

Goals	Outcome Objectives	Study Questions	Measures/Indicators	Constructs	Source	Time Point	Analysis Plan
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<i>System Level</i>							
1. The community-wide care system will be transformed so that resources from all levels will be integrated for the efficient and effective delivery of family-driven, youth-guided services and supports that promote the overall well-being of children and families.	<i>Infrastructure Development</i>						
	Sufficient targeted, comprehensive effective services and supports across public and private providers	What is the range of services and supports available to families and children?	Track list of providers/supports by geographical area		United Way CYS Resource Directory Project Safety Net CHIS	Annual	Descriptive (f & %) Trend analysis
		Do families perceive that mental health needs are being met?	Multi-sector Services Contacts-Revised (MSSC-RC)*	Satisfaction with services	Caregiver or Staff-as-Caregiver reports	Follow-up ¹	
			Multi-sector Services Contacts-Revised (MSSC-RS)*	Satisfaction with services	Staff-as-Caregiver reports	Follow-up ¹	
			Youth Services Survey for Families (YSS-F)*	Access, participation in treatment, cultural sensitivity, satisfaction, outcomes	Caregiver reports	Follow-up ¹	
			Youth Services Survey (YSS)*	Access, Participation in treatment, Cultural Sensitivity, Satisfaction, Outcomes	Youth >11 reports	Follow-up ¹	
	Are there any gaps in services delivered?	Wraparound Satisfaction Survey (DCC developed)	Unmet needs in services/supports	Wraparound participants report	After each Wraparound Meeting		
	Effective collaboration/cooperation between families, public and private providers, and supports	Is there increased collaboration/cooperation within the Governing Board?	Collaboration Functioning Scale (adapted from University of Wisconsin) Satisfaction and group functioning Subscales	Member satisfaction, shared vision, goal attainability, effective leadership. Internal communication, communication with the community, development of communication networks/information channels	Governing Board members report	Annual	Descriptive (f & %) t-tests Repeated measures Trend analysis

¹ Follow-up every six months for up to 36 months

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		Is there increased collaboration/cooperation between service providers/supports?	Interagency Collaboration Scale (Greenbaum & Dedrick)	Financial and physical resources, program development and evaluation, client services, collaborative policies, and attitudes toward interagency collaboration.	Governing Board members or designee reports Service providers/Supports report	Annual	Descriptive (f & %) t-tests Repeated measures Trend analysis
		Is there increased collaboration/cooperation between families, service providers, and supports?	Wraparound Satisfaction Survey	Perception of collaboration	Wraparound participants report	After each Wraparound Meeting	
		Description of collaborative events and involved participants		Agendas of retreats, cross-system trainings, meeting minutes, sign-in sheets	Annual		
		Description of family and youth roles in agencies (current and former clients, other concerned citizens)		Agency representative reports Qualitative interviews Board of Directors composition	Annual		
	Real-time record sharing	Are service providers able to share records efficiently and effectively?	Evidence of integrated MIS and common data sharing protocol		Integrated MIS protocol forms	When available	
			Signed data use agreements between service providers		Service providers/Harris County staff report	When available	
			Signed parental consents for shared data use		Service providers report (HIPAA release)	Intake	
		What data are service providers sharing?	Shared data records	Case ID, date accessed, type of data requested, availability	Documentation of use (report generated by MIS)	Daily	
	Enhanced community capacity to disseminate information on best practices related to children with SED	How is information about SOC principles shared with the professional community, local colleges and universities, and the general public?	Number of trainings, presentations at universities, newspaper articles, presentations at local, state, and national conferences, co-authored journal articles		Training schedule, copies of presentations, articles, abstracts, flyers	Ongoing	

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			Interviews		Interviews with Clinical Director, Training Coordinator	Ongoing	
		How is information about best practices for children with SED being shared with the professional community, local colleges and universities and the general public?	Number of field placement/ internship agreements to train students of local universities		Agency representatives	3 times annually per university semester schedule	
	<i>Service Delivery</i>						
	Community-wide adoption of wraparound as routine practice	Have service providers adopted wraparound as routine practice?	Evidence of policy for wraparound provision		Evidence-Based Practices Sub-study	Annual	
		Is wraparound implemented with fidelity?	Wraparound Fidelity Index 4.0 (Bruns, Ermold, & Burchard, 2001)	Family voice and choice, team based, natural supports, collaboration, community-based, culturally competent, individualized, strengths based, persistence, outcome based	Caregivers, Youth >11, Care Coordinators, Parent Partners, & Wraparound participants report	Stratified random sample every six months	
			Wraparound Observation Form (Nordness & Epstein)			Sample every six months	
	Increased and timely access to public and private providers	Are families able to access public and private providers and supports in a timely manner?	Wraparound Satisfaction Survey	Accessibility to referred providers	Wraparound participants report	After each Wraparound Meeting	
			Multi-sector Services Contacts-Revised (MSSC-R)*	Services used, service locations and convenience, quantity of services received, satisfaction with services, payments for services	Caregiver or Staff-as-Caregiver reports	Follow-up ¹	
			Youth Services Survey for Families (YSS-F)*	Access, participation in treatment, cultural sensitivity, satisfaction, outcomes	Caregiver reports	Follow-up ¹	
		How do service providers handle re-entry into System of Care?	Protocol for intermittent service use		Policies and procedures	Annual	

