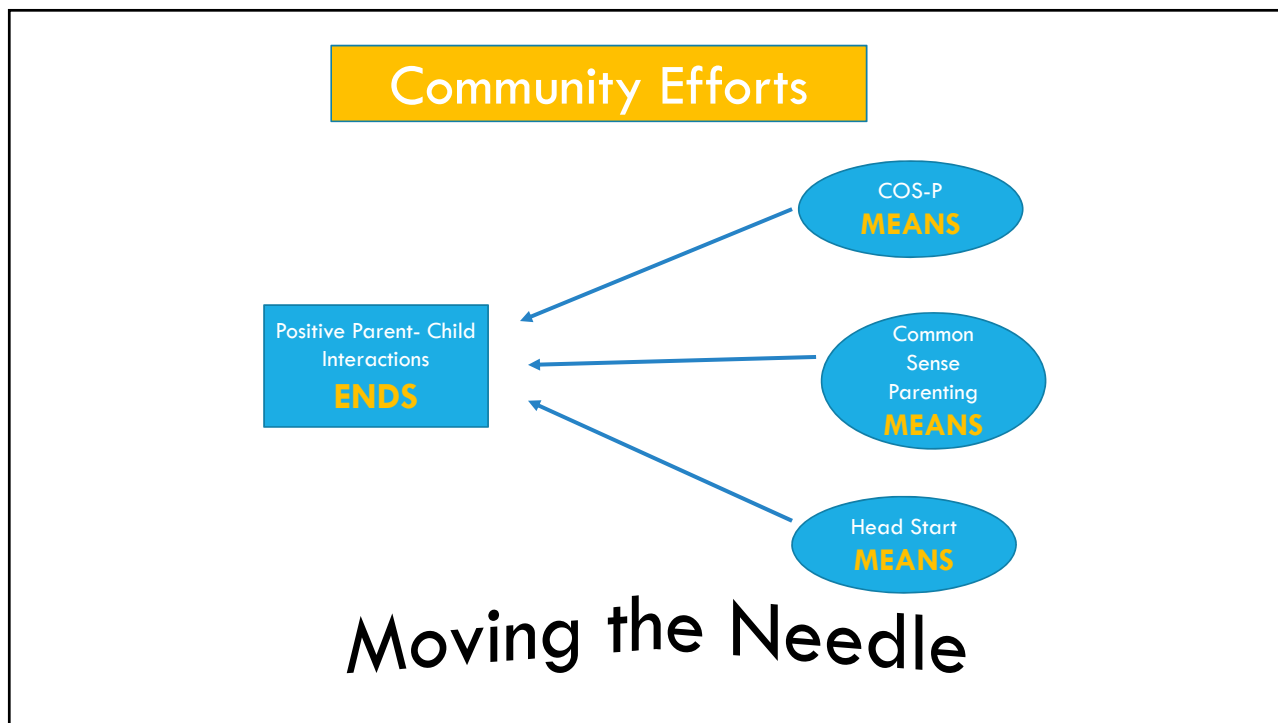


EVALUATING THE EFFECTIVENESS OF YOUR COS-P CLASSES

PEP Webinar Series
April 1, 2015

Presenter: Barb Jackson





WHY EVALUATION???

EVALUATION CONTRIBUTES TO UNDERSTANDING THE EFFECT OF
COS-P ON NEBRASKA CHILDREN AND FAMILIES



IS THIS WHAT YOU ARE THINKING??



TWO REASONS FOR EVALUATION

Shared Measurement/Outcomes – Helps to tell the Story of the Impact of the Program

Similar measures across programs and communities

Efforts are aligned with outcomes and impacts

Shared accountability



TWO REASONS FOR EVALUATION

#5 CONTINUOUS IMPROVEMENT



Continuous Improvement

Reflect on data so that partners can know **how** and **why** the initiative is progressing


Identify strategies to **improve** implementation of strategies

THE THREE STEPS OF COS-P EVALUATION: #1

Attendance

To what extent are the parents participating in the COS-P sessions?

Dosage

© 2009 Vertex42 LLC
[Attendance Record by Vertex42.com](http://Vertex42.com)


Circle of Security-Parenting Attendance Record

Educator Name: Class Dates:

Sponsoring Agency: County:

| Family ID First and last initial and date of birth ex: rz02251970 | Week 1 | Week 2 | Week 3 | Week 4 | Week 5 | Week 6 | Week 7 | Week 8 | Week 9 | Week 11 | Week 12 | # | % |
|---|--------|--------|--------|--------|--------|--------|--------|--------|--------|---------|---------|---|------|
| 1 | | | | | | | | | | | | 0 | 0.0% |
| 2 | | | | | | | | | | | | 0 | 0.0% |
| 3 | | | | | | | | | | | | 0 | 0.0% |
| 4 | | | | | | | | | | | | 0 | 0.0% |
| 5 | | | | | | | | | | | | 0 | 0.0% |
| 5 | | | | | | | | | | | | 0 | 0.0% |
| 7 | | | | | | | | | | | | 0 | 0.0% |
| 3 | | | | | | | | | | | | 0 | 0.0% |
| 3 | | | | | | | | | | | | 0 | 0.0% |
| 0 | | | | | | | | | | | | 0 | 0.0% |
| # in Attendance: | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0.0% |

THE THREE STEPS OF COS-P EVALUATION: #2

Parent Educator Survey

How is COS-P
implemented in your
community?

