**;
 - Number and percentage placed **in West Virginia** by proximity (within 20, 50, and >50 miles of known home location); and
 - Number and percentage placed **out of state** by proximity (within 20, 50, and >50 miles of known home location).
- Proportion of youth placed with relatives, of youth in out-of-home placement
 - Number and percentage placed with relatives vs. in non-relative homes vs. in congregate care;
 - Number and percentage placed with relatives **in West Virginia vs. out of state**;
 - Number and percentage placed with relatives **in West Virginia** by proximity (within 20, 50, and >50 miles of known home location); and
 - Number and percentage placed with kin **out of state** by proximity (within 20, 50, and >50 miles of known home location).
- Continuity of school assignment
 - Number and percentage continue to attend same school (as when removed and or began intervention);
 - Number and percentage attending a different school but in the same school county; and
 - Number and percentage attending a different school and in a different school county.

The primary outcome measures to test the hypothesis that youth served with *Safe at Home West Virginia* will be more likely to remain in their communities will include the following:

- **Timing (Days) and Likelihood of Remaining within (or Placement Outside) the Home Community** within 12 months and 24 months (survival analysis) – or the entry cohort of youth, examines the number of days from the start date of the intervention to the date a youth is placed more than 20 miles from the known home location. This measure provides the proportion of youth placed within and outside the community,

the amount of time the youth “survive,” or remain, in the home community on average, and the risk (likelihood) of placement outside the home community.

- **Timing (Days) and Likelihood of Return to Home Community** within 12 months and 24 months (survival analysis) – For the subset of youth placed in **out of state congregate care** at the start of the intervention, examines the number of days from the start date of the intervention to the date a youth is placed within 20 miles of the known home location (either in placement or return home). This measure provides the proportion of youth who return to their home community, the amount of time it takes for youth to return on average, the home community on average, and the risk (likelihood) of placement outside the home community.
- **Likelihood of Stable School Assignment** at initial placement and 12 months later (logistic regression) – For the entry cohort of youth, examines the likelihood that youth remain in the neighborhood school vs. are transferred to a different school.

Descriptive and multivariate statistics will be used to examine these indicators. Descriptive indicators will be summarized semi-annually for *Safe at Home West Virginia* youth and a pool of youth served historically, by region and by in-state vs. out of state placements. Descriptive and multivariate analyses will be conducted for the interim and final reports, comparing outcomes for *Safe at Home West Virginia* youth with matched historical youth to test the hypothesis that the demonstration will increase the proportion and likelihood of youth remaining in the community. In addition, multivariate analyses will test for increases in the proportion and likelihood of youth in out of state congregate care returning to the community and likelihood of stable school assignment.

The Kaplan Meier procedure will provide a visual illustration of the time to event (placement outside community; return to community) for each intervention group (*Safe at Home West Virginia* youth, matched youth). Cox regression analysis will test differences in time to event for demonstration and matched youth, examining both the timing and occurrence of youth being placed outside the community and, for those already in care, returning to the community. The categorical intervention variable, matched pair identifier, a series of covariates, and the date their services began (to control for time trends) will be entered into the regression analyses. Conditional (stratified) logistic regression will be used for categorical outcome variable (stable school assignment), with the matched pairs used to define strata. Covariates will be included in the analysis to test the hypothesis of service impact while also identifying factors that contribute to the outcome.

The ability of the child welfare agency to maintain youth within the community—the desired outcome—is driven in part by the extent to which the service array within the community can meet the needs of youth and their families. The demonstration intends to improve the service array within communities, but this may be more challenging in communities with a higher level of needs. As

such, the multivariate models will include a series of community covariates consistent with previous studies specifying community needs that may impact social services.¹⁴ Notably, poverty, unemployment, and low levels of education have been cited in previous research as barriers to strengths based work.¹⁵ Thus, the analyses will include the following:

- Poverty status (percentage of families with income below the poverty rate during the past 12 months);¹⁶
- Low school attainment among adults 20 years and older,¹⁷ including percentage with less than a ninth grade education and percentage with less than a high school diploma or equivalency;¹⁸ and
- Unemployment: the percentage of the civilian labor force age 16 years and over who are unemployed.¹⁹

In addition, the extent to which the home community is rural or urban may be a factor in service availability, so the analysis will include the rural-urban commuting area (RUCA) codes, which classify census tracts based on population density, urbanization, and daily commuting (U.S. Department of Agriculture).²⁰ Covariates will also include BCF Region, service components and characteristics, and family and child demographics and characteristics that may be associated with the outcome (e.g., diagnosis, behavior problems, placement instability, and other child needs). Stepwise variable

¹⁴ McCroskey, J. Christie, T. A., Lorthridge, J., Chambers, R., Pecora, P. J., Azzam, T. & Wold, C. (2009). *Prevention initiative demonstration project (PIDP) year one evaluation summary report*. Retrieved from http://www.casey.org/Resources/Publications/pdf/pidp_fr.pdf. National Center for Children in Poverty (2007). *Parents' low education leads to low income, despite full-time employment*. Retrieved from http://www.nccp.org/publications/pdf/text_786.pdf. Shook Slack, K., Holl, J. L., McDaniel, M., Yoo, J., & Bolger, K. (2004). Understanding the risks of child neglect: An exploration of poverty and parenting characteristics. *Child Maltreatment*, 9, 395-408. Smith, G. C., Palmieri, P.A. (2007). Risk of psychological difficulties among children raised by custodial grandparents. *Psychiatric Services*, 58(10), 1303-1310.

¹⁵ Ibid.

¹⁶ The U.S. Census Bureau uses several streams of income to calculate a family's total income. The final dollar amount is then compared to one of 48 poverty threshold designations, which vary by size of family and age of the family members. When the income is less than the dollar amount of a threshold then the family is considered as having income below poverty. <http://www.census.gov/hhes/www/poverty/poverty-cal-in-acs.pdf> See for example, U.S. Census Bureau. (2013). *2007-2011 American community survey 5-year estimates*.

¹⁷ The two categories under low education (less than a ninth grade education and less than a high school diploma or equivalency) were kept distinct to emphasize the level of need.

¹⁸ U.S. Census Bureau. (2013). *2007-2011 American community survey 5-year estimates*.

¹⁹ U.S. Census Bureau. (2013). *2007-2011 American community survey 5-year estimates, educational attainment, educational attainment for population 25 years and over table*.

²⁰ The U.S. Department of agriculture makes rural-urban commuting area (RUCA) data available, based on information from the U.S. Census Bureau's decennial census and American Community Surveys. Information about RUCA is available at <http://www.ers.usda.gov/data-products/rural-urban-commuting-area-codes.aspx#U91O7GPDWHO>. RUCA data are available at: <http://depts.washington.edu/uwruca/ruca-codes.php>.

selection procedures may be used to identify other significant predictors and interactions. If the variables used for matching are effective predictors of the outcome variable, the number of other variables that are selected may be relatively small. Data sources will include the U.S. Census Bureau's American Community Survey data, U.S. Department of Agriculture RUCA data, and FACTS, including home zip code data to link census data to child-level data.

The multivariate analyses will identify whether or not the demonstration youth have better outcomes than matched historical youth, after controlling for other factors, and identify which service components and community, service, family and child characteristics predict whether youth stay in their home communities.

Reporting

Descriptive data will be reported in the Semi-annual, Interim and Final Reports. The survival and multivariate analyses will be reported in the Interim and Final Reports.

Section 4, Subsection 4.13: Goal/Objective 13

Q13. Section 4, Subsection 4.13: Goal/Objective 13: Rates of initial foster care entry.

A13. Vendor Response:

Background

Like so many states across the country, West Virginia struggles with the rate at which youth are removed from their homes and placed in out-of-home care, and specifically in congregate care facilities. In 2013, of the 1,488 youth age 12- to 17-years-old that entered foster care in West Virginia, 71 percent were placed in congregate care.²¹ This rate is only more challenging with older youth that have severe emotional or behavioral disturbance issues. To improve the well-being of the youth served and to alleviate the expensive cost of maintaining youth in high-end care, the *Safe at Home West Virginia* program proposes to provide a full-continuum of trauma-informed, wraparound supports and services to youth and their families at risk of placement in congregate care, to strengthen family bonds and allow youth who would otherwise be placed in congregate care, to be served safely in their homes and avoid foster care placement.

Research Questions and Proposed Methodology

The demonstration intends to evaluate outcomes regarding the initial foster care entry of youth by testing the following research question:

Q. Do youth ages 12 to 17 at risk of out-of-home care served by the *Safe at Home West Virginia* program experience lower rates of initial entry into foster care than youth not served by the program?

²¹ West Virginia Department of Health and Human Resources, Bureau for Children and Families, 2014, *Safe at Home West Virginia Title IV-E Waiver Application*, p. 4.