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	Consistent strategy for appropriate referrals	What are the procedures for making referrals among and across Service providers?	Description of procedures		Policies and procedures Qualitative reports	Annual		
		Are strategies consistently applied?	Tracking application of procedures		Policies and procedures Qualitative reports	Every 6 months		
			Record abstraction form		Sample of Care Plans	Every 6 months		
	Increased efficient use of services across SOC	Are services non-duplicated? (i.e. assessments)	Record abstraction form	List of services used across providers		Sample of Care Plans	Every 6 months	
		How cost effective is service use within SOC?	Review child and family outcomes for best/most important change Services and Costs Study		Service providers Cost inventories Staff activity logs Child activity logs Qualitative report	Annual	Cost-benefit analysis Cost effectiveness using case-mix adjustment	
		Are services more cost effective over time?	Compare cost efficiency across providers Services and Costs Study		Service providers Cost inventories Staff activity logs Child activity logs Qualitative reports	Annual	Cost-benefit analysis Cost effectiveness using case-mix adjustment	
		Does cost efficiency vary across the system?	Review child and family outcomes for best/most important change Services and Costs Study		Service providers Cost inventories Staff activity logs Qualitative reports	Annual	Cost efficiency analysis	
		How have service providers changed as a result of SOC?	Organizational Assessment	Program/Culture/Services	Stratified sample of agency staff	Annual		
	Early identification and effective intervention of children with SED	Are children with SED being identified in the schools?	Evidence of mental health screening in schools		Policies and procedure at ISD level for Mental Health screening	Annual		
					Qualitative reports from Special Education school officials	Annual		
Referral sources for initial contact forms					Ongoing			

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		What is the protocol at the district and school level for assisting children with SED?	Evidence of follow-up protocols		Policies and procedure at ISD level for Metal Health screening	Annual	
					Qualitative reports from Special Education school officials	Annual	
		Are effective interventions being implemented?	Description of interventions (evidence-based or promising practices) and their outcomes		Care Plans Evidence-based Practice Study	Annual, following National EBP Study schedule	
	<i>Advocacy</i>						
	Increased and coordinated provider, family, and youth advocacy capacity for child mental health at the local and state levels	Is there increased advocacy capacity for child mental health at local and state levels?	Advocacy Capacity Assessment Tool			Annual	
		Is there collaboration among different local advocacy groups?	Advocacy Evaluation Tool			Annual	
		What is the community awareness for advocacy groups?	Advocacy Evaluation Tool			Annual	
	Increased community acceptance of children with SED	Are Harris county residents accepting of children with SED?	Media coverage of examples Qualitative reports		Local news media Interviews/focus groups	Annual	
		Do parents feel accepted in their community?	Interviews/focus groups		Recruit community members (library, YMCA)	Annual	
		Have children and their families participation level in the community increased over time?	Social Capital Benchmark Survey	Civic leadership, associational involvement	Caregivers	Semi-annual	Descriptive Repeated measures
	Interviews/focus groups			Caregivers, children/youth	Annual		
	Increased community awareness of available mental health services	Are Harris county residents more aware of available mental health services?	Evaluation of Public awareness campaigns		Interviews/focus groups	Annual	
			Wraparound Satisfaction Survey	Service availability & awareness	Wraparound participants report	After each Wraparound Meeting	
	<i>Sustainability</i>						
	More integrated funding initiatives	How many different sources of funding are supporting SOC and what is their purpose?	Number of co-developed grants and their requirements		HCPS	Annual	

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		What agencies have sought and received funding?	Number of co-developed grant proposals and awards		HCPS	Annual	
		How have agencies benefited from integrated funding?	Organizational Assessment	Finance and Administration		Annual	
			Documentation of Funding Streams			Annual	
	Blended funding available for children with SED who are in need	What types of services for children with SED have been provided through blended funding?	Amount of funding available for children for common goals/projects		HCPS	Annual	
			Number of children supported by funds from Medicaid, SAMHSA, the state, and local foundations		HCPS	Annual	
		Who has contributed to blended funding?	Qualitative reports		HCPS	Annual	
		Are there stipulations to the way blended funding can be used?	Qualitative reports		HCPS	Annual	
	Increased connection to the local business community	Describe approaches used for outreach/ fundraising with the business community.	Documentation of activities Qualitative reports		HCPS	Annual	
		How much money/in kind has been offered/collected?	Amount of money collected		HCPS	Annual	
		With which type of business groups has outreach been most successful	Amount of money collected by donor Qualitative reports		HCPS	Annual	
	Development of funding streams to sustain SOC after federal funding ends	What funding streams have been developed to sustain SOC?	Documentation of funding received and requirements		HCPS	Annual	

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<i>Practice/Support Organization Level</i>							
2. Collaborative care for children will be individualized and effective	<i>Service Delivery</i>						
	Agency-wide adoption of evidence-based practice/practice-based evidence as routine	Has the service provider implemented evidence based practice and practice-based evidence as part of their routine practice?	Evidence-Based Practice Attitude Scale (EBPAS) (Aarons, 2004)	Requirements, Appeal, Openness, Divergence	Service providers report	Baseline; annual	Descriptive (f &%) t-tests Repeated measures
		Number and type of evidence-based practices			HCPS Survey Policies and procedures Qualitative reports Case records Care plans	Baseline; annual	Descriptive (f &%) t-tests Repeated measures
		Has the service provider adopted wraparound as routine practice?	Number of wraparound meeting per service provider for SOH and non-SOH enrolled children		Monthly service logs by Agency Clinical Directors/on-site Care Coordinators	Baseline, monthly	
	Are all service providers who are actively involved with the family present at the wraparound meetings?	Wraparound Sign-in Sheet	Team member & relationship to child (formal and informal participants)		Wraparound participants report	After each Wraparound Meeting	Distribution of members
		Wraparound Fidelity Index selected scales	Team based, collaboration		Caregivers, Youth >11, Care Coordinators, Parent Partners, & Wraparound participants report	Stratified random sample every six months	
		Wraparound Satisfaction Survey			Wraparound participants report	After each Wraparound Meeting	
	Are care plans individualized and reflective of SOC principles?	Wraparound Satisfaction Survey			Wraparound participants report	After each Wraparound Meeting	
Wraparound Fidelity Index		Family voice and choice, team based, natural supports, collaboration, community-based, culturally competent, individualized, strengths based, persistence, outcome based		Caregivers, Youth >11, Care Coordinators, Parent Partners, & Wraparound participants report	Stratified random sample every six months		