Effort

| CIRCLE OF SECURITY-PARENTING | Parent Educator Survey | | | | | | | | | | | | | | | | | | |
|---|---|----------|-------------------|----------|----------------|-------|----------------|--|---|---|---|---|---|---|---|---|---|---|---|
| Name: _____ | Date: _____ | | | | | | | | | | | | | | | | | | |
| Sponsoring Agency: _____ | County: _____ | | | | | | | | | | | | | | | | | | |
| Number of Individuals in Class: _____ | Number of Families in Class: _____ | | | | | | | | | | | | | | | | | | |
| 1. Was child care available? ___ yes ___ no If yes, provided by: _____ | <ul style="list-style-type: none"> Describes the context of the classes Provides opportunity to evaluate reflective consultation. Opportunity for your feedback | | | | | | | | | | | | | | | | | | |
| 2. Was food provided? ___ yes ___ no If yes, provided by: _____ | | | | | | | | | | | | | | | | | | | |
| 3. Was transportation provided? ___ yes ___ no If yes, provided by: _____ | | | | | | | | | | | | | | | | | | | |
| 4. Were incentives provided to parents to attend? ___ yes ___ no If yes, please indicate the incentive and who provided it: _____ | | | | | | | | | | | | | | | | | | | |
| 5. Where was the Circle of Security-Parenting class held? ___ School ___ ESU ___ Child care center ___ Private practice office ___ Hospital ___ Community Center ___ Church or religious center ___ Other _____ | | | | | | | | | | | | | | | | | | | |
| 6. I participated in reflective consultation. ___ yes ___ no If yes, who provided the consultation? _____ If no skip to question 10. | | | | | | | | | | | | | | | | | | | |
| 7. I participated in reflective consultation: _____ weekly _____ 1-2 x per month _____ quarterly _____ annually _____ other | | | | | | | | | | | | | | | | | | | |
| Please circle the number that best describes how much you agree or disagree with the statement. | | | | | | | | | | | | | | | | | | | |
| | <table border="1" style="margin: auto; border-collapse: collapse;"> <thead> <tr> <th style="padding: 2px 5px;"></th> <th style="padding: 2px 5px;">Strongly Disagree</th> <th style="padding: 2px 5px;">Disagree</th> <th style="padding: 2px 5px;">Neutral</th> <th style="padding: 2px 5px;">Agree</th> <th style="padding: 2px 5px;">Strongly Agree</th> </tr> </thead> <tbody> <tr> <td style="padding: 2px 5px;">8. The reflective consultation I received was helpful.</td> <td style="padding: 2px 5px; text-align: center;">1</td> <td style="padding: 2px 5px; text-align: center;">2</td> <td style="padding: 2px 5px; text-align: center;">3</td> <td style="padding: 2px 5px; text-align: center;">4</td> <td style="padding: 2px 5px; text-align: center;">5</td> </tr> <tr> <td style="padding: 2px 5px;">9. The frequency of the reflective consultation was adequate.</td> <td style="padding: 2px 5px; text-align: center;">1</td> <td style="padding: 2px 5px; text-align: center;">2</td> <td style="padding: 2px 5px; text-align: center;">3</td> <td style="padding: 2px 5px; text-align: center;">4</td> <td style="padding: 2px 5px; text-align: center;">5</td> </tr> </tbody> </table> | | Strongly Disagree | Disagree | Neutral | Agree | Strongly Agree | 8. The reflective consultation I received was helpful. | 1 | 2 | 3 | 4 | 5 | 9. The frequency of the reflective consultation was adequate. | 1 | 2 | 3 | 4 | 5 |
| | Strongly Disagree | Disagree | Neutral | Agree | Strongly Agree | | | | | | | | | | | | | | |
| 8. The reflective consultation I received was helpful. | 1 | 2 | 3 | 4 | 5 | | | | | | | | | | | | | | |
| 9. The frequency of the reflective consultation was adequate. | 1 | 2 | 3 | 4 | 5 | | | | | | | | | | | | | | |