The evaluation team proposes to use data from the West Virginia FACTS to examine the extent to which the *Safe at Home West Virginia* program reduces youth's rate of initial entry (placement) into foster care, comparing both the historical and demonstration periods. The analysis will consider both the

- Number and percentage of youth with an initial entry (placement) into foster care; and
- Number and percentage of youth with an initial entry (placement) into foster care who were served in their own home and had their case closed, but then had a subsequent initial entry into foster care within 12 months of case closure.

Variations between the groups may be due in part to changes in characteristics, such as child and family functioning, child behavior and maltreatment history. The premise is that youth and families served by the *Safe at Home West Virginia* will have decreased risks associated with the need for placement outside the home, and increased strengths thus allowing youth to remain in their homes safely.

We will provide descriptive analyses of the youth initially entering care in both groups by their demographic, family, and case characteristics (e.g., child's race, sex, child's age, reason for removal, circumstances of removal, risk factors, etc.). Additionally, the team will explore the timing and risk of the initial entry (placement) into foster care using survival analyses (Cox regression and Kaplan Meier procedure). These analyses will identify whether or not the demonstration youth have better outcomes than matched historical youth, after controlling for other factors, and identify characteristics of youth and their families that predict successful outcomes. The analyses will look at: (1) the number of days from the maltreatment substantiation disposition date to the initial placement into foster care during a case opening; and (2) the number of days between case closure and any initial foster care placement within 12 months subsequent to closure for cases that were served in-home. The Cox regression will include one or more predictors from child and family characteristics in the FACTS data.

Reporting

Descriptive data will be reported in the Semi-annual, Interim and Final Reports. The survival and multivariate analyses will be reported in the Interim and Final Reports.

Section 4, Subsection 4.14: Goal/Objective 14

Q14. Number of youth re-entering any form of foster care.

A14. Vendor Response:

Background

Although the rate of youth re-entering care is generally low, the risk of subsequent re-entry into foster care increases for older youth, and those youth with severe emotional or behavior disturbance issues and juvenile justice involvement. The *Safe at Home West Virginia* program proposes to provide a full-continuum of wraparound supports and services to youth in congregate care and their families including planning, coordination of services and steps to transition youth to community supports and follow-up. These services will strengthen family and community bonds and allow youth, to step down to less intensive foster care placements and ultimately return and remain safely in their homes without a subsequent re-entry into foster care.

Proposed Methodology and Analyses

The demonstration intends to evaluate outcomes regarding child re-entry into foster care after discharge by testing the following research question:

Q. Do youth ages 12 to 17 in congregate care served by the *Safe at Home West Virginia* program who exit foster care experience fewer re-entries after discharge than youth not served by the program?

The evaluation team proposes to use data from the West Virginia FACTS to examine the extent to which the *Safe at Home West Virginia* program reduces the number and percentage of youth ages 12 to 17 in congregate care who are discharged from foster care and who re-enter any form of foster care post-discharge, in both the historical and demonstration periods. The analysis will look at the number of re-entries overall, and also categorize timing of the re-entry for 6, 12, 18, and 24 months post-discharge. Variations between the groups may be due in part to differences in child and family characteristics, such as family functioning, child behavior, reason for removal, and so on. Those youth served by the *Safe at Home West Virginia* may show fewer risks and increased strengths thus altering their risk for re-entry into care.

We will provide descriptive analyses of youth in both groups re-entering care and describe variations their demographic, family, and case characteristics (e.g., child's race, sex, child's age, number of days in care, family and child risk factors, reason for removal, number of removals from home, circumstances of removal, etc.) and also describe differences in the characteristics of the re-entry population compared to those youth who do not re-enter. We will prepare this descriptive data graphically to allow a visual assessment of historical trends, and provide insight as to whether or not there is movement in the correct direction (a reduction in youth re-entering any form of foster care and specifically congregate care). The descriptive analyses provide valuable information, although no conclusions about services should be drawn based on this periodic review of these data.

Additionally, the team will conduct survival analyses (Cox regression and Kaplan Meier procedure) to assess the timing and likelihood of re-entry into foster care for those youth discharged from foster care, comparing the *Safe at Home West Virginia* target population to matched youth from the historical period. The analysis will explore differences for youth who re-enter after discharge and for those who do not, and identify characteristics of youth and their families that may affect the successful outcomes and also identify service needs that may not be addressed.

Reporting

Descriptive data for youth who re-enter will be reported in the Semi-annual, Interim and Final Reports. The descriptive data comparing youth who re-enter with those who do not, and the survival analyses will be reported in the Interim and Final Reports.

Section 4, Subsection 4.15: Goal/Objective 15

Q15. Youth safety (e.g., rates of maltreatment/recidivism).

A15. Vendor Response:

Background

West Virginia aims to improve youth safety by reducing the risk of child maltreatment and subsequent maltreatment through the use of an innovative combination of evidence-based wraparound programs and interventions. The evaluation of the *Safe at Home West Virginia* service model will not only answer questions specific to wraparound service efforts in West Virginia but will also help inform the national dialogue on how best to meet the complex needs of youth and families with a particular focus on reducing the risk and preventing maltreatment for youth ages 12 to 17. Key indicators in the research for measuring a reduction in child maltreatment risk include the parent's distress level and knowledge of child development, use of non-punitive parenting practices, parenting efficacy, level of parent caregiving and involvement, family harmony, and co-parenting quality.²²

Previous waiver demonstrations that focused on reducing risk of maltreatment have demonstrated positive outcomes. For example, a Florida-based demonstration project used home and community-based services, early intervention, and prevention strategies as some of the components of their waiver (e.g., Family Connections, Peaceful Paths, Resource Specialists, Family Finding, Diversion Staffings, Early Services Intervention). Findings suggest that youth assigned to the waiver group were significantly less likely to experience out-of-home care (about a 27% reduction) than youth in the comparison group. The Florida waiver participants also experienced a decline in the recurrence of maltreatment within 6-months of service termination.²³ Additionally, an Indiana-based waiver project also demonstrated positive outcomes. Youth who received waiver services spent less time out of home and were less likely to experience a subsequent substantiated report of maltreatment than the comparison group youth.²⁴

²² National Research Council. (1993). *Understanding child abuse and neglect*. Washington, D.C.: National Academy Press.

²³ Vargo, A.C., Armstrong, M.I., Jordan, N., Sharrock, P., Sowell, C., Yampolskaya, S. (2012). IV-E Waiver Demonstration Evaluation—Final Evaluation Report SFY 11-12. Tampa, FL: University of South Florida, Louis de la Parte Florida Mental Health Institute. Submitted to Florida Department of Children and Families.

²⁴ Loman, L.A., Filonow, C.S., Siegel, G.L. (2011). Indiana IV-E Child Welfare Waiver Demonstration Extension Final Evaluation Report. Prepared for the Children's Bureau by the Institute of Applied Research.

A study using a relative risk (RR) regression method to explore the extent to which children of caregivers in the Brevard C.A.R.E.S. (Coordination, Advocacy, Resources, Education and Support) wraparound intervention experienced a reduction of maltreatment 6 months post completion. Brevard C.A.R.E.S. is designed to reduce and prevent child maltreatment in identified at-risk families of children 0- to 17-years-old. The study of 308 children included 131 whose caregivers completed the intervention and a comparison group of 177 similarly situated children. The study found that children whose caregivers completed the intervention experienced less verified maltreatment than children in the comparison group. These findings have implications to enhance systems of care in the community that seek family interventions to support child maltreatment prevention.²⁵

Research Questions and Proposed Methodology

The hypothesis of the West Virginia demonstration is that connecting families with wraparound, well-targeted, and effective services (i.e., evidence-based services that reflect family needs and strengths) will improve family functioning, decrease the risk of maltreatment and subsequent maltreatment, and therefore prevent the placement of youth in foster care and long-term placement in congregate care. The demonstration intends to test the following research question pertaining to child safety:

Q. Do youth ages 12 to 17 at risk or in congregate care served by the *Safe at Home West Virginia* demonstration experience reduced risk of maltreatment and reduced subsequent maltreatment?

The evaluation team will investigate the long-term outcomes of safety, permanency and family risk for the youth served by *Safe at Home West Virginia* compared to those youth in the historical comparison group who received services as usual. The state administrative data in FACTS regarding child abuse and neglect reports and investigations (Family Functioning Assessment dispositions and “safe” or “not safe” on Safety Evaluation) will be analyzed. Descriptive data will be examined for the demonstration population and the pool of historical youth at risk of congregate care, so that the

²⁵ Schneider-Muñoz, A. Renteria, R.A., Gelwicks, J., and Fasano, M. (2015). Reducing risk: Families in wraparound intervention. *families in society: The Journal of Contemporary Social Services*, 96 (2), 91–98. doi: <http://dx.doi.org/10.1606/1044-3894.2015.96.18>.

Bureau can monitor the progress of the demonstration. For this outcome, the team will review the following indicators at 6, 12, 18, and 24 months:

- Number of reports per youth;
- Number of subsequent reports per youth;
- Proportion of youth with subsequent reports;
- Proportion of youth with a “safe” or “not safe evaluation in subsequent reports;
- Proportion of youth with subsequent substantiated reports;
- Number of substantiated reports per youth; and
- Type of maltreatment substantiated.