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		Are relationships between parents and providers collaborative?	Wraparound Satisfaction Survey		Wraparound participants report	After each Wraparound Meeting	
			Wraparound Fidelity Index selected scales	Family voice and choice, collaboration	Caregivers, Youth >11, Care Coordinators, Parent Partners, & Wraparound participants report	Stratified random sample every six months	
		How do resource options in care plans differ across the county?	Services and Costs Study*		Wraparound participants report	After each Wraparound Meeting	
	<i>Workforce Development</i>						
	Increased capability to effectively serve children with SED and their families	Has there been an increase in service providers' capability to serve children with SED and their families?	Track numbers referred and served at each site			Monthly	
		How do child and family outcomes differ across sites?	Characteristics of service providers	Measure of treatment effectiveness, strengths of each site		Every 6 months	Propensity scores to predict outcomes
	Delivery of effective trainings relevant to SOC services	What training is being offered?	Schedule of Training & description		SOH staff	Monthly	
		Is training effective?	Professional Development Model of Training Effectiveness (Kirkpatrick & Gusk)	Satisfaction, knowledge acquisition, intent to use, organizational support, outcome from application	Trainees	Post training & follow-up at 3 months (Did you receive mentoring/coaching?)	
		Are organizational climates supportive?	Organizational Assessment	Leadership/Clinicians/Staff Supervision	Service providers	Annual	
		Is training relevant to SOC services?	Copies of curricula, training evaluation	Which SOC core competency did this training meet?	Training participants; Trainers	Post training & follow-up at 3 months (Did you receive mentoring/coaching?)	
		What are the qualifications of trainers?	Resumes		Trainers	Annual	
	Regular availability of continuing education and	Is continuing education and training consistently available?	Evidence of consistent training		Training schedules	Ongoing	

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	training consistent with SOC guiding principles		Track numbers trained		Sign in sheets	Ongoing	
3. Family involvement and choice will be expected and respected	<i>Service Delivery</i> Active family involvement in care planning/decision-making	Are families actively involved in children's care planning?	Care plans		Sample of Case records	Annual	
			System of Care Practice Review	Child-Centered and Family-Focused, Community-Based, Culturally Competent, Impact	Interviews with caregivers, youth, providers	Annual	
			Wraparound Satisfaction Survey		Wraparound participants report	After each Wraparound Meeting	
		Do families feel they direct the care planning process?	Wraparound Satisfaction Survey		Caregivers, Youth >11, Care coordinators & Parent Partners report	After each Wraparound Meeting	
		Are the needs of the entire family addressed?	Wraparound Satisfaction Survey		Caregivers, Youth >11, Care coordinators & Parent Partners report	After each Wraparound Meeting	
		Was there follow-up on every item in the care plan?	Wraparound Satisfaction Survey		Caregivers, Youth >11, Care coordinators & Parent Partners report	After each Wraparound Meeting	
			Care plans		Care Coordinators & Parent Partners	Annual	
		Was follow-up done in a timely manner? If not were barriers identified?	Wraparound Satisfaction Survey		Caregivers, Youth >11, Care coordinators & Parent Partners report	After each Wraparound Meeting	
			Care plans		Care Coordinators & Parent Partners	Annual	

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	Increased provision of culturally and linguistically appropriate services	Do the providers, administrators, and clients report that care/services received are effective, understandable, and respectful of cultural health beliefs and language preferences?	Cultural competency self-assessment		Agency leaders and staff Clients Agency policies and procedures	Annual	
		Do the demographic characteristics of the staff match those of the service area in all levels of the agency?	Cultural competency self-assessment		Agency leaders/ staff Clients Agency policies and procedures	Annual	
		Is the agency able to recruit, retain, and promote diverse staff at all levels?	Cultural competency self-assessment		Agency leaders/ staff Clients Agency policies and procedures	Annual	
		Does the agency have documented ongoing education and training in CLAS for all levels of staff?	Cultural competency self-assessment		Agency leaders/ staff Clients Agency policies and procedures	Annual	
		Does the agency provide language assistance services at no cost during all hours of operation for all services?	Cultural competency self-assessment		Agency leaders/ staff Clients Agency policies and procedures	Annual	
		Does the agency notify clients both verbally and in writing of their right to receive language assistance services?	Cultural competency self-assessment		Agency leaders/ staff Clients Agency policies and procedures	Annual	
		Is the language competence of interpreters and bilingual staff assessed? Does the agency ever use family and friends of clients for interpretation?	Cultural competency self-assessment		Agency leaders/ staff Clients Agency policies and procedures	Annual	
		Are signs posted and materials available from the agency available in the languages used by the people that the agency serves?	Cultural competency self-assessment		Agency leaders/ staff Clients Agency policies and procedures	Annual	
		Does the agency have a written strategic plan that outlines clear goals, policies, operational plans, and management accountability/oversight mechanisms to provide culturally and linguistically appropriate services?	Cultural competency self-assessment		Agency leaders/ staff Clients Agency policies and procedures	Annual	

