



Association for the Study and Development of Community

# Improving quality assurance when implementing and evaluating an evidence-based intervention in a community setting: Safe Start Promising Approaches Initiative

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## What is Safe Start: Promising Approaches?

A project funded by the Office of Juvenile Justice and Delinquency Prevention (OJJDP) to pilot, test, and evaluate innovative intervention practices at 15 sites over a period of four years.

The purpose of the project is to build knowledge about effectiveness of evidence-based, promising programs intended to reduce the harmful effects of children's exposure to violence.

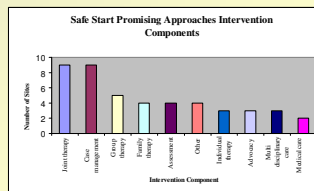
The project is the second phase of a four-phase initiative (Safe Start Initiative) focusing on preventing and reducing the negative impacts of children's exposure to violence.

Each tier of the Safe Start Initiative will inform the next tier with the ultimate goals of:

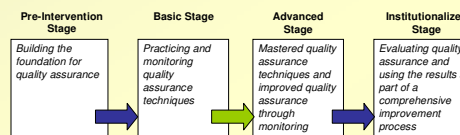
- Expanding the system of care to children exposed to violence;
- Identifying what works and what doesn't in ameliorating and preventing the harmful effects of that exposure;
- Building a knowledge base of effective strategies in the field of children's exposure to violence; and
- "Seeding" these effective strategies nationally

## Safe Start Evidence Based Approaches and Implementations Settings

Settings	Ages
Health clinic/hospital – 4	0 - 3 (1 site)
Child Protective Services Agency – 2	0 - 5/6 (6 sites)
Domestic Violence Agency/Shelter – 3	0 – 7/8 (2 sites)
Human services agency – 4	0 – 12 (1 site)
Child Advocacy Center – 1	0 – 18 (2 sites)
Head Start – 1	3 – 6/8/9 (3 sites)



## Continuum of Quality Assurance: Quality Assurance can be organized into four stages

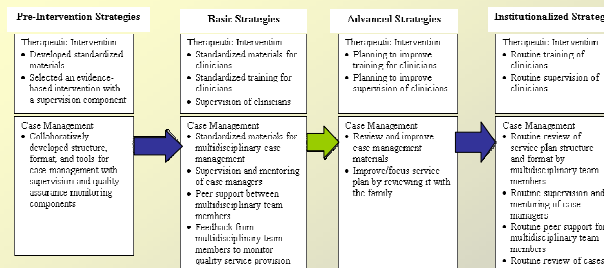


## How do you improve quality assurance processes? Quality Assurance at the St. Barnabas Safe Start Site

Intervention Components	Therapeutic Intervention + Multidisciplinary Case Management = Healthy and supported children and families (Case managers, therapists, and clinicians)
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### Examples of Quality Assurance by Stage

Minimum Quality Assurance → Maximum Quality Assurance



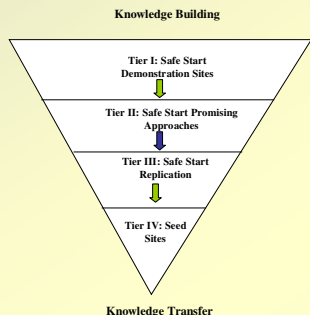
## Monitoring Quality Assurance: The QA Checklist

Simple checklist that assesses the presence of:

1. Standardized Treatment and Intervention Materials  
Sample question: Do the providers have access to manuals that describe the treatment model and its implementation?
2. Ongoing Supervision and Feedback  
Sample question: Do the providers have access to peer and mentor support through regular meetings?
3. Quality Assurance Monitoring  
Sample question: Does your agency/organization use session adherence protocols to monitor quality of implementation?
4. Agency/Organizational Support  
Sample question: Does your agency/organization have an internal advocate for quality assurance?
5. Program Model Adherence  
Sample question: Do you have a definition for treatment adherence that includes the degree of utilization of specified procedures by the provider?

## Quality Assurance in Safe Start Sites: Preliminary Process Evaluation Findings

1. Standardized Intervention and Training Materials
  - Varied depending on whether the intervention is delivered by treatment developers who are trying to meet their own quality standards or by program staff who are trying to meet developers' quality standards.
  - Most of the sites are using an intervention developed by another expert.
  - The level of contact with the developer varies across the sites.
  - The sites generally rely on published material and training manuals.
2. Ongoing Supervision and Feedback
  - Primarily through team meetings and individual consultation.
  - Sites also use child development or community/cultural experts for mentoring and support but not specific to the intervention model.
3. Quality Assurance Monitoring
  - Primarily through individual treatment plans.
  - Sites with well-developed models of clinical supervision maintain documentation of each session and review that with a supervisor on a regular basis.
  - Several sites already use or are planning to use session checklists.
4. Agency/Organizational Support
  - Presence of internal advocate for quality assurance depends on host agency of site.
  - Most of the sites do their own recruiting, screening and hiring.
  - Primarily in the form of structural support such as space, office supplies, or communication, with a few sites receiving support for case management.
5. Program Model Adherence
  - Almost all the sites have some level of group or team meetings that serve as a check for program model adherence.
  - Most sites use treatment plans or session notes to monitor adherence.
  - A few sites utilize session videotapes or observation by an independent rater to understand and review what happens in a session.



## How do you measure your improvements in quality assurance?

The process evaluation component of the National Evaluation includes some ways of collecting information on quality assurance.

- Purpose:
- To describe the start up process, implementation of Safe Start services, and costs attributed to running each of the 15 Safe Start programs.

- Data collection:
- Quarterly activity reports on services, training, and policies
  - Site visits involving key informant interviews, structured case reviews and quality assurance reviews
  - Document review
  - Regular e-mail and telephone communication