

# RECRUITING, TRAINING, AND SUPPORTING CAREGIVERS AS EVALUATORS: ENHANCING EMPOWERMENT THROUGH THE COMMUNITY EVALUATION TEAM

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## System of Care (SOC) Evaluation—Partnering of Professionals and Caregivers Leads to Empowering Caregivers ONE CANNOT RUSH EMPOWERMENT

- 5-year SOC initiatives provide the time necessary to nurture family groups, such as Community Evaluation Teams (CETs),.
- CETs last a lifespan of years and offer members—caregivers, consumers, and evaluators—time to develop relationships of trust and to grow empowered.
- CET Evaluators prove the worth of caregivers’ and consumers’ ideas by utilizing their valid suggestions in rapid response time.
- Members gain confidence in the value of their experience as they see their suggestions utilized by evaluators from one meeting to the next.
- Evaluators consistent respect and rapid response time allows the safe sharing of families’ personal stories, which gives families confidence and eventual empowerment. Family members have tendency, once involved, to continue to move within system as a volunteer up to paid staff as they are motivated to expend time and energy toward SOC improvement.

## Evaluation: A Natural Fit for Professional/Family Collaboration

- Evaluation, in particular, provides a point of power for families and thereby lends itself to enhancing Caregiver Empowerment .
- Enables family members to transform their concerns (such as high staff turnover) into Research Questions, which can then be transformed into studies and analyzed (see the family-driven qualitative study created and designed by members of Community Solutions Community Evaluation Team, Fort Worth, TX. 2007-2008).
- Caregivers can harness resulting data and disseminate into their individual communities/neighborhoods/Systems of Care to advocate for change within the system where they feel the need for change.



## The First Crucial Steps toward Family-Driven Evaluation

Adding a Family and a Bilingual Evaluator to the team will increase the family-driven and cultural competency SOC principles as well as....

- Increase likelihood of participation in the National Evaluation (and any Local studies) and increase the honesty of answers.
- Increase follow-up rates and provide for a more accurate study.
- Enable a faster, deeper bond between evaluators and family members, who automatically feel more trust when they share common bonds.
- Collect comprehensive quality improvement data early on with evaluation response cards left with each caregiver after the intake evaluation. Cards give caregivers a chance to comment on the evaluation and the interview experience.

## Suggestions for Recruiting a Community Evaluation Team (CET)

- Evaluators can suggest ways to talk about the CET to families at the time of the evaluation interviews. Our Family Evaluator and CET felt it did not make sense to recruit caregivers before the six month follow-up interview due to most families being overwhelmed at the start of services.
- As the first families approach their six month interview, conduct a short, “postcard” survey of caregivers /consumers to determine when to hold your first CET meeting, gathering data on when individuals are able to attend meetings as far as time of day, day of the week, frequency of meeting attendance (once a month or every other month?). In Fort Worth, our families voted Thursday evenings 6:30 pm.
- Cater a nice meal for the first meeting which should be a “Celebration of Evaluation.” Use humor, good food, have childcare and offer stipends to families who can attend.
- Briefly explain what the CET is and pass around a sheet for families to sign up if they are interested in coming to the next meeting (already have a date and time set).
- Keep it light. Watch out for power points which can easily lose families. Give them some cool handouts with some interesting data on childrens’ progress in big colorful graphs and let the data analyst explain the variables.
- Keep stipends, childcare and snacks or light meals as part of the ongoing compensation for the caregivers’ time and energy. If transportation is a problem, offer bus passes or consider if the person could carpool with someone else.
- Consideration of childcare, stipends and food (especially if your meetings are at the end of a work day) are part of the respect and friendship Evaluation will consistently offer the CET members. Membership will vary, some will leave, but others will join and move up the ladder of empowerment all the faster, thanks to the help from the charter members the team has cultivated.