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		Does the agency perform periodic organizational self-assessments related to CLAS? Does the agency integrate cultural and linguistic competence-related measures into their internal audits, performance improvement programs, patient satisfaction assessments, and outcomes-based evaluations	Cultural competency self-assessment		Agency leaders/staff Clients Agency policies and procedures	Annual	
		Does the agency collect data on client race, ethnicity, and spoken and written language? Are these data integrated into the MIS? Are these data updated?	Cultural competency self-assessment		Agency leaders/ staff Clients Agency policies and procedures	Annual	
		Does the agency maintain a current demographic, cultural, and epidemiological profile of the community they serve? Does the agency conduct needs assessments to plan for services for their community?	Cultural competency self-assessment		Agency leaders/ staff Clients Agency policies and procedures	Annual	
		Does the agency have participatory, collaborative partnerships with communities?	Cultural competency self-assessment		Agency leaders/staff Clients Agency policies and procedures	Annual	
		Does the agency facilitate community and patient/consumer involvement in designing and implementing CLAS-related activities?	Cultural competency self-assessment		Agency leaders/ staff Clients Agency policies and procedures	Annual	
		Is the agency's conflict and grievance resolution processes culturally and linguistically capable of handling cross-cultural conflicts expressed by clients?	Cultural competency self-assessment		Agency leaders/staff Clients Agency policies and procedures	Annual	
		Does the agency regularly make available to the public information about their progress in implementing CLAS standards? How is this information distributed to the community?	Cultural competency self-assessment		Agency leaders/staff Clients Agency policies and procedures	Annual	

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Supplemental Plan							
Goal 1: Hire social marketing firm to help redefine social marketing plan to expand our focus on multi-ethnic, multicultural populations	1. Development of specific plans to appropriately serve various identified ethnic groups based on an understanding of (a) how they view mental illness and their use of mental health services, (b) what are their natural supports, and (c) the role of professionals in approaching and working with families of diverse cultural and linguistic backgrounds	What are the cultural and linguistic needs of ethnic communities that SOH serves?	1. 1. Description of the cultural and linguistic needs of ethnic communities served in "White Paper"				
		What are the enhanced features to the strategic plan?	1.2. Strategic plan strengthened with enhanced features.				
Goal 2: Use the information gathered by the Social Marketing firm to enhance educational and professional development programs that train clinicians and providers within the identified ethnic groups.	2.1 Develop relationships with the various higher educational programs in the Harris County/Houston area to promote cultural awareness, understanding and competency in the emerging mental health professionals.	Are MOU's or Affiliation Agreements for internships and student projects established with colleges and universities?	2.1. MOUs /Affiliation Agreements established				
		2.2 Provide strengthened cultural and linguistic competency training and interdisciplinary trainings to students	Is a supplemental training plan developed that reflects enhanced cultural/ethnic content?	2.2.1 Development of training plan with enhanced cultural/ethnic content			
		Is enhanced cultural/linguistic training being delivered?	2.2.2. Delivery of enhanced cultural/linguistic training				

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Goal 3: Develop, produce and disseminate targeted and specific training and other multimedia materials promoting awareness of children's mental health issues, anti-stigma information, Systems of Care values and principles appropriate for each of identified ethnic groups.	3. 1. Effective collaboration with families and advisors from the various ethnic groups and HC SOH in the development and distribution of training and informational materials.	Are Families and community advisors involved in developing materials and training with culturally competent messages?	3.1. Involvement of Families and Advisors in developing materials/ Focus groups				
	3.2. Build relationships with community leaders and providers to help improve satisfaction with, and access to, mental health services.	Are Parents/Caregivers and youths' satisfied with the cultural appropriateness of the services they received?	3.2. Parents/Caregivers and youths' satisfaction with the cultural appropriateness of services - Youth Services Survey (YSS & YSS-F) and Cultural and Linguistic Competency (CLC) Supplemental questions				
	3.3. Increased community awareness of available culturally competent mental health services	Is there an increase in referrals and eligible enrollments of culturally diverse families into SOH?	3.3. Tracking of culture/ethnicity on Initial Contact form on clients referred and enrolled.				

<i>Family Level</i>							
4. Families will experience positive and satisfying relationships that provide mutual support and encouragement of their individual development	<i>Family Life</i>						
	Better communication, decision-making, support, and bonding within the family	To what extent does family social climate improve over time?	Family Life Questionnaire (FLQ)*	Family communication, decision-making, and support and bonding	Each Caregiver	Intake, Follow-up ¹	Descriptives, Paired t-tests, repeated measures
		How does faith-based engagement mediate outcomes?	Social Capital Survey (adapted from the Social Capital Community Benchmark Survey)	Faith-based engagement	Caregiver	Intake, Follow-up ¹	Linear Regression
		What are the differences in social climate between racial/ethnic groups?	EDIF*	Ethnic groups	Caregiver	Intake	Analysis of Variance (ANOVA)

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		How does parenting style affect outcomes?	Adult and Adolescent Parenting Inventory (AAPI-2)	Inappropriate expectations of children, parental lack of empathy, strong belief in the use of corporal punishment, reversing parent-child roles, oppressing children's power and independence	Caregiver	Intake, Follow-up ¹	Descriptives, Linear Regression
	Increased community connectedness	To what extent do families feel more connected to their community over time?	Social Capital Survey (adapted from the Social Capital Community Benchmark Survey)	Sense of community, social trust, civic leadership, associational involvement, informal social ties, faith-based engagement	Caregiver	Intake, Follow-up ¹	Descriptives, Paired t-tests, repeated measures
		How does social support promote feelings of connectedness?	Social Support Survey (adapted from the Medical Outcomes Study Social Support Survey Instrument and the Duke Social Support Index)	Emotional/informational support, positive social interaction, instrumental support	Caregiver	Intake, Follow-up ¹	Descriptives, Linear Regression
	Less negative effects related to caring for child with SED	Do caregivers experience less negative effects over time?	Caregiver Strain Questionnaire (CGSQ)*	Difficulties, strains, other negative effects	Each Caregiver	Intake, Follow-up ¹	Descriptives, Paired t-tests, repeated measures
		How does social support mediate caregiver strain?	Social Support Survey (adapted from the Medical Outcomes Study Social Support Survey Instrument and the Duke Social Support Index)	Emotional/informational support, positive social interaction, instrumental support	Caregiver	Intake, Follow-up ¹	Linear Regression
		Is employment status impacted by caring for a child with SED?	Caregiver Information Questionnaire (CIQ)* selected items - 13d, 13e EDIF	Job situation	Caregiver	Intake, Follow-up ¹	Logistic Regression
	<i>Symptomatology</i>						
	Improved mental health functioning in caregivers	How has mental health functioning improved in caregivers over time?	Center for Epidemiological Studies – Depression Scale	Caregiver depressive symptoms	Caregiver	Intake; Follow-up ¹	Descriptives, Paired t-tests, repeated measures
			Caregiver Information Questionnaire (CIQ)* selected items - 22, 22a, 22b, 22c, 23, 23a, 23b, 23c, 25, 25a, 25b, 25c	Family member mental health functioning & substance use	Caregiver	Intake, Follow-up ¹	Descriptives, chi-square
			CAGE-AID	Caregiver substance use	Caregiver	Intake; Follow-up ¹	Descriptives, Paired t-tests, repeated measures

