

# EvalTemplatePDF

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## Executive Summary

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## Program Description

The Play Project strives to facilitate healthy social-emotional development of young children through early childhood consultation (ECMHC) embedded in early learning centers in the Denver metro area. Masters-level consultants offer evidence-based approaches to facilitate social-emotional development, healthy relationships between children and adults, and positive mental health behaviors in the classroom. These consultation services help identify and remove obstacles to quality care while promoting sensitive and responsive interactions between vulnerable young children and the adults who care for them by improving the relationships between program directors, staff, parents, children and mental health consultants.

The Mental Health Center of Denver (MHCD) has implemented the Play Program since 2011. Since that time, the program has grown to include 5 consultants embedded within 5 of Denver's early childhood centers and 2 consultants available "on call" to any early childhood center in Denver. The overarching goal of the program has been to facilitate relationships and structure early learning environments that will inspire, support, and maintain the mental health of young children. To support this goal, MHCD employs an evidence-based model to improve children's social-emotional well-being by training early childhood center teachers and staff in early childhood mental health best practices, provide mental health consultation to early childhood teachers, and educate parents about early childhood mental health.

The current funding has helped MHCD expand their ECMHC program to partner with early learning centers serving foster care and high-need children. Program staff have identified this priority population because of the special needs of this group of children, families, and early learning centers. The Piton Foundation funding is supporting 3 consultants embedded within three centers for at least 4 days per week.

Teachers and parents are trained throughout the year to help them manage behavioral challenges, stress levels, and other concerns they may have. Education is provided on issues related to trauma, social and

emotional development, and early childhood mental health. Adults are also provided the opportunity to reflect on their work, their relationships with children and other adults, and their own personal triggers. These services are vital to young children's well-being as early interventions may lead to earlier identification of coping strategies, thereby limiting the time these children have concerning behaviors. Early mental health consultation could also help them to learn how to manage these issues at an earlier age in the event that they need to re-address them at a later point in their lives. Additionally, the majority of families from the centers where services were provided utilize the Colorado Child Care Assistance Program for low-income families. Consultation helps promote healthy relationships which can buffer children from the stress associated with poverty, trauma, and other challenges facing their families.

The Play Project provides two tiers of services to participating centers:

- *Center-based* services offered by the Play Project involve consultation to directors and early childhood providers regarding strategies to promote healthy social and emotional development, address behavioral challenges, improve the classroom environment, and improve overall quality. Center-based activities also include education programs for parents, children, and/or providers.
- *Child-specific* services offered by the Play Project include direct involvement with individual children, parents, and teachers. These interactions focus on building strengths and protective factors for both children and adults, reducing challenging behaviors, and encouraging social-emotional competence. Consultants also work with children and parents in group settings. Referrals for evaluation and treatment of mental health and developmental issues occur through these individual and group contacts.

Consultants spend up to four days per week at each center to provide resources to address children's social and emotional health and development. The following are resources given to promote this development:

- *Supportive Programs for Directors, Teachers, and Early Childhood Staff* including classroom support and consultation, reflection, coaching, mentoring, modeling interventions, professional training, and staff development.
- *Supportive Services for Children* including active referrals to community resources (i.e. mental health and early intervention services), assessment of children's emotional well-being using the Devereaux Early Childhood Assessment (DECA), one-on-one support, and positive skill building to promote school readiness and prepare for educational success.
- *Supportive Programs for Parents including parent* support and education, individual or family meetings, home visits, resources and referrals for families, empowerment, and self-advocacy.

The data included in this report evaluates the work of the Play Project from **July 1, 2018 to June 30, 2019**. A separate, comprehensive, multi-year report will evaluate the entirety of the Play Project's work related to this funding (August 1, 2016 through July 31, 2020).

## Evaluation Approach

The PLAY team has identified four questions to guide their evaluation efforts:

- How does embedded, center-based and classroom specific consultation impact early learning center staff?
- Are parent and teacher-specific trainings provided by consultants well-received?
- To what extent are children's social-emotional assessment scores changing over the course of a school year? The evaluation metrics outlined within the Evaluation Plan Table are intended to provide a comprehensive story of PLAY's services to provide an answer to each these three evaluation questions. Data is collected through both regular organizational workflows as well as workflows and data entry specific to this program. Data reporting and analysis systems are set up to report on all routinely updated indicators. Data analysis is overseen by the PLAY Evaluator and is completed by the Applied Research Team.

The PLAY project team developed a logic model to guide its evaluation efforts. ...