## Contributions from the Community Evaluation Team (CET) to North Texas’ System Of Care

- CET Members from Community Solutions, Fort Worth, TX, first SOC grant, provided key members to Hand In Hand’s Lead Family Contact position; Family Mentors, and members for Family Consumer Connection, Hand In Hand’s Advocacy group.
- The Family Experience Study, (FES), a qualitative study, created and designed by Caregivers from the CET with Evaluators’ guidance. The FES was an audio-taped, 1 hour long instrument of qualitative questions (open-ended), asked of caregivers who completed Wraparound by caregivers in the CET.
- Only caregivers who were members of the CET and had been in Wraparound asked the questions, face to face, of the caregiver respondents. The interviewers also helped transcribed the taped interviews.
- The resulting data gave our site valuable information with which we wrote our new grant application and were awarded a second system of care initiative in 2008, Hand In Hand.
- Received Honoring Excellence in Evaluation 1st place in Operations and 2nd place in Family and Youth Involvement in 2008 based on the team’s qualitative study.
- Qualitative questionnaire used for Hand in Hand’s local evaluation designed by CET.
- CET helps keep the evaluation for Hand in Hand as family-friendly as possible, suggesting what questions are appropriate for various forms, for example the Locator form, a form we use to find families if they move, which has contributed greatly to our high follow up rate.
- CET suggests methods for evaluating grants the Evaluation and Outcomes division has applied for with NIMH and other System of care-related initiatives.
- CET Caregivers co-run the meetings and help determine the CET Budget expenditures and such.
- CET helped us pick fidelity instruments for our wraparound fidelity study.
- CET member has become a resource for bilingual interpretation and other assistance with cultural competence for Hand In Hand.
- CET member suggested “Hand In Hand” be used as a name because it sounds great in Spanish—“Mano a Mano.”
- Group named CET, “HOPE” for “Helping our Parents (or People) Evaluate.”
- Many CET members attended the Hand In Hand SAMHSA site visit and 3 or 4 have attended national and local conferences (out of state) and trainings, something we hope to increase in the future.
- In future, charter members will help new Hand in Hand members of the CET up the ladder to empowerment so they repeat the process.

## A Typical Community Evaluation Team (CET) Meeting

- 1 ½ to 2 hour meeting with childcare, dinner (usually pizza with dessert and snacks), and stipends provided.
- Agenda with four to six items to allow time for discussion.
- Discuss announcements, events.
- Give Project Director and Lead Family Contact an opportunity to update.
- Evaluation and ask CET for suggestions about anything to do with Program’s side of Hand In Hand.
- Caregivers share how they’ve advocated for their kids and how DATA has helped them get the point across in an ARD meeting (Admission-Review-Dismissal; meeting with school and parents to develop Individualized Education Plan), School Board meeting; with Pediatricians or Mental Health Professionals, etc.
- Always end up discussing STIGMA and ways to combat it.
- Set next meeting (every other month is typical).

## Other Research

- Federal mandates have called for communities to involve families in developing, implementing, and evaluating mental health service delivery (Jivanjee & Robinson, 2007).
- Family empowerment was noted to be a key mediator in improving children’s mental health (Graves & Shelton, 2007).

## Training Caregivers to Collect Data: A Multi-pronged Approach

1. Agency Training: Consider your agency requirements for employees and volunteers to be able to enter consumers’ homes and handle confidential info. Partnering with your agency trainers saves time. Our trainers set up a special training to cover 5-10 sessions in one day for our caregiver training. We suggest paying data collectors to attend training.
2. Evaluators will design Evaluation-specific training. Our Family Evaluator designed the manual and conducted the training with suggestions from the whole team. This must cover making appointments; cultural competency; attitudes and patience; mandatory reporting laws of child abuse and neglect; disbursing stipends; and SAFETY.
3. Ensure that Institutional Review Board approval is obtained for caregivers to collect data and that caregivers are trained in confidentiality protocols such as informed consent and tape and file storage.

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