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		Do outcomes vary by service use/site?	Services Used Services and Cost study* Multi-sector Services Contacts- Revised (MSSC-RC)*	Services used, service locations and convenience, quantity of services received	MIS Treatment Plan Caregiver	Follow-up	Linear Regression Logistic Regression Nested models
	<i>Service Delivery</i>						
	Improved cultural and linguistic competency in services received	Do families feel that services are culturally competent?	Cultural Competence and Service Provision (CCSP)*	Perspective on consideration of family's beliefs, traditions, and practices	Caregiver	Follow-up ¹	Descriptives, Trend analysis
			Youth Services Survey for Families (YSS-F)*	Access, participation in treatment, cultural sensitivity, satisfaction, outcomes	Youth >11	Follow-up ¹	Descriptives, Trend Analysis
		Does race/ethnicity affect perceptions of culturally competent services?	EDIF*	demographics	Caregiver	Intake	Descriptives, ANOVA
		Do perceptions of cultural competency differ by types of services?	Services used, Services and Cost study*	Services used, service locations, quantity of services received	MIS Treatment Plan Caregiver	Ongoing, follow-up	Linear/logistic regression, Nested models,
		Do perceptions of cultural competency differ by provider?	Services and provider/site used, Services and Cost study*	Services used, service locations/provider	MIS Treatment Plan Caregiver	Ongoing, follow-up	Linear/logistic regression, Nested models,
	Satisfaction with, access to, and participation in services	Are families satisfied with their ability to access and participate in services?	Multi-sector Services Contacts- Revised (MSSC-RC)* Multi-sector Services Contacts- Revised (MSSC-RS)*	Services used, service locations and convenience, quantity of services received, satisfaction with services, payments for services	Caregiver, Staff-as- Caregiver	Follow-up ¹	Descriptives
			Youth Services Survey for Families (YSS-F)*	Access, participation in treatment, cultural sensitivity, satisfaction, outcomes	Caregiver	Follow-up ¹	Descriptives
		Are caregivers satisfied with their Wraparound meetings; Wraparound process?	Wraparound Satisfaction Survey	Satisfaction with meeting, Felt listened to, involvement in decision making, collaboration, satisfaction with follow-up	Wraparound participants report	Post each Wraparound meeting	Descriptives, Trend analysis

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		Does satisfaction with, access to, and participation in services differ by types of services?	Multi-sector Services Contacts-Revised (MSSC-RC)* Services used Services and Cost study*	Services used, service locations, quantity of services received	Caregiver MIS Treatment plan	Follow-up	Logistic regression
		Does satisfaction with, access to, and participation in services differ by site/provider?	Multi-sector Services Contacts-Revised (MSSC-RC)* Services used Services and Cost study*	Services used, service locations, quantity of services received	Caregiver MIS Treatment plan	Follow-up	Logistic regression

Child Level							
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5. Children will demonstrate positive behaviors and social competencies that will contribute to their successful development and functioning	<i>Family Life</i>						
	Stable living situation in the least restrictive environment	Are children/youth living in a stable living situation in the least restrictive environment?	Living Situations Questionnaire (LSQ)*	Residence	Caregiver or Staff-as-Caregiver	Intake;Follow-up ¹	Descriptives, trend analysis
		Is CPS involvement associated with children living in a stable living situation in the least restrictive environment?	EDIF*	CPS history/referral	Caregiver, HCPS report	Annual	Descriptives, logistic regression
		Does family economic status affect children living a stable living situation in the least restrictive environment?	Caregiver Information Questionnaire (CIQ)* selected items - 12, 13c	Economic status	Caregiver	Intake (CIQ-IC); Follow-up (CIQ-FC) ¹	Descriptives, logistic regression
Caregiver Information Questionnaire (CIQ)* selected items - 12	Economic status		Staff-as-Caregiver	Intake (CIQ-IS); Follow-up (CIQ-FS) ¹			