THE THREE STEPS OF COS-P EVALUATION: #3

Parent Survey

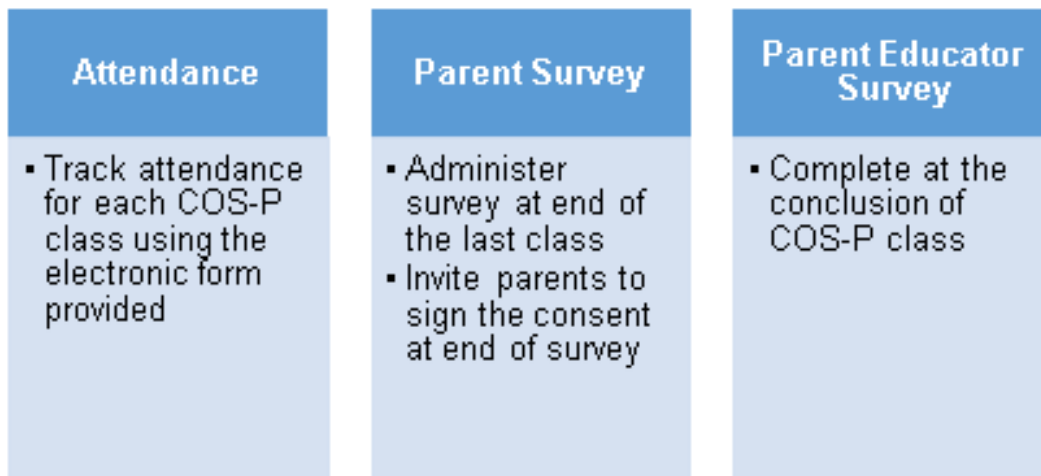
To what extent are the parents gaining strategies to interact positively with their children?

Outcome

| CIRCLE OF SECURITY-PARENTING | | Parent Survey | | | | |
|--|-------------------|---------------|---------|-------|----------------|--|
| Family ID: (First and Last initial and date of birth, ex: rz02251970) _____ Date: _____ | | | | | | |
| County: _____ | | | | | | |
| Please circle the number that best describes how much you agree or disagree with the statement. | | | | | | |
| | Strongly Disagree | Disagree | Neutral | Agree | Strongly Agree | |
| 1. Meeting with a group of parents was helpful to me. | 1 | 2 | 3 | 4 | 5 | |
| 2. The leader did a good job working with my group | 1 | 2 | 3 | 4 | 5 | |
| Please circle the number that best describes how much you agree or disagree with the statement BEFORE you attended the Circle of Security-Parenting class and NOW , after you completed the Circle of Security-Parenting class. | | | | | | |
| | Strongly Disagree | Disagree | Neutral | Agree | Strongly Agree | |
| 3. My level of stress about parenting is high. | BEFORE 1 | 2 | 3 | 4 | 5 | |
| | NOW 1 | 2 | 3 | 4 | 5 | |
| 4. I have a positive relationship with my child (ren). | BEFORE 1 | 2 | 3 | 4 | 5 | |
| | NOW 1 | 2 | 3 | 4 | 5 | |
| 5. I recognize the behaviors that trigger my negative response to my child (i.e. my "shark music.") | BEFORE 1 | 2 | 3 | 4 | 5 | |
| | NOW 1 | 2 | 3 | 4 | 5 | |
| 6. I identify and respond to my child's needs for support to explore and for comfort and contact (the top and the bottom of the Circle). | BEFORE 1 | 2 | 3 | 4 | 5 | |
| | NOW 1 | 2 | 3 | 4 | 5 | |
| 7. When I fail to respond to my child's need (I step off the Circle), I look for a way to repair our relationship. | BEFORE 1 | 2 | 3 | 4 | 5 | |
| | NOW 1 | 2 | 3 | 4 | 5 | |

- Parents provide feedback on the classes.
- Provides pre-post information on their skills related to COS-P targeted for skills building.
- Demographic information

COS-P EVALUATION TIMELINE



DATA ANALYSES

| COS-P Data Summary Form: Parent Educator Survey | | | | | | | | | | | | |
|---|------|------|-------------------|--------|--------------|-----------|----|-------|----|-------|----|--|
| Year | Name | Date | Sponsoring Agency | County | #Individuals | #Families | E1 | E1Yes | E2 | E2Yes | E3 | |
| 2015 | | | | | 2 | 1 | 5 | | 4 | | 3 | |
| 2015 | | | | | 5 | 7 | | | | | | |
| Totals | | | | | 7 | 8 | | | | | | |
| Total Summary Score: | | | | | | | 4 | | | | | |

SUMMARIZING YOUR DATA IN A COMMUNITY SNAPSHOT REPORT



MARKETING THE RESULTS.....



What would you say?

How would describe success?

- COS-P is helping our community's parents. After participation in an 8 week parenting class, 75% of the parents reported increased skills.
- "I would tell all parents who would have the opportunity to experience this training to take this, embrace this, practice it, live by it, and not only will your children benefit, but you will come away feeling empowered as a parent."

TAKING ACTION: 3 STEPS YOU CAN TAKE TODAY!

1. Download and review the evaluation measures
2. Talk to your agency and see how this evaluation might be helpful to your work
3. Email Jen Gerdes <jgerdes@nebraskachildren.org> if you are willing to participate in a statewide pilot of the evaluation tools.



QUESTIONS? |

UPCOMING WEBINAR TOPICS

May 6, 2015: Identifying When to Refer Parents for Additional Supports

June 3, 2015: The Role of Reflective Consultation

All webinars will be held from 12:30-1:30 CT

TAKE THE FOLLOW UP SURVEY (5 QUESTIONS)

<https://www.surveymonkey.com/s/2FFR9KM>