To test the hypothesis, that the risk of maltreatment of youth receiving wraparound demonstration intervention services will decrease, the evaluation team suggests two outcomes. The first will be a comparison of the safety evaluation indicators, “safe” and “not safe” for the *Safe at Home West Virginia* youth to the historical matched youth at risk of congregate care receiving services as usual. The reported measure will be the number and percentage of youth served by *Safe at Home West Virginia* who are assessed as “safe” as compared to the youth in the historical group in subsequent safety evaluations. The second measure will use the CANS level of risk data to examine the number and percentage of youth served by *Safe at Home West Virginia* whose risk for the need of services is reduced at the transition phase of the intervention compared to their risk assessed at the start of intervention wraparound services.

To test the hypothesis that youth receiving wraparound demonstration intervention services will experience a reduction in maltreatment recidivism, we will compare the rates of subsequent maltreatment reports for youth served after the implementation of the *Safe at Home West Virginia* to the rates of subsequent maltreatment for the matched group of youth served in the pre-wavier

period, using data about abuse and neglect allegations and dispositions from FACTS. We will specifically look at the following indicators, which apply to youth living at home:

- Among the subset of youth in the study population who remain home (but are identified at risk of congregate care placement):²⁶
 - Timing (days) and likelihood (risk) of allegations/report of maltreatment that occur subsequent to the intervention start date; for demonstration youth, the start date is the date the youth and his or her family were assigned to receive demonstration services and for the historical group, the start date is the corresponding date to the demonstration youth, which may be the opening of an ongoing case (to be defined with the BCF team);
 - Timing (days) and likelihood of a **substantiated** allegations/report of maltreatment that occur subsequent to the intervention start date;
 - Number of subsequent reports of maltreatment within 6 and 12 months after the intervention start date;
 - Number of subsequent substantiated reports of maltreatment within 6 and 12 months after the intervention start date; and
 - Type of maltreatment substantiated.
- For youth who return home from congregate care (exit cohort):
 - Timing (days) and likelihood of subsequent maltreatment report, from the date returned home;
 - Timing (days) and likelihood of subsequent substantiated maltreatment report, from the date returned home;
 - Average number of subsequent reports of maltreatment within 6 and 12 months after exit;
 - Average number of subsequent substantiated reports of maltreatment within 6 and 12 months after exit; and
 - Type of maltreatment substantiated.

It is important to investigate both the overall probability of subsequent maltreatment and the timing of maltreatment because the probabilities may be similar (e.g., both groups experience maltreated at

²⁶ For this indicator it is possible the historical population may have too few youth at risk who remain home to be included in this subgroup analysis. In the absence of a viable comparison population, we will examine the indicators for the waiver population, including regional comparisons and testing predictors of risk of maltreatment.

approximately 30%), but the timing of such event may differ. In addition, we will examine time to maltreatment reports by maltreatment type. It is important to examine the specific types of maltreatment that occur for youth involved in the demonstration services compared to the matched comparison youth. This approach to outcomes will permit one to understand whether the demonstration is effective at reducing the overall risk of subsequent maltreatment and also whether the demonstration activities significantly decrease the risk in some areas (e.g., neglect) better than others (e.g., physical abuse).

Although the comparison between the demonstration and historical comparison group are of great importance and central to nearly all evaluation activities, our analytic plans are designed to provide more detailed understanding about which subgroups of youth are at greatest risk of continued maltreatment or at greatest risk of removal from the biological family home or placement in congregate care. Thus, our analyses of subsequent maltreatment will include youth and parent demographics such as (race, gender, age), history of maltreatment, trauma, behavioral and mental health of youth and parents, contributing factors for placement, substance abuse, and other important covariates play in explaining future maltreatment and the need for congregate or foster care placement. These analyses are intended to help future efforts with regard to targeting (i.e., which families are at great risk) and other modifications/expansion of demonstration efforts. In addition, analyses will include service components and service characteristics, to understand the role of services in mitigating risk.

Descriptive and multivariate statistics will be used to examine the maltreatment indicators. Descriptive data will be summarized semi-annually for *Safe at Home West Virginia* youth and youth served historically, by region. Descriptive and multivariate analyses will compare outcomes for *Safe at Home West Virginia* youth with matched historical youth to test the hypothesis that the demonstration will reduce time in congregate care. The unit of analysis will be matched pairs of youth. The evaluation will present descriptive data for the demonstration and matched youth, by region.

Cox regression analysis will test differences in time to event for demonstration and matched youth, examining both the timing and occurrence of maltreatment reports and substantiated reports and controlling for other factors that may influence safety outcomes. Consistent with other Cox regression analyses for the demonstration, the categorical intervention variable, matched pair identifier, a series of child and family characteristics (described above), and the date services began (to help control for time trends) will be entered in the regression analysis. The Kaplan Meier procedure will provide a visual illustration of the time to event for each group (*Safe at Home West*

Virginia youth, matched youth), by region, and by maltreatment type. Together, these analyses will help assess the impact of the demonstration on safety outcomes.

Reporting

The evaluation team will provide descriptive analyses for the Semi-annual, Interim, and Final Reports. Multivariate analyses will be conducted for the Interim and Final reports.

Section 4, Subsection 4.16: Goal/Objective 16

Q16. Goal/Objective 16: Well-being of youth.

A16. Vendor Response:

Background

Safety and permanency are familiar and well-defined concepts for child welfare stakeholders. However, child welfare systems have just recently been tasked with improving child and family well-being. In 2012, the Commissioner of the Administration on Children, Youth, and Families, issued a memo on well-being in response to emerging research on child development and maltreatment (Samuels, 2012). The memo stated that systems serving children must provide safety and permanency services, and well-being services to enhance families' capacity for promoting optimal child development. Though there is no uniform definition of well-being within child welfare contexts, the Child and Family Services Review (CFSR) instrument provides some guidance. At the child level, the CFSR measures well-being through the receipt of services that meet children's educational, physical, and mental health needs. The 2008 CFSR found that West Virginia was not in substantial conformity with Well-Being Outcome 3, "Children receive adequate services to meet their physical and mental health needs."²⁷ Definitions of well-being must also be trauma informed. In November of 2104, the Children's Bureau notified all current Title IV-E waiver States that the U.S. Department of Health and Human Services' (HHS') Administration for Children and Families (ACF), Centers for Medicare & Medicaid Services (CMS) and Substance Abuse and Mental Health Services Administration (SAMHSA) are engaged in an ongoing partnership to address complex, interpersonal trauma and improve social-emotional health among children known to child welfare systems. The Children's Bureau would like the waiver demonstrations to be a key source of information provided to support this effort.

²⁷ *Final report West Virginia child and family services review (2009)*. U.S. Department of Health and Human Services.

Research Questions and Proposed Methodology

The demonstration intends to evaluate outcomes regarding well-being by testing the following research question: When compared to youth served by the Bureau for Children and Families prior to the demonstration:

Q. Do youth ages 12 to 17, receiving *Safe at Home West Virginia* services, experience improvements in well-being, as demonstrated by increases in youth's physical and mental health.

Improvements related to improved educational outcomes are addressed in Goal/Objective 4.17. Developing a conceptually sound definition of well-being is essential to measuring Goal/Objective 4.16. For the purposes of the *Safe at Home West Virginia* demonstration, the evaluation team will use the undergirding philosophy that childhood trauma can contribute to adverse outcomes. The team proposes defining family and child well-being according to CFRS standards:

- Changes in youth's physical, and mental needs as a result of service provision.

Data from the Child and Adolescent Needs and Strengths Assessment (CANS) will be the primary measure used to assess family and child-level well-being. CANS is an appropriate measure because it has child-level items, it assesses domains critical to well-being (e.g., child and behavioral emotional needs, child development), and it assesses trauma. As appropriate, the evaluation team will also incorporate assessment data from the Comprehensive Assessment and Planning System (CAPS). For example, the Practical Adolescent Dual Diagnostic Interview, which assesses the status of substance use and the presence of significant mental health issues, could be a frequently used assessment for the target population. Demographic data, and data on services provided will be collected through FACTS. The evaluation team will use CANS dimension scores, and scores from CAPS assessments to assess changes in child well-being, assuming these assessments are administered two or more times (e.g., at referral or placement, and at 6 months or discharge). The team is using CANS scores in assessment of well-being in the evaluation of a trauma-focused model in Illinois that is part of the Permanency Innovations Initiative and in the evaluation of Massachusetts' IV-E waiver demonstration, a similarly designed approach to serving youth in or at risk of congregate care. FACTS data will be used to determine whether there are variations in outcomes by demographic or service factors.