¹ Follow-up every six months for up to 36 months

* Measured by the National Evaluation

Goals	Outcome Objectives	Study Questions	Measures/Indicators	Constructs	Source	Time Point	Analysis Plan
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		Is parental employment status associated with children living in a stable living situation in the least restrictive environment	Caregiver Information Questionnaire (CIQ)* selected items - 13,13a,13b	Employment status	Caregiver	Intake (CIQ-IC); Follow-up (CIQ FC) ¹	Descriptives, logistic regression
	<i>Symptomatology</i>						
	Improved social competency	To what extent do child/youth outcomes in social competency improve over time?	Behavioral and Emotional Rating Scale (BERS-2C)*	Interpersonal Strength, Family Involvement, Intrapersonal Strength, School Functioning, Affective Strength Career Strengths	Caregiver or Staff-as-Caregiver	Intake;Follow-up ¹	Descriptives, paired t-tests, repeated measures ANOVA, MANOVA
			Behavioral and Emotional Rating Scale (BERS-2Y)*	Interpersonal Strength, Family Involvement, Intrapersonal Strength, School Functioning, Affective Strength Career Strengths	Youth > 11	Intake;Follow-up ¹	Descriptives, paired t-tests, repeated measures ANOVA, MANOVA
			Child Behavior Checklist (CBCL 6–18)*	Social, social problems	Caregiver or Staff-as-Caregiver	Intake;Follow-up ¹	Descriptives, paired t-tests, repeated measures ANOVA
			Columbia Impairment Scale (CIS)*	Child functioning	Caregiver or Staff-as-Caregiver	Intake;Follow-up ¹	Descriptives, paired t-tests, repeated measures ANOVA
		Does social competency differ by age?	EDIF*	age	Care Coordinator & Parent Partner	Intake	Descriptives, cross tabs, chi- square
		Is social competency affected by the number and quality of children's friendships?	Child Behavior Checklist (CBCL 6–18)* selected items - V.1, V.2, VI.b, 25	Children's friendships	Caregiver or Staff-as-Caregiver	Intake;Follow-up ¹	Descriptives, linear & logistic regression
			Youth Information Questionnaire (YIQ)* selected items - 4, 6, 8	Peer social support	Youth > 11	Intake (YIQ-I); Follow-up (YIQ-F) ¹	Descriptives, linear & logistic regression
			School Climate Questionnaire (DCC developed; adapted from Add Health) selected items - 1,2,4,7	Children's friendships/peer relationships	Youth >11	Intake;Follow-up ¹	Descriptives, linear & logistic regression
		Do children perceive a sense of belonging in their community? Change over time?	Behavioral and Emotional Rating Scale (BERS-2C)* selected scales	Family Involvement Intrapersonal Strength	Caregiver or Staff-as-Caregiver	Intake; Follow-up ¹	Descriptives, paired t-tests, repeated measures ANOVA
			Behavioral and Emotional Rating Scale (BERS-2Y)* selected scales	Family Involvement, , Intrapersonal Strength	Youth > 11	Intake; Follow-up ¹	Descriptives, paired t-tests, repeated measures ANOVA

¹ Follow-up every six months for up to 36 months

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Goals	Outcome Objectives	Study Questions	Measures/Indicators	Constructs	Source	Time Point	Analysis Plan
			Child Behavior Checklist (CBCL 6–18)* selected items - I, II, III, IV	Activities, social	Caregiver or Staff-as-Caregiver	Intake;Follow-up ¹	Descriptives, paired t-tests, repeated measures ANOVA
			Youth Information Questionnaire (YIQ)* selected items - 2, 2a, 2b, 3, 3a, 18, 19, 20, 21, 22	Community involvement School safety	Youth > 11	Intake (YIQ-I); Follow-up (YIQ-F) ¹	Descriptives, paired t-tests, repeated measures ANOVA
			School Climate Questionnaire (DCC developed; adapted from Add Health) selected items - 1,2,4,7	Belonging/Connectedness to school	Youth >11	Intake; Follow-up ¹	Descriptives, paired t-tests, repeated measures ANOVA
	Reduced disruptive and aggressive behaviors	Do children/youth disruptive and aggressive behaviors decrease over time?	Child Behavior Checklist (CBCL 6–18)* selected scales	Externalizing problems	Caregiver or Staff-as-Caregiver	Intake; Follow-up ¹	Descriptives, paired t-tests, repeated measures ANOVA
Delinquency Survey-Revised (DS-R)*			Violent/delinquent behaviors	Youth >11	Intake; Follow-up ¹	Descriptives, paired t-tests, repeated measures ANOVA	
Adult and Adolescent Parenting Inventory (AAPI)		Inappropriate expectations of children, parental lack of empathy, strong belief in the use of corporal punishment, reversing parent-child roles, oppressing children's power and independence	Caregiver	Intake; Follow-up	Descriptives, linear & logistic regression		
Overall improved mental health functioning	To what extent do child /youth outcomes in mental health functioning improve over time?	CAFAS	School/work, home, Community, Behavior Towards Others, mood/emotions, Self-Harm, Substance use, Thinking	Care Coordinator	Intake;Follow-up ¹	Descriptives, paired t-tests, repeated measures ANOVA	
		Behavioral and Emotional Rating Scale (BERS-2Y)*	Interpersonal Strength, Family Involvement, Intrapersonal Strength, School Functioning, Affective Strength Career Strengths	Youth > 11	Intake;Follow-up ¹	Descriptives, paired t-tests, repeated measures ANOVA	
		Behavioral and Emotional Rating Scale (BERS-2C)*	Interpersonal Strength, Family Involvement, Intrapersonal Strength, School Functioning, Affective Strength Career Strengths	Caregiver or Staff-as-Caregiver	Intake;Follow-up ¹	Descriptives, paired t-tests, repeated measures ANOVA	

