

Evidence-building for Family First: Rigorous Evaluation Annual Report

REPORT HIGHLIGHTS:

As the coordinator of Family First rigorous evaluation efforts on behalf of the State of Colorado, the Colorado Lab provides ongoing strategic guidance to meet the evidence-based aspects of Family First requirements and ensure strategic investments in evidence-building for services/programs positioned to meet the needs of Colorado's children, youth, and families.

This report covers:

- Synthesis of evidence designations for each program/service approved in the Plan
- Service-specific summary of evidence-building activities and progress to date
- Recommendations for prioritizing evidencebuilding activities in SFY23 and beyond
- Lessons learned and opportunities to inform sustainability, scaling, and expansion of Colorado's service continuum

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Introduction

Programs included in Colorado's 5-Year Prevention Services Plan that are rated as "promising" or "supported" by the Title IV-E Prevention Services Clearinghouse require ongoing rigorous evaluation to build evidence towards a "well-supported" designation. In addition, practices that have no current level of designation (i.e., not yet rated), as well as practices that have been reviewed, but received a rating of "does not meet criteria," require rigorous evaluation building from the ground up.

The Colorado Evaluation and Action Lab (Colorado Lab) serves as the coordinator of Family First rigorous evaluation efforts on behalf of the State of Colorado, specifically, the Colorado Department of Human Services (CDHS). In this role, the Colorado Lab provides ongoing strategic guidance to meet the evidence-based aspects of Family First requirements and ensure strategic investments in evidence-building for services/programs positioned to meet the needs of Colorado's children, youth, and families.

This report covers:

- Synthesis of evidence designations for each program/service approved in Colorado's Prevention Plan.
- Service-specific summary of evidence-building activities and progress to date.
- Recommendations for prioritizing evidence-building activities in State Fiscal Year (SFY) 2023 and beyond.
- Lessons learned and opportunities to inform sustainability, scaling, and expansion of Colorado's service continuum

Recommendations for expanding the evidence-based service array in Colorado focus on four buckets:

- 1. Prioritizing additional services for inclusion in Colorado's Prevention Plan.
- 2. Meeting rigorous evaluation requirements for programs/services already in Colorado's Prevention Plan.
- 3. Building evidence for adaptations of programs to better meet needs of Colorado families.
- 4. Considering Long Term Opportunities to expand the service array beyond SFY23.

This report builds off groundwork laid in previous evidence-building efforts by the Colorado Lab, in partnership with CDHS. Select previous reports are linked below.

Report Name	What It Covers	Dated
Strategy for the Evidence- based Aspects of the Family First Services Continuum	Recommendations for evidence-based services matched to the needs of Colorado families, opportunities for fiscal drawdown, and ongoing rigorous evaluation and continuous quality improvement.	7/1/2021

¹ Once a program has achieved a "well-supported" designation, the State may apply for a waiver of rigorous evaluation and implement only federal requirements for continuous quality improvement.



Report Name	What It Covers	Dated
Family First Rigorous Evaluation: Quarterly Report 1	Key activities made between 10/1/2021 to 12/1 2021.	12/17/2021
Family First Rigorous Evaluation: Quarterly Report 2	Key activities made between 12/1/2021 to 2/28/2022.	03/01/2022
Family First Rigorous Evaluation: Quarterly Report 3	Key activities made between 3/1/2022 to 5/31/2022.	06/01/2022

Synthesis of Evidence Designations for Each Service Approved in Colorado's Prevention Plan

Colorado's Prevention Plan proposes 10 initial program/services for inclusion and federal drawdown. The research base of programs/services included in a state's Plan must be reviewed and an evidence-based designation given by the Title IV-E Prevention Services Clearinghouse. Ratings include: does not meet criteria, promising, supported, and well-supported. If a "well-supported" designation, a waiver of rigorous evaluation can be requested and the practice can undergo a robust continuous quality improvement (CQI) process instead. If a "promising" or "supported" designation, the practice must be continuously and rigorously evaluated, with the goal of moving the program to a "well-supported" designation.

In alignment with the Colorado Lab's *Strategy for the Evidence-Based Aspects of Family First* report ("Strategy Report"), <u>Table 1</u> summarizes, for each program/service in the Plan: (a) evidence designation, (b) date the research base was last reviewed by the Clearinghouse; and (c) action required based on evidence designation.

The "last reviewed" column is included because, periodically, the Clearinghouse will re-review the research base for a given program/service if substantial new evidence is published and update the evidence designation accordingly. The Colorado Lab tracks evidence designations and dates of last reviewed in order to identify opportunities for Colorado to ask the Clearinghouse to re-review practices at the "promising" or "supported" level as new evidence is released.

ii Independent Systematic Reviews were allowed by the Family First Transition Act, pursuant to <u>PI-19-06</u>, issued by the Administration for Children and Families.