A time series design is an appropriate approach for assessing well-being because the main instrument being used, the CANS, was updated in 2012 to include items on trauma. However, the recent implementation of the CANS prevents the use of a retrospective matched design for this outcome because historical cases would not have data over a sufficient number of years. Time-series design also provides an analytic foundation for tailoring the study of well-being to the unique context of each demonstration county. This is important given that each of the counties may have site-specific implementation timelines for *Safe at Home West Virginia*. The timelines will affect, at minimum, the start dates for baseline and post-intervention measurement. The evaluation team will request data on a semi-annual basis to help mitigate varying schedules of measurement due to site-specific implementation. Using the data from the CANS and other approved assessments, and FACTS fulfills the need for reliable and valid measures that are uniform across counties. It is particularly important that measures be stable over time when time series design is used so that the threat of instrumentation can be ruled out.

Point-in-time descriptive data will be prepared semi-annually, as appropriate, to help monitor whether there is movement in the correct direction (reduction of youth's physical and mental health needs). The evaluation team will use a general linear mixed model for repeated measures analysis. Mixed models are preferable because they can incorporate participants with missing data, are robust to differences in measurement schedules (i.e., administration of the CANS on a youth specific schedule), provides mechanisms for the inclusion of predictor variables, and allows for treatment of time as a continuous or categorical variable. Variations in well-being may be due to demographic factors (e.g. age, ethnicity, race, gender), or service factors (e.g. amount of *Safe at Home West Virginia* services received, number of MDTs, occurrence of a HealthCheck screening). Repeated measures analyses will any reveal changes in outcome data that occur in the presence of one or more predictors.

Reporting

The evaluation team anticipates reporting descriptive data on well-being in the Semi-annual Reports, and the Interim and Final Reports. Results of repeated measures analyses will be reported in the Interim and Final Reports.

Section 4, Subsection 4.17: Goal/Objective 17

Q17. Educational achievement (e.g., number/proportion of youth remaining in the same school throughout agency involvement).

A17. Vendor Response:

Background

Safe at Home West Virginia furthers the regions' long-standing commitment to improving educational outcomes for children in out-of-home care. In 2004, West Virginia's Out of Home Care Education Task Force completed a study²⁸ documenting that children in out-of-home care had much lower scores on WESTEST, had greater needs for special education, and experienced more disciplinary actions than their peers who were not involved with the child welfare system. The Education of Children in Out-of-Home Care Advisory Committee is continuing the data-driven work of the Task Force. The Committee is developing the West Virginia Growth Model, a model for assessing the factors impacting academic achievement for children in out-of-home care. The Committee is also creating a data system focusing on educational achievement, and constructing the Interagency Residential Monitoring System to assess the quality of educational services received by West Virginia children in out of state placements. Additional efforts targeting educational achievement include implementation of West Virginia's Early Warning System-WOW, focusing on drop-out prevention. Federal legislation (Child and Family Services Improvement and Innovation Act, P.L. 112-34) directs child welfare decision-makers to maintain educational stability during any placement change, and educational stability is one of the child well-being outcomes for the Child and Family Service Reviews. West Virginia decision-makers are responding to the need for educational stability. For example, one of the goals of *West Virginia's Blueprint for Change*, is for children in out-of-home care to remain in the same school.

²⁸ *Reaching Every Child Addressing Educational Attainment of Out of Home Care Children in West Virginia.*

Research Questions and Proposed Methodology

The demonstration intends to evaluate outcomes regarding youth educational achievement by testing the following research questions: When compared to youth served by the Bureau for Children and Families prior to the demonstration:

Qa. Do youth ages 12 to 17, receiving *Safe at Home West Virginia* services, experience improvements in educational achievement, as demonstrated by increases in their GPA?

Qb. Do youth ages 12 to 17, receiving *Safe at Home West Virginia* services, experience improvements in educational achievement, as demonstrated by increases in their WESTEST or state equivalent scores?

Qc. Do youth ages 12 to 17, receiving *Safe at Home West Virginia* services, experience improvements in educational achievement, as demonstrated by increased numbers of youth graduating from high school?

Qd. Are a greater number/proportion of youth ages 12 to 17, receiving *Safe at Home West Virginia* services, remaining in the same school during a given school term?

The evaluation team proposes to measure educational achievement through youth' cumulative grade point average (GPA) for a given semester or term, annual scores on the WESTEST, or if appropriate APTA, or the equivalent standardized assessment used by an out of state educational system. The evaluation team proposes to measure graduation from high school through the award of a high school, or high school equivalency diploma. Stability of school placement will be measured through school assignment and attendance. Specifically, continued attendance at school assigned (school of origin) at the time of removal or enrollment in the demonstration, continued attendance at an assigned school within the same county as the school of origin, and continued attendance at a school outside of the county of the school of origin.

Data will be obtained mostly from the West Virginia Education Information System, or from the out of state education provider. Case level data from FACTS will also be requested, as described below. West Virginia's Department of Education has a history of sharing WESTEST, and other educational achievement data for the purposes of examining educational outcomes for children in out-of-home care. Access to data for evaluation purposes may require an amendment or renewal of the MOU on academic achievement of children in out-of-home care, between West Virginia's

Department of Health and Human Resources and the State Board of Education. If necessary, the evaluation team will work with BCF to arrange additional data sharing agreements with out of state educational systems and can also work with the Education of Children in Out of Home Care Committee to determine the potential for evaluation data sharing through the Interagency Residential Monitoring System.

Point-in-time descriptive data will be prepared graphically, allowing for visual assessment of historical trends, and monitoring of whether there is movement in the correct direction (increases in GPA, standardized test scores/levels of proficiency, numbers of targeted youth graduating from high school, and educational stability). Growth modeling will be used to test for differences in GPA, and standardized test scores between demonstration participants, and matched youth. Logistic regression analyses will be used to determine whether there is a statistically significant increase in the numbers of targeted youth receiving diplomas, as compared to matched youth and whether there is a statistically significant increase in the numbers/proportions of targeted youth remaining in the same school as compared to matched youth. Variations in educational achievement may be due to demographic (e.g., age, ethnicity, race, gender) or socioemotional factors (e.g., CANS dimension scores measuring trauma, emotional needs, risk behaviors, and development), educational needs (e.g., need for special education services, IEP in place), disciplinary actions (e.g., suspensions or expulsions), aspects of service planning (e.g. obtained school records through CAPS process, use of Journey placement notebook), or out-of-home care characteristics (e.g., placement type, in or out of state placement, and placement duration). These factors can be used as predictors in in growth and regression models. Resulting analyses will any reveal changes in outcome data that occur in the presence of one or more predictors.

Reporting

The evaluation team anticipates reporting descriptive data on GPA and educational stability in the Semi-annual Reports, and the Interim and Final Reports. Standardized test administration, and awarding of a diploma or equivalency diploma occurs on an annual basis. The evaluation team anticipates reporting descriptive data on standardized test scores and diploma receipt in every other semi-annual report (i.e., annually), and the interim and final report. Results of growth modeling and logistic regression analyses will be reported in the Interim and Final Reports.

Section 4, Subsection 4.18: Goal/Objective 18

Q18. Improved Family Functioning.

A18. Vendor Response:

Background

Similar to child well-being, family functioning is not universally defined within child welfare contexts. The Child and Family Services Review (CFSR) instrument provides guidance on family functioning, stating that as a result of services, families should have the enhanced capacity to provide for their children. That is, families functional level should be adequate enough to discontinue child welfare services. The 2008 CFSR for West Virginia found that 36.9 percent of cases substantially achieved the outcome of enhanced capacity. Family functioning can be investigated at multiple levels, child, caregiver, and family unit. However, research has found that child-level outcomes are particularly affected by the strengths and needs of caregivers.²⁹ These strengths and needs are also referred to as risk and protective factors. In child welfare contexts, risk factors are associated with experiences of maltreatment.³⁰ Caregiver level risk factors include, but are not limited to poor parenting skills, caregivers' substance abuse, domestic violence, unmet mental and/or physical health needs, lack of concrete supports, and lack of relational or social supports.³¹ Conversely, protective factors are characteristics that help to preserve child safety, and build resiliency.³² Resiliency is defined as the noticeable capability of a person who has been exposed to trauma or lives in a high-risk environment.³³ Protective factors are often the inverse of risk factors, and at the caregiver level

²⁹ Head, L.S., and Abbeduto, L. (2007). Recognizing the role of parents in developmental outcomes: A systems approach to evaluating the child with developmental disabilities. *Mental Retardation and Developmental Disabilities Research Reviews*, 13, 293–301.

³⁰ Fraser, M.W. (1997). The ecology of childhood: A multisystems perspective. In M. Fraser (Ed.), *Risk and resilience in childhood an ecological perspective* (p. 1–9). Washington, DC: National Association of Social Workers.

³¹ Centers for Disease Control and Prevention. (2015). *Child maltreatment; Risk and protective factors*.

³² Fraser, M.W. (1997). The ecology of childhood: A multisystems perspective. In M. Fraser (Ed.), *Risk and resilience in childhood an ecological perspective* (p. 1–9). Washington, DC: National Association of Social Workers.