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Goals	Outcome Objectives	Study Questions	Measures/Indicators	Constructs	Source	Time Point	Analysis Plan
			Child Behavior Checklist (CBCL 6–18)*	Activities, social, school, internalizing problems, externalizing problems, total problems	Caregiver or Staff-as-Caregiver	Intake;Follow-up ¹	Descriptives, paired t-tests, repeated measures ANOVA
			Columbia Impairment Scale (CIS)*	Child functioning	Caregiver or Staff-as-Caregiver	Intake;Follow-up ¹	Descriptives, paired t-tests, repeated measures ANOVA
		Is mental health functioning associated with school performance?	CAFAS	School/work	Care Coordinator	Intake;Follow-up ¹	Descriptives, linear & logistic regression
			Behavioral and Emotional Rating Scale (BERS-2Y)* selected scales	School Functioning	Youth > 11	Intake;Follow-up ¹	Descriptives, linear & logistic regression
			Behavioral and Emotional Rating Scale (BERS-2C)* selected scales	School Functioning	Caregiver or Staff-as-Caregiver	Intake;Follow-up ¹	Descriptives, linear & logistic regression
			Child Behavior Checklist (CBCL 6–18)* selected items - VII. 1,2,3,4	School Functioning	Caregiver or Staff-as-Caregiver	Intake;Follow-up ¹	Descriptives, linear & logistic regression
			Education Questionnaire – Revised (EQ-R)*	School attendance/grade level, special placements and plans, school achievement, disciplinary actions	Caregiver or Staff-as-Caregiver	Intake;Follow-up ¹	Descriptives, linear & logistic regression
			Is mental health functioning mediated by school climate?	School Climate Questionnaire (DCC developed; adapted from Add Health)	School climate & belongingness	Youth >11	Intake;Follow-up ¹
		Do outcomes vary by service use?	Services and Costs Study*	Services used	MIS	Ongoing, follow-up	Descriptives, linear & logistic regression, nested models
	Less anxiety	Do children/youth experience less anxiety over time?	Revised Children’s Manifest Anxiety Scales (RCMAS)*	Psychological anxiety, worry/oversensitivity, social concerns/ concentration	Youth >11	Intake;Follow-up ¹	Descriptives, paired t-tests, Repeated measures ANOVA,
		What is the influence of medication on anxiety?	Caregiver Information Questionnaire (CIQ)* selected items - 39, 39a	Medication use	Caregiver	Intake (CIQ-IC); Follow-up (CIQ-FC) ¹	Descriptives, linear & logistic regression
			Caregiver Information Questionnaire (CIQ)* selected items - 39, 39a	Medication use	Staff-as-Caregiver	Intake (CIQ-IS); Follow-up (CIQ-FS) ¹	
			Youth Information Questionnaire (YIQ)* selected items - 23, 23a	Medication use	Youth > 11	Intake (YIQ-I); Follow-up (YIQ-F) ¹	

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Goals	Outcome Objectives	Study Questions	Measures/Indicators	Constructs	Source	Time Point	Analysis Plan
		Do interpersonal/intrapersonal factors affect outcomes?	Behavioral and Emotional Rating Scale (BERS-2C)* selected scales	Interpersonal Strength, Intrapersonal Strength, Affective Strength	Caregiver or Staff-as-Caregiver	Intake;Follow-up ¹	Descriptives, linear & logistic regression
			Behavioral and Emotional Rating Scale (BERS-2Y)* selected scales	Interpersonal Strength, Intrapersonal Strength, Affective Strength	Youth >11	Intake;Follow-up ¹	Descriptives, linear & logistic regression
		Does the number and quality of children's friendships affect outcomes?	Child Behavior Checklist (CBCL 6–18)* selected items - V.1, V.2, VI.b	Social competency	Caregiver or Staff-as-Caregiver	Intake;Follow-up ¹	Descriptives, linear & logistic regression
			Youth Information Questionnaire (YIQ)* selected items - 4, 6, 8	Peer social support	Youth > 11	Intake (YIQ-I); Follow-up (YIQ-F) ¹	Descriptives, linear & logistic regression
	Less depression	Do children/youth experience less depression?	Reynolds Adolescent Depression Scale (RADS-2)*	Dysphoric mood, anhedonia/negative affect, negative self-evaluation, somatic complaints	Youth >11	Intake;Follow-up ¹	Descriptives, paired t-tests, repeated measures ANOVA
			What is the influence of medication on child depression?	Caregiver Information Questionnaire (CIQ)* selected items - 39, 39a	Medication use	Caregiver	Intake (CIQ-IC); Follow-up (CIQ-FC) ¹
		Caregiver Information Questionnaire (CIQ)* selected items - 39, 39a		Medication use	Staff-as-Caregiver	Intake (CIQ-IS); Follow-up (CIQ-FS) ¹	Descriptives, linear & logistic regression
		Youth Information Questionnaire (YIQ)* - 23, 23a		Medication use	Youth > 11	Intake (YIQ-I); Follow-up (YIQ-F) ¹	Descriptives, linear & logistic regression
		Do interpersonal/intrapersonal factors affect child depression?	Behavioral and Emotional Rating Scale (BERS-2C)* selected scales	Interpersonal Strength, Intrapersonal Strength, Affective Strength	Caregiver or Staff-as-Caregiver	Intake;Follow-up ¹	Descriptives, linear & logistic regression
			Behavioral and Emotional Rating Scale (BERS-2Y)* selected scales	Interpersonal Strength, Intrapersonal Strength, Affective Strength	Youth >11	Intake;Follow-up ¹	Descriptives, linear & logistic regression
		Does the number and quality of children's friendships affect child depression?	Child Behavior Checklist (CBCL 6–18)* selected items - V.1, V.2, VI.b	Social	Caregiver or Staff-as-Caregiver	Intake;Follow-up ¹	Descriptives, linear & logistic regression
			Youth Information Questionnaire (YIQ)* selected items - 4, 6, 8	Peer social support	Youth > 11	Intake (YIQ-I); Follow-up (YIQ-F) ¹	Descriptives, linear & logistic regression
	Substantial developmental gains	To what extent do children/youth make developmental gains?	Vineland Screener (VS3)	Communication, daily living skills, socialization	Caregiver or Staff-as-Caregiver for children aged 6-12	Intake; Follow-up ¹	Descriptives, trend analysis

