

Modular Approach to Therapy for Children with Anxiety, Depression, Trauma, or Conduct Problems (MATCH-ADTC)

Program Report Card

SFY 2019 Q3 (01/01/2019 – 03/31/2019)

Quality of Life Result: All Connecticut children will be healthy, safe, living in stable environments and be ready for future success. Improve school-based mental health services for Connecticut children by providing trauma-focused, evidence-based treatment that is adaptive, effective and appropriate for the diverse needs of Connecticut children.

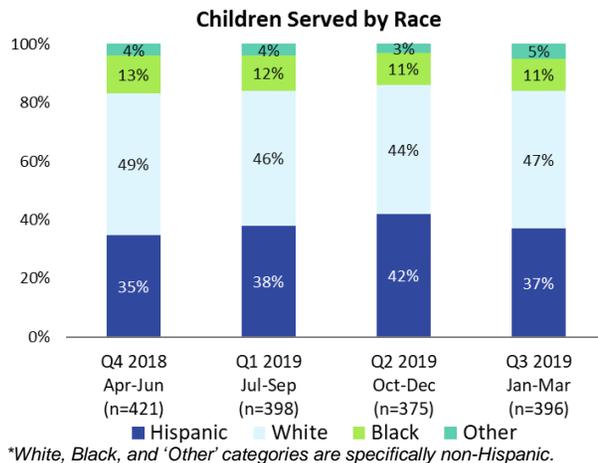
Contribution to the Result: Modular Approach to Therapy for Children with Anxiety, Depression, Trauma or Conduct Problems (MATCH-ADTC) is an evidence-based treatment model that addresses 70% of the most common presenting problems in children’s mental health outpatient services. To foster the effective 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.

Program Funding	State Funding	Total Funding
SFY 2019-2023	\$5,000,000.00	\$5,000,000.00

Partners: Child Health and Development Institute of Connecticut, 19 Community Provider Agencies, Department of Children and Families, Harvard University

Who did we serve?

Story behind the baseline: 19 provider agencies are currently implementing MATCH. Combined these agencies served MATCH has been provided to a total of 396 children this quarter, which is comparable to previous quarters. 38 clinicians were trained this fiscal year.



Trend ▲ Yes

Who did we serve?

Story behind the baseline: In this quarter 10% of children receiving MATCH were being served by DCF. There was a significant difference in race/ethnicity between the two groups where Black non-Hispanic children were more likely to be served by DCF (27% of Black children) compared to Hispanic (7%), White non-Hispanic (9%) and Other non-Hispanic (10%) children.

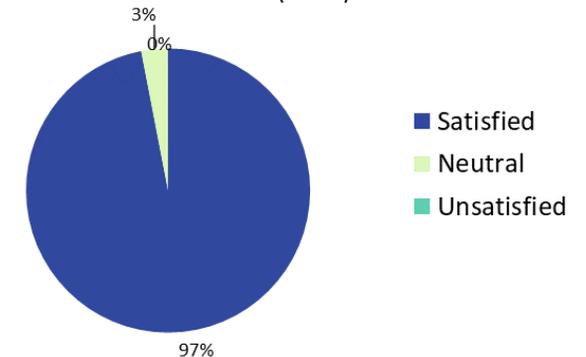
Most children were between the ages of 6-12 (56%) and 13-18 years (40%). Of children, 44% were male and 56% are female.

For children served this quarter, females had significantly higher baseline scores on problem severity and trauma symptoms according to child report, and functioning according to caregiver report. Males had higher baseline problem severity symptoms according to caregiver report. There was no significant differences for racial and ethnic groups.

Trend: ◀▶ Flat/ No Trend

How well did we serve?

Caregiver Overall Satisfaction with Child's Treatment
(n=66)



Ohio Satisfaction (n = 26) does not have a neutral option.

Story behind the baseline: Caregiver satisfaction with MATCH-ADTC treatment was high for Q3. 97% report being satisfied in response to the question “Overall, I am satisfied with the services my child received.” This is similar to the previous quarter (98%).

