

Modular Approach to Therapy for Children with Anxiety, Depression, Trauma, or Conduct Problems (MATCH-ADTC) Program Report Card SFY 2017 Q3 (1/1/2017 – 3/31/2017)

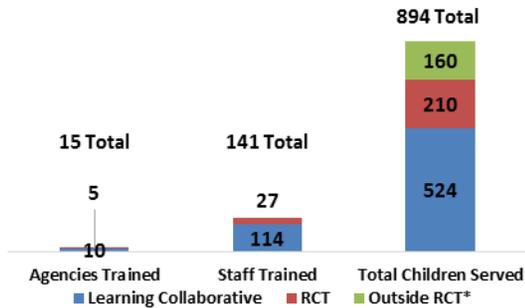
Contribution to the Result: Modular Approach to Therapy for Children with Anxiety, Depression, Trauma or Conduct Problems (MATCH-ADTC) is an evidence-based treatment model that addresses 70% of the most common presenting problems in children’s mental health outpatient services. To foster the effective and successful sustainability of MATCH-ADTC throughout Connecticut, DCF, in partnership with CHDI (coordinating center) and Harvard University (model developer and clinical trainer) are providing in-depth training combined with robust and ongoing consultation to community provider agencies. Dissemination and implementation strategies include a randomized controlled trial (RCT) led by Harvard, and a Learning Collaborative approach led by CHDI.

Program Funding	State Funding	Federal Block Grant Funding	Total Funding
SFY 2015-2018	\$1,000,000.00	\$165,052.00	\$1,165,052.00

Partners: Child Health and Development Institute of Connecticut, Community Provider Agencies, Department of Children and Families, Harvard University

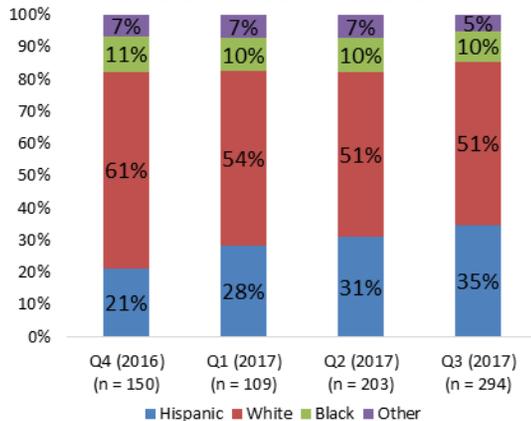
Who did we serve?

Program Totals to Date



*Estimated number of children served at RCT agencies, separate from the clinical trial.

Children in Active Treatment



*White, Black, and Other categories are specifically non-Hispanic.

Story behind the baseline: There was an increase in children active in treatment for Q3 (294), compared with the previous quarter (203). The percentage of Hispanic (all races) children served has increased slightly (31% in Q2 to 35% in Q3).

83 children were discharged from treatment in Q3 compared to 68 in the previous quarter.

Trend: ▲ Yes

Who did we serve?

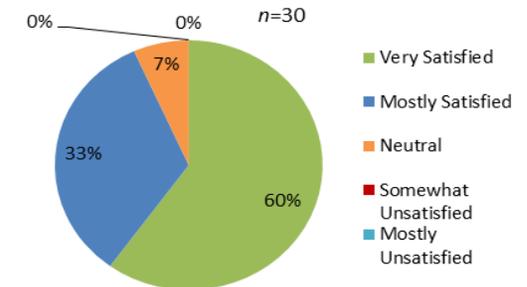
The intended age range for MATCH is 6-15 years old. Of the 294 children served during Q3, 91% fell within this age range, with 73% of children between the ages of 6-12, 21% between the ages of 13-16, and 4% of children between the ages of 0-5. Of these children 49% are Male and 51% are Female.

Of all children served in Q3, 51% are White (non-Hispanic), 35% are Hispanic (all races), 10% are Black (non-Hispanic) and 5% are ‘other’ (non-Hispanic). Of DCF-involved children (n = 54) 44% are White, 43% are Hispanic, 9% are Black and 4% are ‘other.’

State demographic data reveals that Hispanic children are being served at a higher rate than their overall population within the state (22%). Of all children served in Q3, Black children are being served at the approximately the same rate as their proportion of the state population (12%). White children are served at a slightly lower rate compared to their proportion of the state population (58%).

How well did we serve?