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Goals	Outcome Objectives	Study Questions	Measures/Indicators	Constructs	Source	Time Point	Analysis Plan
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	Enhanced self-management of medication, affect, and behavior	To what degree are children/youth able to self-manage medication, affect, and behavior?	Behavioral and Emotional Rating Scale (BERS-2C)* selected scales	Interpersonal Strength, Intrapersonal Strength, Affective Strength	Caregiver or Staff-as-Caregiver	Intake;Follow-up ¹	Descriptives, trend analysis																
			Behavioral and Emotional Rating Scale (BERS-2Y)* selected scales	Interpersonal Strength, Intrapersonal Strength, Affective Strength	Youth >11	Intake;Follow-up ¹	Descriptives, trend analysis																
			Youth Information Questionnaire (YIQ)* selected items - 23f, 23g, 23h, 23i, 23j	Attitude toward medication use	Youth > 11	Intake (YIQ-I); Follow-up (YIQ-F) ¹	Descriptives, trend analysis																
	<i>Functioning</i>																						
	No entry/re-entry into juvenile justice system	Have children/youth entered/re-entered into the juvenile justice system?	Delinquency Survey-Revised (DS-R)*	Caregiver Information Questionnaire (CIQ)* selected items -24, 24a	Family member criminal history	Caregiver	Intake (CIQ-IC); Follow-up (CIQ-FC) ¹	Descriptives, trend analysis															
									Caregiver Information Questionnaire (CIQ)* selected items - 24, 24a	Family member criminal history	Staff-as-Caregiver	Intake (CIQ-IS); Follow-up (CIQ-FS) ¹	Descriptives, Pearson correlation										
														Youth Information Questionnaire (YIQ)* selected items - 4, 6, 8	Peer social support	Youth > 11	Intake (YIQ-I); Follow-up (YIQ-F) ¹	Descriptives, Pearson correlation					
	Improved school attendance and achievement	Do children/youth have improved school attendance and achievement?	CAFAS	Education Questionnaire – Revised (EQ-R)*	School attendance/grade level, special placements and plans, school achievement, disciplinary actions	Caregiver or Staff-as-Caregiver	Intake;Follow-up ¹	Descriptives, trend analysis															
									Behavioral and Emotional Rating Scale (BERS-2C)* selected scales	School Functioning,	Caregiver or Staff-as-Caregiver	Intake;Follow-up ¹	Descriptives, trend analysis, paired t-tests										
														Behavioral and Emotional Rating Scale (BERS-2Y)* selected scales	School Functioning,	Youth >11	Intake;Follow-up ¹	Descriptives, trend analysis, paired t-tests					
																			Child Behavior Checklist (CBCL 6–18)* selected items - VII. 1,2,3,4	School functioning	Caregiver or Staff-as-Caregiver	Intake;Follow-up ¹	Descriptives, trend analysis, paired t-tests
	No/reduced alcohol, tobacco or other drug	Are children/youth using alcohol, tobacco or other drugs (ATOD)? Has use reduced over time?	GAIN Quick-R (GAIN)*	Substance use	Youth >11	Intake;Follow-up ¹	Descriptives, trend analysis, chi-square																

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Goals	Outcome Objectives	Study Questions	Measures/Indicators	Constructs	Source	Time Point	Analysis Plan
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	(ATOD) use		Substance Problem – Revised (SUS-R)*	Substance use	Youth >11	Intake;Follow-up ¹	
		Is child/youth ATOD use affected by family member use?	Caregiver Information Questionnaire (CIQ)* selected items - 25, 25a, 25b, 25c,	Family member substance use	Caregiver	Intake (CIQ-IC); Follow-up (CIQ-FC) ¹	Descriptives, logistic regression
			Caregiver Information Questionnaire (CIQ)* selected items - 25, 25a, 25b, 25c,	Family member substance use	Staff-as-Caregiver	Intake (CIQ-IS); Follow-up (CIQ-FS) ¹	Descriptives, logistic regression
			CAGE-AID	Caregiver use	Caregiver	Intake;Follow-up ¹	Descriptives, logistic regression
		Does ATOD use vary by racial/ethnic group?	EDIF*	Ethnic group	Care Coordinators & Parent Partners	Intake	Descriptives, cross tabs, ANOVA
		Does ATOD use vary by age?	EDIF*	Age	Care Coordinators & Parent Partners	Intake	Descriptives, cross tabs, ANOVA
<i>Service Delivery</i>							
Improved cultural and linguistic competency in services received	Do children/youth feel that services are culturally competent?	Youth Services Survey (YSS)*	Access, participation in treatment, cultural sensitivity, satisfaction, outcomes	Youth >11	Follow-up ¹	Descriptives, trend analysis	
	Do perceptions of cultural competency differ by types of services (meet needs)?	Services and Costs Study*	Services used	MIS	Ongoing, Follow-up	Linear/logistic regression, Nested models	
	Do perceptions of cultural competency differ by provider?	Services and Costs Study*	Services used	MIS	Ongoing, Follow-up	Linear/logistic regression, Nested models	
Satisfaction with, access to, and participation in services	Are children/youth satisfied with their ability to access and participate in services?	Youth Services Survey (YSS)*	Access, participation in treatment, cultural sensitivity, satisfaction, outcomes	Youth >11	Follow-up ¹	Descriptives, trend analysis	
	Does satisfaction with, access to, and participation in services differ by types of services (meet needs)?	Services and Costs Study*	Services used	MIS	Ongoing, Follow-up	Linear/logistic regression, Nested models	
	Does satisfaction with, access to, and participation in services differ by provider?	Services and Costs Study*	Services used	MIS		Linear/logistic regression, Nested models	

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Goals	Outcome Objectives	Study Questions	Measures/Indicators	Constructs	Source	Time Point	Analysis Plan
		Are youth satisfied with their Wraparound meetings; Wraparound process?	Wraparound Satisfaction Survey	Satisfaction with Wraparound meetings & process	Wraparound participants report	Post each Wraparound meeting	Descriptives, trend analysis

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