³³ Masten, A.S., and Coatsworth, J.D. (1998). The development of competence in favorable and unfavorable environments: Lessons from research on successful children. *American Psychologist*, 53, 205–220.

include, knowledge of child development, strong parenting skills, addressed mental and/or physical health needs, and use of concrete, relational, and social supports.³⁴

Research Questions and Proposed Methodology

The demonstration intends to evaluate outcomes regarding family functioning by testing the following research question for both demonstration and historical groups:

Q. Do families who are served by *Safe at Home West Virginia* experience increased functioning compared to families who are not served by the demonstration?

The evaluation team proposes to measure family functioning at the caregiver level. Youth' functioning will be measured as an aspect of their well-being (see Goal/Objective 4.16). Youth functioning data will be incorporated in the analyses of caregiver functioning outcomes. Measurement of Goal/Objective 4.12 requires a well-conceptualized definition of family functioning. For the purposes of the *Safe at Home West Virginia* demonstration, the evaluation team proposes incorporating CFSR standards in the definition of family functioning. Family functioning will be defined as:

- Post-service provision changes in caregivers' strengths and needs, such that caregivers have the enhanced capacity to provide for the youth in their care.

Data from the Child and Adolescent Needs and Strengths Assessment (CANS) will be used to assess caretaker functioning. CANS is an appropriate measure because it has caregiver-level items and it features a domain focusing on caregivers' strengths and needs. The evaluation team will use CANS dimension scores to assess changes in caregiver functioning, assuming the assessment is administered two or more times (e.g., post referral or placement, and at 6 months or discharge).

The team will also measure caregivers' involvement in service planning and receipt of services. Involving caregivers in the service planning process provides early engagement opportunities, and

³⁴ Centers for Disease Control and Prevention. (2015). *Child maltreatment; Risk and protective factors*. Horton, C. (2003). Protective factors literature review: Early care and education programs and the prevention of child abuse and neglect. Retrieved February 3, 2010, from http://strengtheningfamilies.net/images/uploads/pdf_uploads/LiteratureReview.pdf. Reynolds, A.J., and Robertson, D.L. (2003). School-based early intervention and later child maltreatment in the Chicago longitudinal study. *Child Development*, 74, (1), 3–26.

increases the likelihood that planned services will meet a caregiver's unique needs. Further, caregivers must actually receive the planned services in order to experience improved well-being. The team intends to measure caregivers' involvement with service planning and receipt of services with data from FACTS, and a family satisfaction survey. FACTS features a data element indicating whether families were involved in service planning, and that element will provide documentation of services received. The family satisfaction survey, discussed in more detail in the Process Evaluation section, will measure several aspects of satisfaction including caregivers' satisfaction with the level of inclusion in the service planning process.

A time series design is the proposed approach for assessing caregiver functioning. The rationale for use of this design is the same as that provided in discussion of youth's well-being. Since the current iteration of the CANS was implemented in 2012, a retrospective matched design cannot be used. Historical cases will not have data over a sufficient number of years. The evaluation team will request data on a semi-annual basis to help mitigate varying schedules of measurement due to site-specific implementation. Use of CANS, FACTS, and family satisfaction survey data bolsters the time series design. These measures will be uniform across counties and families, helping to rule out the threat of instrumentation.

Point-in-time descriptive data will be prepared, as appropriate, to help monitor whether there is movement in the correct direction (reduction of caregivers' needs and increases in their strengths). The evaluation team will use a general linear mixed model for repeated measures analysis. Mixed models are preferable because they can incorporate participants with missing data, are robust to differences in measurement schedules (i.e., administration of the CANS on a family specific schedule), provides mechanisms for the inclusion of predictor variables, and allows for treatment of time as a continuous or categorical variable. Variations in functioning may be due to caregivers' demographic factors (e.g. age, ethnicity, race, gender, family composition), service factors (e.g., amount of *Safe at Home West Virginia* services received), and the status of youth's well-being. Repeated measures analyses will reveal any changes in outcome data that occur in the presence of one or more predictors.

Reporting

The evaluation team anticipates reporting descriptive data on caregiver functioning in the semi-annual, interim, and final reports. Results of repeated measures analyses will be reported in the interim and final reports.

Table 2 presents the proposed evaluation outcome measures, the proposed data sources, and the frequency of reporting. The frequency of reporting can be negotiated and coordinated with the Bureau in the development of the Evaluation Plan.

Table 2. Evaluation outcome measures

Outcome	Outcomes measured	Source	Frequency of report
4.10	Number of youth placed in congregate care		
	Congregate care case flow including: <ul style="list-style-type: none"> ■ Number of youth in congregate care (point in time) ■ Number of youth entering congregate care placement ■ Number of youth exiting congregate care placement 	FACTS	Semi-annual, Interim and Final Reports
	Number and percentage of youth in out-of-home care by placement type (congregate care, kinship care, foster home care, other)	FACTS	Semi-annual, Interim and Final Reports
	Number and percentage of youth placed in congregate care in-state vs. out of state	FACTS	Semi-annual, Interim and Final Reports
	Rate of youth placed in congregate care per 1,000 youth age 12 to 17 in the WV population	FACTS	Semi-annual, Interim and Final Reports
4.11	Length of stay in congregate care		
	Length of congregate care placement: The number of days from the start date of a congregate care placement to the end date of the congregate care placement, or the end date of the last continuous congregate care placement, or to the end of the reporting period for those still in care. Examines length of placement separately for those still in congregate care and those who left congregate care (point in time).	FACTS	Semi-annual, Interim and Final Reports
	Length of congregate care placement after <i>Safe at Home West Virginia</i> implemented, among youth already in care: For the subset of youth already in care when <i>Safe at Home West Virginia</i> was implemented, the number of days from the implementation date of the Safe at Home intervention to the end date of the last consecutive congregate care placement, or to the end of the reporting period for those still in care. Examines length of placement separately for those still in congregate care and those who left congregate care (point in time).	FACTS	Semi-annual, Interim and Final Reports

Table 2. Evaluation outcome measures (continued)

Outcome	Outcomes measured	Source	Frequency of report
	Proportion of youth in congregate care for <6months, 6-12 months, and >12 months. The proportion of youth who the indicated amount of time in congregate care from the start date of a congregate care placement to the end date of the congregate care placement, or the end date of the last continuous congregate care placement. Examines the proportion separately for youth still in congregate care and those who left congregate care.	FACTS	Semi-annual, Interim and Final Reports
	Cumulative time in congregate care: The total number of months spent in congregate care placement at any time, whether or not the child left and re-entered congregate care, including all congregate care placement settings (non-detention)	FACTS	Semi-annual, Interim and Final Reports
	Congregate care exits: The number and percentage of youth leaving congregate care within 12 months.	FACTS	Semi-annual, Interim and Final Reports
	Congregate care end reasons: The placement end reason for youth leaving congregate care within 12 months, including number and percentage of youth: <ul style="list-style-type: none"> ■ Moving to a less restrictive placement setting within 12 months ■ Moving to a more restrictive setting (e.g., hospitalization) ■ Exiting foster care to permanency (reunification, guardianship, adoption) ■ Exiting foster care for other reasons (e.g., emancipation, death) 	FACTS	Semi-annual, Interim and Final Reports
	Timing (days) and likelihood of returning to the community from congregate care after <i>Safe at Home West Virginia</i> implemented within 12 and 24 months (survival analysis), censoring on cases where youth leave congregate care to more restrictive settings or exit care for other reasons (e.g., emancipation, incarceration, death)	FACTS	Interim and Final Reports
	Congregate care re-entries: The number and percentage of youth re-entering congregate care within 3, 6, or 12 months, of those who left congregate care within 12 months.	FACTS	Interim and Final Reports
4.12	Youth remaining in their home communities		
	Number and percentage of youth remaining in their home communities	FACTS	Semi-annual, Interim, and Final Reports.
	Number and percentage of youth in out of state congregate care returning to their home communities	FACTS	Semi-annual, Interim, and Final Reports.

Table 2. Evaluation outcome measures (continued)

Outcome	Outcomes measured	Source	Frequency of report
	Proximity of foster care placement to the known home location, among youth in out-of-home placement. Number and percentage of youth: <ul style="list-style-type: none"> Placed in West Virginia vs. out of state Placed in West Virginia by proximity (within 20, 50, and >50 miles of known home location) Placed out of state by proximity (within 20, 50, and >50 miles of known home location) 	FACTS	Semi-annual, Interim, and Final Reports.
	Youth placed with relatives, of youth in out-of-home placement. Number and percentage of youth: <ul style="list-style-type: none"> Placed with relatives vs. in non-relative homes vs. in congregate care Placed with relatives in West Virginia vs. out of state Placed with relatives in West Virginia by proximity (within 20, 50, and >50 miles of known home location) Placed with kin out of state by proximity (within 20, 50, and >50 miles of known home location) 	FACTS	Semi-annual, Interim, and Final Reports.
	Continuity of school assignment. Number and percentage of youth who: <ul style="list-style-type: none"> Continue to attend same school (as when removed/began intervention) Attend a different school but in the same county Attend a different school in a different county 	FACTS	Semi-annual, Interim, and Final Reports.
	Timing (days) and likelihood of remaining within (or placement outside) the home community within 12 months and 24 months	FACTS	Interim and Final Reports
	Timing (days) and likelihood of return to home community within 12 months and 24 months	FACTS	Interim and Final Reports
	Likelihood of stable school assignment at initial placement and 12 months	FACTS	Interim, and Final Reports
4.13	Rates of initial foster care entry		
	Number and percentage of youth with an initial entry (placement) into foster care	FACTS	Semi-annual, Interim, and Final Reports.
	Number and percentage of youth with an initial entry (placement) into foster care who were served in their own home and had their case closed, but experienced a subsequent initial entry into foster care within 12 months of case closure	FACTS	Semi-annual, Interim, and Final Reports.