Caregiver Satisfaction Questionnaire Overall Satisfaction with Child’s Treatment



Caregiver satisfaction with MATCH-ADTC treatment was high for Q3. 93% report being mostly or very satisfied in response to the question “Overall, I am satisfied with the services my child received.” This is comparable to the previous quarter (92%).

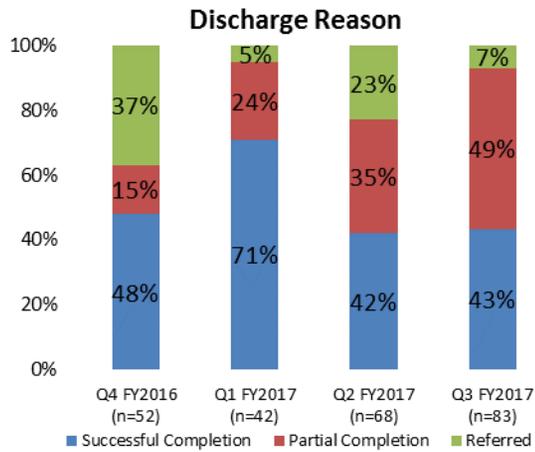
Trend: ▲ Yes

Client Engagement

To assess client engagement, Monthly Session Forms are completed by Clinicians to describe the number and type of sessions they had with children. During Q3 of FY2017 clinicians conducted 1392 total MATCH sessions. On average, Clinicians saw children 2.1 times a month. Of all planned visits, 91% were attended and 9% were “no show” appointments in which the client did not attend. This similar to the previous quarter which had 89% of sessions attended.

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How well did we serve?

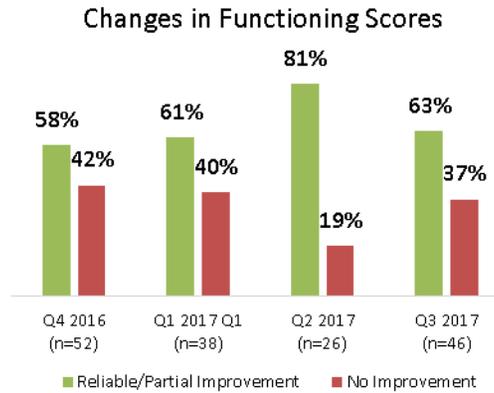


Story behind the baseline: 93% of children discharged this quarter completed treatment. This percentage is much higher than the previous quarter (77%) and similar to Q1 (95%). A smaller percentage of children were referred to other forms of care in Q3 (7%) compared to Q2 (23%). The percentage of children successfully completing treatment and needing no more treatment doubled this quarter (22%) compared to the previous quarter (10%).

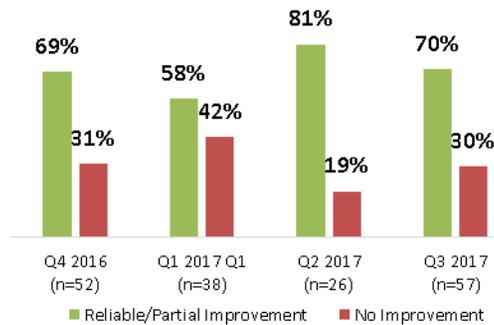
White (48%) children were slightly more likely to successfully complete treatment compared to Hispanic (42%) and Black (40%) children in Q3. This difference is comparable to Q4 SFY2016 and Q2 SFY2017.

Trend: ▲ Yes

Is anyone better off?



Changes in Problem Severity Scores



Story behind the baseline:

A majority of children demonstrated improvements in functioning in problem severity (as measured by the Child and Caregiver Ohio scales) over the past four quarters. Q3 problem severity (70%) and functioning (63%) scores are comparable to Q4 SFY2016 and Q2 SFY2017.

Numbers are too low to report racial differences this quarter.

Trend: ▲ Yes

Actions to Turn the Curve

- Continue providing in-depth clinical consultation, implementation consultation and technical support to agencies and staff through the Learning Collaborative.
- Expand the number of clinicians trained and certified to deliver MATCH at each agency
- RCT enrollment was completed in December 2016 and an evaluation report will be available in 2018. It is currently too early to report on client trends and outcomes from the RCT.
- Provide increased training and support in the use of clinical measures to improve outcomes measurement and analysis.
- Provide increased training and support in the use of data driven decision making to improve treatment outcomes.

Data Development Agenda

- Streamline improvements to online data collection system (EBP Tracker) for MATCH
- Increase efficiency of data entry and reporting on client and agency population outcomes