## Process Measures

Process evaluation of the Play Project included measuring the following outputs:

1. Total number of consultation and education services provided by consultants
2. Total number of teachers receiving ECMH trainings
3. The number of staff responding to consultation satisfaction survey
4. Total number of parents receiving ECMH trainings
5. Total number of children for whom a DECA was completed
6. Counts of most common consultation topics and activities
7. Counts of trainings by training topic/category

From *July 1, 2018* through *June 30, 2019*, consultants on the Play Project provided

consultation and education services, trained

teachers and

parents, completed

DECA assessments, and surveyed NO SURVEYS COMPLETED staff on consultation satisfaction. Consultants provided

teacher trainings on

topics to improve their management skills within their classrooms, increase their understanding of social and emotional development, and reflect on their work. A listing of topics and total participants is provided in **Table 1** below.

## Outcome Measures

Outcome evaluation of the Play Project included measuring the following outputs:

1. Teacher satisfaction with trainings
2. Parent satisfaction with trainings
3. Early learning center staff satisfaction with consultation services
4. Results of DECA
5. Academic year changes in DECA

## Satisfaction Surveys

Feedback from teachers and parents demonstrated that most felt positively about the training they received. of teachers and of parents reported that they *strongly agreed or agreed* with statements in the class evaluation related to the *presenter's style* and *preparation* as well as *content knowledge gained*. The full class evaluations are available in Appendix 2 and 3. Teachers and parents provided input on why they liked the trainings in which they participated. Themes from teachers' comments include a *comfortable environment*, *positive perspectives of the instructors*, and *expansion on teacher skills*. Finally, training participants provided suggestions for improvement. These suggestions on *increasing the time and consistency spent learning these*

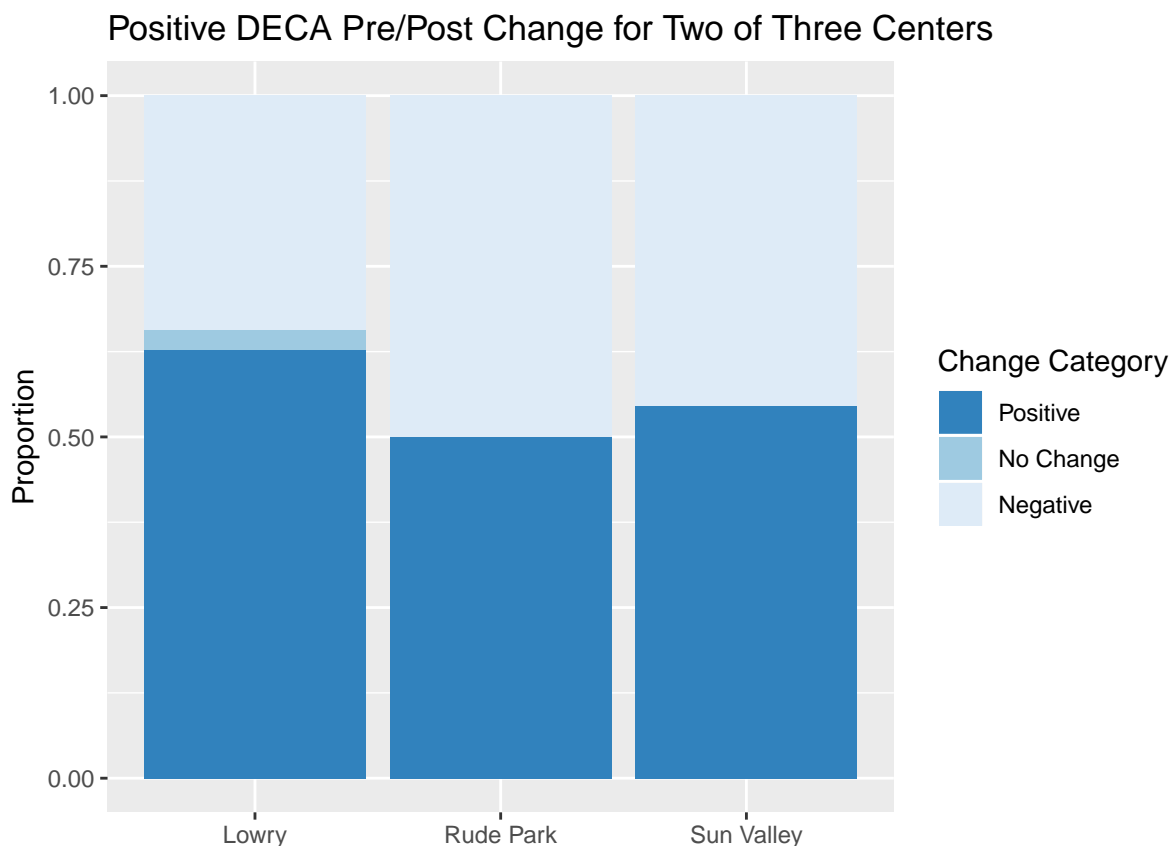
topics, as well as *increasing the content* within the trainings for teachers. Parents suggested *improving the class environment* and *providing more breaks*.