Trend: ▲ Yes

Client Engagement

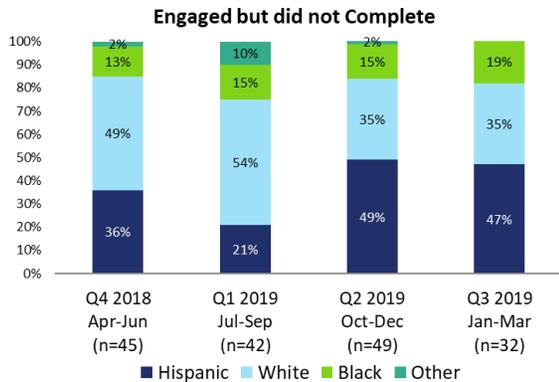
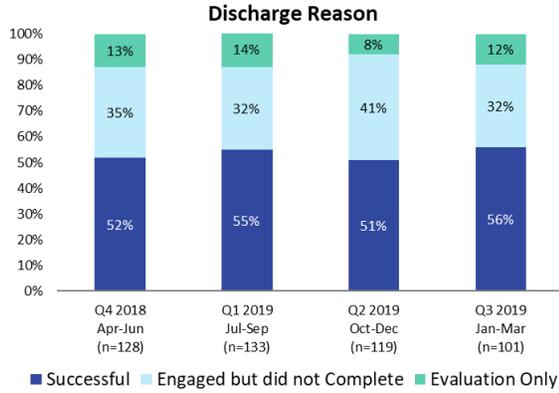
During Q3 of FY2019 clinicians conducted 2121 total MATCH sessions; 92% of planned visits were attended. On average, clinicians saw children 2 times a month.

Trend Going in Right Direction? ▲ Yes; ▼ No; ▶ Flat/ No Trend

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How well did we serve?

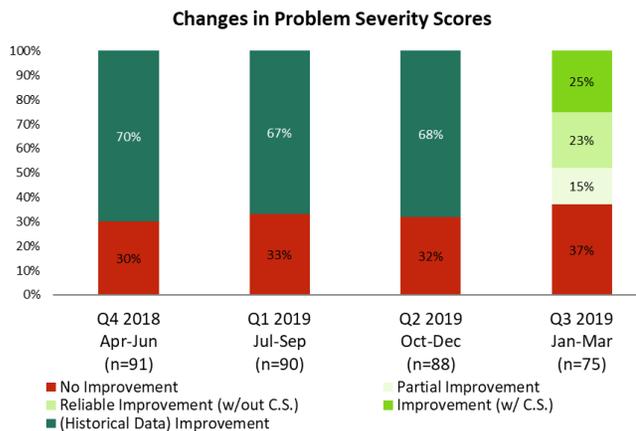
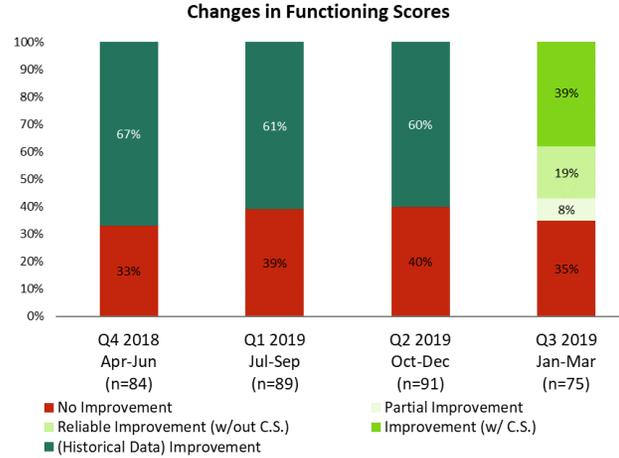


*White, Black, and 'Other' categories are specifically non-Hispanic.

Story behind the baseline: Discharged clients fall in to 1 of 3 categories, successful (as determined by clinician report), engaged but did not complete (had at least 4 sessions) and evaluation only (3 sessions or less). There was no significant difference in successful discharge rates among racial/ethnic groups with 52% of Hispanic children, who discharged this quarter, discharging successfully, 63% white, 50% black and 67% other. There was no significant difference across racial/ethnic groups of those who engaged but did not complete.

Trend: ▲ Yes

Is anyone better off?



Story behind the baseline: A majority of children demonstrated improvements in functioning (65%) and problem severity (63%) symptoms (as measured by the Child or Caregiver Ohio scales) this quarter. There were no significant differences between racial groups on Ohio symptom reduction.

Trend: ▲ Yes

Actions to Turn the Curve

- Continue providing in-depth clinical consultation, implementation consultation and technical support to agencies.
- Expand the number of clinicians trained and certified to deliver MATCH at each agency.
- 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

- Provide training for agencies around using reports to focus on Quality Improvement indicators across time, relative to statewide trends, and in context with other EBP models.
- Implemented a more streamlined assessment schedule and continue to provide guidance around selecting appropriate monitoring measures.
- Work with developers to integrate EBP Tracker and PIE and gain clinician feedback throughout the process to work toward a transition with limited disruptions and increased efficiency for clinicians.