Table 2. Evaluation outcome measures (continued)

Outcome	Outcomes measured	Source	Frequency of report
	Assess the timing (days) and risk of the initial entry (placement) into foster care, looking at the number of days from the maltreatment substantiation disposition date to the initial placement into foster care. Also consider differences for youth who enter and those who do not, and identify characteristics of youth and their families that may affect the successful outcomes and identify service needs that may not be addressed.	FACTS	Interim, and Final Reports.
	Assess the timing (days) and likelihood of entry into foster care for those youth discharged from foster care after initially being served in-home. Also consider differences for youth who enter after discharge and for those who do not, and identify characteristics of youth and their families that may affect the successful outcomes and identify service needs that may not be addressed.	FACTS	Interim, and Final Reports.
4.14	Number of youth re-entering any form of foster care		
	The number and percentage of youth who are in congregate care or at risk of congregate care, who are discharged from foster care and who re-enter any form of foster care at 6, 12, 18, or 24 months.	FACTS	Semi-annual, Interim, and Final Reports
	Assess the timing (months) and likelihood of re-entry into foster care for those youth discharged from foster care. Explore differences for youth who re-enter and for those who do not to identify characteristics of youth and their families that may affect the successful outcomes and also identify service needs that may not be addressed.	FACTS	Interim and Final Reports
4.15	Youth safety		
	Number and percentage of youth in the demonstration period who have a “safe” indicator in a subsequent safety evaluation.	FACTS – Safety Evaluation	Semi-annual, Interim and Final Reports
	Number and percentage of youth who do not experience subsequent maltreatment episodes within 6 and 12 months after the start of <i>Safe at Home West Virginia</i> intervention	FACTS	Semi-annual, Interim and Final Reports
	Number and percentage of youth who do not experience subsequent maltreatment episodes at 6 and 12 months following completion of <i>Safe at Home West Virginia</i> intervention services.	FACTS	Interim and Final Report

Table 2. Evaluation outcome measures (continued)

Outcome	Outcomes measured	Source	Frequency of report
	Number and percentage of youth served by <i>Safe at Home West Virginia</i> whose risk for the need of services is reduced at the transition phase of <i>Safe at Home West Virginia</i> .	CANS	Interim and Final Reports
	The timing and occurrence of maltreatment reports.	FACTS	Interim and Final Reports
	The timing and occurrence of substantiated maltreatment reports.	FACTS	Interim and Final Reports
4.16	Well-being of youth		
	Number and percentage of youth with reduced physical needs.	CANS	Semi-annual, Interim, and Final Reports.
	Number and percentage of youth with reduced mental health needs.	CANS	Semi-annual, Interim, and Final Reports.
4.17	Educational achievement		
	Number and percentage of youth with improved GPAs.	WVEIS or out of state equivalent	Every other semi-annual, Interim, and Final Reports
	Number and percentage of youth with improved standardized test scores (WESTEST or equivalent).	WVEIS or out of state equivalent	Every other semi-annual, Interim, and Final Reports
	Number and percentage of youth graduating from high school with a diploma or equivalent diploma.	WVEIS or out of state equivalent	Every other semi-annual, Interim, and Final Reports
	Number and proportion of youth remaining in the same school during a given school term.	WVEIS or out of state equivalent	Semi-annual, Interim, and Final Reports.
4.18	Improved family functioning		
	Number and percentage of caregivers who have increased their strengths while receiving <i>Safe at Home West Virginia</i> services.	CANS	Interim and Final Reports
	Number and percentage of caregivers who have decreased their needs while receiving <i>Safe at Home West Virginia</i> services.	CANS	Interim and Final Reports

Section 4, Subsection 4.19: Goal/Objective 19

Q19. Any additional data collection identified as needed.

A19. Vendor Response:

The evaluation team will work with BCF to determine if additional data collection is needed.

Cost Study Questions (Q4.20 – Q4.23)

Cost Study Questions (Q4.20 – Q4.23)

Section 4, Subsection 4.20: Goal/Objective 20

Q20. A cost comparison of the key services received by children and families through the demonstration project to the cost of services available prior to the start of the demonstration, or that were received by the children and families that were not designated to receive demonstration services.

A20. Vendor Response:

The Westat evaluation team in coordination with the DHHR, Bureau for Children and Families and the waiver regions and counties, will perform a cost analysis study that will examine the costs of services received by youth and families during the waiver demonstration period. Specifically, for this study, our approach to cost analysis will start with examining the services provided to youth and families in the pre-waiver system (business-as-usual) compared to services provided to youth and families during the waiver demonstration period (*Safe at Home West Virginia* intervention services that add wraparound prevention, reunification, and support services). Costs will be distinguished by various categories, for example, service type, funding source, service provider, and costs per family or child. The analysis will involve a longitudinal examination of changes in costs over time, i.e., how the cost of services for youth and families in the waiver period and cost of services for youth and families in the pre-waiver period are different and how costs during the waiver period change over time.

We will work closely with the Bureau to categorize program costs to key line items, including personnel, training, space, utilities, travel, contractual, supplies, overhead and other costs. We will utilize payment records for all pre-waiver and waiver youth and families and include the spending from various categories of federal, state, county, and local sources. To the extent possible, we will look into subcategory of costs to explain variations and implications for costs savings. For example, cost of administering programs for youth in foster care can be divided between the cost of out-of-home care and cost of administering the program. Cost for administration includes salaries for social workers and out-of-home care costs are a function of the number of youth entering placement, the length of time a child remains in care, and the type of care. Examination of costs overtime by such subcategories in pre-waiver and waiver periods will yield maximum information with policy implications related to cost savings that are attributable to the participation in Title IV-E Waiver.

The availability and level of effort required in obtaining cost data from the Bureaus and waiver counties and affiliated sources (e.g. intervention service providers) will be the first consideration in preparing the design of the cost study for the evaluation plan. In child welfare, services and cost data at the family member and child level are not often readily available or complete nor contained in one automated source electronically. At a minimum, the evaluation team will study the cost difference between pre-waiver and waiver groups over time in the use of in-home vs. out-of-home foster care services, including wraparound, parent-child and family therapies, after-care and transitional services, substance abuse treatment services, mental health services, concrete services, and other support services for both the pre-waiver period and the waiver period to the extent service cost data are available and recorded. We will strive to have comparable data across sites, but recognize (based on other multi-site experience) that differences in definitions and how cost data are collected may vary across counties. We will work closely with the DHHR, the Bureau, regional and county offices, and other service providers or agencies to understand, at a minimum, what is encompassed within each definition and data set.

It is important to note that cost analysis can be performed from either an accounting or economic standpoint. Using solely DHHR, Bureau for Children and Families and county data would produce accounting cost analysis since it only includes the explicit out-of-pocket expenditures for the services. Program cost estimates derived from accounting costs may not be comparable across programs if any of the programs use considerable amount of in-kind resources in providing services or there is extensive variation in the service model due to service availability.³⁵ In contrast, an economic cost analysis includes not only out-of-pocket expenses, but also the value of in-kind resources (e.g., community services, volunteer workers, subsidized building space) that may be used at no charge in providing services and resources provided by other agencies. Estimating economic costs would allow for comparison across programs with same/similar goals and outcomes. Thus, after discussions with the Bureau and Regional Directors, we will explore the utility of creating a “cost data collection tool” to obtain cost information. When possible, we will compare costs across providers and counties although we recognize the challenges associated with availability of comparable cost data across the sites due to variability in service availability and in-kind contributed services in each of the waiver counties. Due to the possible variations in the service models planned and the implementation strategies in each of the waiver counties, the costs analyses would also vary accordingly. The discussion of results will explicitly state any caveats and limitations due to variations in data measurements and availability of data.

³⁵ Dunlap, L.J., and French, M.T. (1998). A comparison of two methods for estimating the costs of drug abuse treatment. *Journal of Maintenance in the Addictions*, 1(3), 29–44.