## DECA Results

The Devereaux Early Childhood Assessment (DECA) is used to evaluate the social-emotional development among children. This instrument is administered to teachers at the beginning and end of the school year to evaluate their students' changes in social-emotional development over the course of the school year. The DECA utilizes three scales that are then aggregated to a composite score:

- *Attachment/Relationships Scale* assesses the relationship between the child and significant adults.
- *Initiative Scale* assesses the child's ability to use independent thought and action to meet his or her needs.
- *Self-Regulation Scale* assesses the child's ability to manage and gain control of emotion and sustain focus and attention.
- *Total Protective Factor Scale* is a composite of attachment/relationships, initiative, and self-regulation scales to indicate overall protective strength.

The DECA was administered **259** times to **140** unique children. There were **119** children evaluated at both the beginning and end of the year. Data reported only include those **119** students with scores at the beginning of the year and at the end in order to accurately analyze changes occurring between these time periods. Data from these figures were obtained from teacher scorings using the e-DECA 2.0. The DECA Total Protective Factor Score combines the scores of the Attachment and Relationship, Initiative, and Self-Regulation categories. **Figure 1** demonstrates differences in scores between the beginning of the year and the end of the year. Most of the scores had improved during this time period (61.3% ), but quite a few had decreased or stayed the same (38.7%).



Although the overall change was mostly positive, we do not know if the change is statistically significant. If

the resulting differences are significant, this means the improvements made during this time are likely not random. This could suggest a causal relationship between the intervention and the outcomes measured. For the purposes of this project, statistical significance would mean that the positive differences in children's social and emotional growth may be due to the Play consultants' coaching. To examine the extent of these differences, a two-tailed, paired t test was conducted.

The t test compares mean Total Protective Factor (TPF) scores obtained at the beginning of the year to those at the end in order to see if they are statistically different from each other. We have included this test as it can help determine if the scores obtained after the Play Project intervention were significantly higher than those prior to the intervention. There were statistically significant differences in TPF scores for the beginning of the year ( $M=139.1$ ,  $SD=34.3$ ) and the end of the year ( $M=143.3$ ,  $SD=31.5$ );  $t(-2.73, 0.0072)$ .

The p-value from this test was less than the significance level of 0.05; therefore, there is a true differences between these pre- and post-TPF DECA scores. Table 4 explores the categories of Initiative, Self-Regulation, and Attachment and Relationship. The average pre- and post-scores for students in each of these categories are shown, where these scores are then classified into three types. "Strength" indicates that the average score for this category is high and the students demonstrate strength in this category. "Typical" refers to a score that is typical for these students. Lastly, the classification of "need" means that students' scores are lower than average and require improvement.

Table 4 shows that across all categories, we see improvements from pre- and post- time points. Fewer students had "need" and "typical" scores while more had "strength" and "typical" scores at the end of the year. The greatest positive changes from pre to post occurred in the Initiative and Attachment and Relationships categories. There was a 6.1% decrease in the number of children categorized in the "need" group for Initiative and a 8.3% decrease in the number of children categorized in the "need" group for Attachment and Relationships. Table 4 shows the breakdown of mean score, and distribution of the children among the categories, both pre and post.

Taken together the results of these data further support the use of the Play Project in early childhood centers. We see small, statistically significant positive change in DECA scores of children served by the Play Project. However, we see that there were differences by early learning center. We plan to investigate this further as we prepare for the next school year. Overall the surveys of the teachers and parents showed strong support for the trainings, with most of the teachers having responded that they felt more effective and confident because of the consultation and with many responding that without the consultation they and their children may no longer be in the program. Thus, these positive results may extend past educators and be in part due to the support provided by the consultants in the classroom.

## Impact

Impact evaluation of the Play Project included measuring the following outputs:

1. Teacher satisfaction with trainings
2. Themes from consultants' Success Narratives

There were no consultation satisfaction surveys completed in FY19 so that data is not included in this year's report. We will include this data next year. Our second key measure of impact is in identifying themes in consultants' success narratives. The themes from this year are displayed in the word cloud below.