Westat has successfully implemented this strategy and implemented cost and cost-effectiveness analyses in previous studies for clients such as the U.S. Substance Abuse and Mental Health Administration, U.S. Department of Agriculture, Tricare Administration and New York City. Additionally, we are currently performing this analysis for the Michigan IV-E Waiver demonstration. Such an instrument usually seeks information on expenditures involving set-up activities, personnel costs, materials and supplies, facility and utility, contracted services, administrative overhead and other costs. We follow an “economic costs” approach and obtain cost information on all resources paid for by the grant agency, in-kind donations and volunteer services, and items that are paid for by other agencies. In the cost literature, similar data collection tools have been used extensively in studies examining program costs among variety of organizations.³⁶ The evaluation team can obtain cost data by using a hard-copy instrument or an excel file. In earlier cost studies, we have implemented training webinars among grantees to introduce objective of the cost study, economic concepts in costs analysis, and how to fill out the cost data collection tool. Key to the successful use of this tool is well-specified definitions of cost categories and guidelines for applying the definitions to ensure reliability across counties, which will require input from the DHHR and the Bureau, regional and county staff, service providers, and key stakeholders.

³⁶ French, M. (2011). DATCAP related papers. Available at <http://www.datcap.com/papers.htm>.

Section 4, Subsection 4.21: Goal/Objective 21

Q21. The use of key funding sources, including all relevant Federal sources such as Titles IV-A, IV-B, IV-E, and XIX of the Social Security Act, as well as State and local funds. The purpose of the analysis will be to compare the funding of services available through the demonstration with those of services traditionally provided to children and their families.

A21. Vendor Response:

The evaluation team will look into subcategory of costs to explain variations and implications for costs savings. A cost comparison analysis will include an examination of the use of key funding sources, including Federal sources such as Titles IV-A, IV-B, IV-E and XIX of the Social Security Act, as well as State, county, and local funds. Our analysis will examine costs by type of services and by source of funder (federal, state, and local). We will analyze any shift of costs between line accounts since we expect reductions in costs of reinvestigations and out-of-home placements and increases in cost of *Safe at Home West Virginia* intervention services that include wraparound, family reunification, prevention services, parent-child therapies, substance abuse treatment services, mental health services, and youth transition services. We will work closely with the Bureau and each of the regional and county offices and their service partners to categorize and validate program costs to key line items, including personnel, training, space, utilities, travel, contractual, supplies, overhead and other costs and to develop cost data collection instruments that capture costs accurately but that avoid and minimize duplication of existing records or data collection by the State or the county offices. We expect cost of federal, state and local monies spent to be provided to Westat for analysis by DHHR and the Bureau for Children and Families.

Section 1130 (h) of the Social Security Act requires that the demonstration project be cost-neutral, that is, the total amount of Federal funds used to support the demonstration will not exceed the amount of Federal funds that would have been expended by the Title IV-E agency under the State plan approved under Parts B and E of Title IV of the Act, were the demonstration project not conducted. In support of the Bureau and as part of the evaluation, the evaluation team will review the State's proposed methodology and provide consultation on appropriate options for assessing cost-neutrality for the implementation of the demonstration project, as well as reviewing the cost neutrality procedures for accuracy and completeness.

Section 4, Subsection 4.22: Goal/Objective 22

Q22. If feasible, a cost-effectiveness analysis will be conducted to estimate the costs of each successful outcome achieved through the demonstration. This analysis will be conducted using one or more of the key outcome measures for which a statistically significant difference is identified.

A22. Vendor Response:

Where feasible, the analysis will also include a cost-effectiveness component to estimate the costs incurred for each successful outcome achieved by the demonstration interventions. The cost analysis will provide a frame of reference for understanding the relationship between demonstration costs and results. To the extent possible, we will implement cost-effectiveness analysis to determine change in costs per unit of change in main outcomes. Cost-effectiveness is the extent to which the program has achieved its results at a lower cost compared with alternatives (change in costs per unit of outcome). If data are available, several measures of outcomes will be chosen for the cost-effectiveness analysis. We expect key outcomes for this analysis could include number of subsequent maltreatment episodes, length of time remaining safe at home, risk of future maltreatment, risk of entry into out-of-home placement, risk of placement in congregate care, number of placements in foster care, length of time to reunification, and risk of re-entry into foster care, and specifically re-entry into congregate care.

After identifying the major outcomes for which a statistically significant difference is identified, we will perform cost-effectiveness analysis to examine whether the costs of intervention services are justified by the outcomes. Thus, we will compute the incremental cost effectiveness ratio, costs (pre-wavier-waiver)/outcomes (intervention-services as usual), associated with waiver demonstration relative to the pre-waiver services model. Such a ratio, for example, would reveal the difference in costs between the waiver intervention model and the pre-waiver service model for each additional youth reunifying and remaining safe in their home for 12 months in the waiver demonstration period.

Section 4, Subsection 4.23: Goal/Objective 23

Q23. Any additional data collection identified as needed.

A23. Vendor Response:

Sub-Study on Average Cost per Case

Upon request and agreement with the Bureau, the evaluation team can explore a sub-study to update and supplement any workload study results previously performed by the Bureau. The evaluation team proposes a sub-study sampling cases by worker to obtain an estimate of the average service cost per case by capturing direct services, contracted services, concrete services, and in-kind contributed community services. This study will supplement family- and youth-level service and cost data that may not be readily available for the waiver intervention cost analysis. For this cost sub-study, we will collect data on caseworker time and use of client service array to help evaluate costs. The data collection will occur for an eight week period. At each time we will ask randomly selected intervention caseworkers from the demonstration counties and from a group of comparison counties where waiver services have not been implemented to report on the time they have spent on one randomly selected case in the previous week. The number of workers randomly selected will depend on the number of caseworkers in the participating counties. That data will be analyzed to estimate average time spent on different types of cases.

In coordination and approval from the Bureau and the county offices, we will ask workers to complete a service log. The service log will record hours or the appropriate unit of service, type of service provided to the selected case, delivery method—directly by worker, contracted through a service provider, or an in-kind contributed community services. From the data, we can get average number of hours and units per family and per youth and a count of services and service types received per case. Costs can be computed using average wages per worker, actual payment costs, or unit costs of services. Using this method we can calculate an average cost for a case receiving an intervention service and the cost of services as usual. The service log will also contain survey questions asking workers about challenges to the case that week, trying to get at what makes a difficult case. We will analyze the answers to these questions qualitatively for context. Because we anticipate some non-response, the evaluation team will calculate analysis weights to adjust for and reduce any non-response bias. Regression analysis will be used to predict the time spent as a function of the type of case and the time in care.

Attachment B: Mandatory Specification Checklist

Section 4, Subsection 5.1

Q1. Mandatory Requirement 1: Within 90 days of award, proposer must submit the evaluation plan to the Agency for submission to the Federal Children’s Bureau. The plan must thoroughly describe data collection and analysis procedures for the process, outcome, and cost analysis components of the evaluation.

A1. Vendor Response:

To facilitate the development of the draft plans, the evaluation team will convene a series of planning meetings with the Bureau for Children and Families (BCF), service provider representatives, and *Safe at Home West Virginia* workgroup representatives.

Within 60 days of the contract award the team will submit a draft evaluation plan that (1) documents in a logic model the underlying logic linking interventions to expected outcomes; (2) describes the process, outcome and cost study research questions, major variables to be measured, and data sources along with an assessment of the reliability and validity of each data source; (4) presents the plan for matching historical cases to the *Safe at Home West Virginia* service recipients; (5) details the process, outcome, and cost study data collection procedures, quality assurance and data security protocols, and the major data analyses to be performed; and (6) discusses client informed consent procedures and a human subjects protection plan. The evaluation team will respond to questions and comments and revise the plan based on feedback from BCF, the *Safe at Home West Virginia* workgroup representatives, and service provider representatives.

Within 90 days of the contract award the team will finalize and submit the evaluation plan to the Children’s Bureau. The final copy sent to BCF will include one hard copy and two electronic versions (one Microsoft Word version and one PDF version). The evaluation team will develop institutional review board (IRB) materials (e.g., consent forms, FAQs, etc.) concurrently with the iterations of the evaluation plan so that these materials can be submitted to the Westat IRB after approval from the Children’s Bureau. The Westat IRB is a specially constituted committee established to protect the rights and welfare of human subjects who participate in Westat projects. The Westat IRB operates under procedures set forth in the regulations of the U.S. Department of Health and Human Services and in the Federal-wide Assurance (FWA) granted to Westat by the Office for Human Research Protections (OHRP). The Board meets the second Tuesday of every

month; this schedule allows for efficient review of IRB packages. The evaluation team will also work to secure any additional local approvals needed to proceed with the implementation of the evaluation plan. For example, the Bureau's Division of Research and Analysis may need to review and approve the plans for human subjects' data collection.

Section 4, Subsection 5.2

Q2. Mandatory Requirement 2: No later than 60 days after the conclusion of the 10th quarter following the demonstration's implementation date, the proposer must submit an interim evaluation report to the Agency for submission to the Federal Children's Bureau.

A2. Vendor Response:

The evaluation team will submit an interim report to BCF for submission to the Children's Bureau no later than 60 days after the conclusion of the 10th quarter following the demonstration's implementation date. As set forth in the demonstration project terms and conditions, the report will include a process analysis of the evaluation to date, any outcome data available at the time, a brief description of the outcome and cost components of the evaluation planned, and will note any issues or problems anticipated in completion of these components. The final copy sent to BCF will include one hard copy and two electronic versions (one Microsoft Word version and one PDF version). The evaluation team will complete the following activities leading up to the submission of the report: (1) draft the interim report analysis plans for the process, outcome, and cost study; (2) submit the analysis plans to BCF and the *Safe at Home West Virginia* workgroup representatives for feedback; (3) revise the analysis plans based on the feedback received; (4) prepare the data for analysis; (5) analyze the study data; and (6) draft the interim report. The evaluation team will also revise and re-submit the report as necessary based on feedback from BCF and be available to respond to questions from the Children's Bureau and the Waiver Federal Technical Assistance Contractor about the contents of the report through a written response or a telephone conference call.

Section 4, Subsection 5.3

Q3. Mandatory Requirement 3: No later than 6 months after the conclusion of the demonstration project, a final report integrating the process, outcome, and cost components of the evaluation will be submitted to the Agency for submission to the Federal Children’s Bureau.

A3. Vendor Response:

The evaluation team will submit a final report to BCF for submission to the Children’s Bureau no later than 6 months after the conclusion of the demonstration project. The report will integrate the process, outcome, and cost evaluation findings and will follow the final report outline provided by the Children’s Bureau. The final copy sent to BCF will include one hard copy and two electronic versions (one Microsoft Word version and one PDF version). The evaluation team will complete the following activities leading up to the submission of the report: (1) draft the final report analysis plans for the process, outcome, and cost study; (2) submit the analysis plans to BCF and the *Safe at Home West Virginia* workgroup representatives for feedback; (3) revise the analysis plans based on the feedback received; (4) prepare the data for analysis; (5) analyze the study data; and (6) draft the final report. The evaluation team will also revise and re-submit the report as necessary based on feedback from BCF and be available to respond to questions from the Children’s Bureau and the Waiver Federal Technical Assistance Contractor about the contents of the report through a written response or a telephone conference call.

Section 4, Subsection 5.4

Q4. Mandatory Requirement 4: No later than 6 months after the conclusion of the demonstration, the proposer will produce and make available for public use data tapes, including documentation necessary to permit re-analysis of the data gathered during the course of the evaluation.

A4. Vendor Response:

To facilitate post-demonstration analysis of the evaluation data, the evaluation team will produce and make available for public use data tapes and supporting documentation. The evaluation data sets will undergo a disclosure analysis to minimize breaches in confidentiality. The main challenge of data dissemination is to balance the need of data users to have data with the highest possible degree of accuracy and fidelity, with the need to comply with safeguards regarding confidentiality. The concern is that (1) the integrity of the data will be compromised in order to make the data safe for release and/or (2) identifiable data will be released and the project and personnel will be legally at risk. The evaluation team will collaborate with the BCF to identify the risk elements that heighten the disclosure risks in the data, data elements of analytical importance to retain in the microdata, and key analytical relationships in the data. The primary goal of disclosure risk analysis is to identify unique records, or sparse combinations of variables, and gauge their uniqueness in the population. A risk score will be computed for each data record. The score is made up of the number of times that a record contributes to the sparse cells (number of violations) after scanning and identification are completed. The evaluation team will address records identified as having a high risk for disclosure by identifying categories of variables to collapse, variables to suppress, or data values to target for perturbation. We will also assess the impact of these data adjustments on data utility by examining cell means and quantiles, cell counts (weighted), standard errors, correlations, multivariate relationships, and loss of information due to recoding. The evaluation team will submit the final data file along with documentation of all the statistical disclosure control (SDC) treatments and results no later than 6 months after the conclusion of the demonstration.

Section 4, Subsection 5.5

Q5. Mandatory Requirement 5: Public release of any evaluation or monitoring reports required under this agreement will be made only by the Agency. Prior to public release of such reports the Vendor must provide the Agency with at least a 30-day period for review and approval.

A5. Vendor Response:

All reports will be submitted to the BCF in an agreed-upon format and according to a finalized delivery schedule, allowing adequate time for client review and feedback. The evaluation team will incorporate any revisions based on BCF input, and present a final submission. The team will honor the requirement of BCF to have at least to 30-day period for review and approval of all reports before public release.

Section 4, Subsection 5.6

Q6. Mandatory Requirement 6: Vendor must provide Semi Annual Progress Reports to Agency.

A6. Vendor Response:

Based on our past and current experience with demonstration projects, the evaluation team is aware that the Children's Bureau has a set schedule for submission of semi-annual evaluation reports as well as a template for the semi-annual report. The evaluation team will use this template to ensure that all required information is reported. At minimum, the reports will include the following: (1) a summary of the evaluation activities and progress in the implementation of the evaluation, including challenges to the implementation of the evaluation and plans to resolve the issue or an account of the communication and collaboration process with the *Safe at Home West Virginia* Project Manager to reach a resolution; (2) a brief summary of the status of data collection (i.e. number of families enrolled *Safe at Home West Virginia*, client consent status, administrative data quality, number of satisfaction surveys received, etc.); (3) evaluation findings to date; and (4) recommendations and evaluation activities planned for the next reporting period. The final copy sent to BCF will include one hard copy and two electronic versions (one Microsoft Word version and one PDF version).

The evaluation team will complete the following activities leading up to the submission of the report: (1) prepare the data for analysis; (2) analyze the study data; and (3) draft the final report. The team will also revise and re-submit the report as necessary based on feedback from BCF and be available to respond to questions from the Children's Bureau and the Waiver Federal Technical Assistance Contractor about the contents of the report through a written response or a telephone conference call.

Section 4, Subsection 5.7

Q7. Mandatory Requirement 7: Vendor will assist Agency in the development of a final implementation plan.

A7. Vendor Response:

The evaluation team will assist BCF with the development of a final implementation plan through consultation on conference calls and review of the draft plan. Some of the key implementation components that the team could advise on include the identification of project performance metrics and targets, development of identification of performance reporting and continuous improvement monitoring procedures, the development of systematic target population screening procedures, development of decision-support data systems, and the identification of implementation procedures that maintain the integrity of the retrospective matched case design.

Section 4, Subsection 5.8

Q8. **Mandatory Requirement 8: Vendor must comply with all requirements and deliverables within the body of RFP.**

A8. **Vendor Response:**

The evaluation team offers the BCF the expertise required for successfully conducting and managing *Safe at Home West Virginia's* evaluation. The key to success is our commitment to serving clients through exceptional project performance. Behind our commitment is an established process that incorporates an organizational structure with clearly defined staff roles to meet the demands of managing multiple tasks, and management tools that provide regular, detailed information on project tasks, facilitate the accurate and timely reporting of study progress and costs, and measure performance against budgets and scheduled milestones. The evaluation team will provide exceptional project performance by complying with all requirements and deliverables within the RFP including, but not limited to the following requirements:

- Attending an orientation meeting with the BCF within 5 working days of the contract award;
- Submitting the draft evaluation plan to the BCF via one hard copy and two electronic versions (one Microsoft Word version and one PDF version), within 60 calendar days of the contract award;
- Submitting the final evaluation plan to the BCF via one hard copy and two electronic versions (one Microsoft Word version and one PDF version), within 90 calendar days of the contract award;
- Submitting a final evaluation report to the BCF via one hard copy and two electronic versions (one Microsoft Word version and one PDF version), within 6 months of the conclusion of *Safe at Home West Virginia*;
- Producing and disseminating data tapes with the documentation needed to support re-analysis of evaluation data within 6 months of the conclusion of *Safe at Home West Virginia*;
- Submitting two semiannual reports a year to the BCF via one hard copy and two electronic versions (one Microsoft Word version and one PDF version) during the implementation of *Safe at Home West Virginia*;
- Preparing written reports upon the BCF's request;

- Facilitating monthly conference calls about the evaluation to provide information on implementation of the evaluation plan, supports and barriers to implementation, strategies for resolving barriers, and evaluation findings. These monthly calls will be in addition to routine and ongoing communications with the *Safe at Home West Virginia* project manager;
- Attending and participating in the annual Child Welfare Waiver Demonstration meeting upon the BCF's request;
- Assisting the BCF with completion of the final implementation plan, upon the BCF's request; and,
- Providing optional services upon the BCF's request.

Section 4, Subsection 5.9

Q9. Mandatory Requirement 9: Vendor must submit invoices by deliverable, unless Vendor submits a progress billing schedule for any deliverable and has it approved in advance by the Agency. All deliverables must meet the terms and conditions in RFP and, if tied to Federal requirements, must receive federal approval for deliverable to have been met. Invoices must be submitted to WV DHHR Bureau for children and Families, 350 Capitol Street, Room 730, Charleston, WV 25301. Invoices must include the Purchase Order Number.

A9. Vendor Response:

Westat will submit invoices by deliverable, or will obtain advance approval by BCF to submit a progress billing schedule for any deliverable. All invoices will be submitted to the West Virginia DHHR Bureau for Children and Families address along with a purchase order number. Westat understands that all deliverables must meet the terms and conditions in the RFP, and if tied to the Federal requirements, must receive federal approval for the deliverable to have been met.