Table 1. Evidence Designations for 10 Services Named in Colorado's Prevention Plan

	Program/Service Name	Evidence Designation	Last Reviewed	Action Required
In-Home Parent Skill-Based Array	Child First	Supported May 2021		Rigorous evaluation
	Healthy Families America	Well-Supported	February 2020	CQI only
	Nurse-Family Partnership	Well-Supported	June 2019	CQI only
	Parents as Teachers	Well-Supported	June 2019	CQI only
	SafeCare	Supported	August 2020	Rigorous evaluation
Mental Health Array	Fostering Healthy Futures for Teens	Supported	Colorado independent systematic review (ISR) (December 2020)	Rigorous evaluation
	Fostering Healthy Futures for Preteens	Well-Supported	Colorado ISR (December 2020)	Rigorous evaluation
	Functional Family Therapy	Well-Supported	June 2019	CQI only
	Multisystemic Therapy	Well-Supported	February 2020	CQI only
	Parent-Child Interaction Therapy	Well-Supported	February 2020	CQI only



Prioritizing Additional Services for Inclusion in Colorado's Prevention Plan





Prioritizing Additional Services

Five services are recommended for inclusion in the next iteration(s) of the plan. The first two services have already been rated by the Clearinghouse and exist in Colorado. The remaining services have rigorous evaluations aligned to Clearinghouse standards that are either complete or will be soon.

- 1. Trauma-Focused Cognitive Behavioral Therapy
- 2. High Fidelity Wraparound
- 3. Colorado Kinship Connection and Navigation Program
- 4. Fostering Opportunities
- 5. Colorado Community Response

1. Trauma-Focused Cognitive Behavioral Therapy: Promising Practice

Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) is a clinical intervention designed for children and adolescents, ages 3 to 18, who have symptoms associated with single, multiple, and complex trauma experiences. TF-CBT is currently available in 42 Colorado counties. TF-CBT was recommended in the Colorado Lab's *Strategy Report* as a prioritized service for the state's short-term Family First strategy, to ensure wide availability of an evidence-based mental health service that targets an expansive age range and has multiple access options.

Status: A Colorado-based ongoing rigorous evaluation of TF-CBT is among the federal requirements that must be met before Colorado can consider including this service in the Prevention Plan. The Colorado Lab has selected the Center for Policy Research to serve as the research team to build evidence for TF-CBT. A final analysis plan, aligned with Clearinghouse standards for design and execution, is expected to be available by August 30, 2022.

Action: Once the analysis plan is available (anticipated: August 2022), Colorado could consider submitting an amendment to the approved Planⁱⁱⁱ for inclusion of TF-CBT.

2. High Fidelity Wraparound: Promising Practice

High Fidelity Wraparound (HFW) is a comprehensive, holistic, family-driven approach to addressing mental and behavioral health issues in children/youth, ages 4 to 26. HFW is being delivered in at least nine counties and is slated for expansion to an additional 20. The program was recommended by Colorado's American Indian/Alaska Native Family First workgroup for inclusion in the state's prevention services expansion strategy. HFW was recommended in the Colorado Lab's *Strategy Report* as a prioritized service for the state's long-term Family First strategy, to further meet the family functioning needs of families with younger children as well as bolster service options for families with older youth. Since the *Strategy Report*, a state-resourced evaluation opportunity has presented and to leverage, HFW is being moved to the short-term strategy.

Note: at the time of this report writing, the resubmission of Colorado's Prevention Plan was still under review by the Administration for Children and Families. The plan is not yet approved at the time of writing.



Status: A Colorado-based ongoing rigorous evaluation of HFW is among the federal requirements that are necessary to be met before Colorado can consider including this program in the Prevention Services Plan. The CDHS Office of Behavioral Health (OBH), through Colorado's System of Care/COACT Project Director, Christine Meyers, is exploring funding for an ongoing rigorous evaluation of HFW. Once funding is identified, the evaluation will be bid through the open solicitation process.

Action: Partner with OBH to design and conduct an ongoing rigorous evaluation of HFW, to move the practice from promising to well-supported. Once an evaluation plan is available, Colorado could consider submitting an amendment to the approved Plan for inclusion of HFW.

3. Colorado Kinship Connection and Navigation Program: Not Yet Rated

The Colorado Kinship Connection and Navigation Program (CKCN) is designed for kinship families and aims to improve caregiver well-being and support networks. CKCN is being piloted in eight counties to assess efficacy of the program on improving child permanency and safety. While CKCN was not originally included in the Colorado Lab's *Strategy Report*, the rigorous evaluation timing is opportune and this program is positioned to be one of the first nationally to be approved for the Kinship Navigation-eligible program/service domain of Family First.

Status: The Human Services Research Institute has completed a randomized controlled trial of the program and is preparing to submit results to the Administration for Children and Families (ACF) for consideration of inclusion in the Clearinghouse. Results are favorable and it is anticipated this program will receive a "well-supported" designation. The CDHS Division of Child Welfare submitted evidence for Kinship Navigator to the Clearinghouse with a request to prioritize for review. The Children's Bureau confirmed that they will prioritize adding the Kinship Navigator program to the review list but did not provide a specific timeline. Review processes in the past have taken three to 18 months, depending on where the service is at in the review queue.

Action: The Children's Bureau may reach out to the State, the program developers, and/or the evaluation team to request additional information or clarification as evidence for the CKCN program is reviewed. As needed, the Lab is available to consult on preparing the responses to meet author reporting guidelines and Clearinghouse standards.

4. Fostering Opportunities: Not Yet Rated

Fostering Opportunities is an innovative student engagement program for middle school and high school students who have experienced foster care or are at risk of out-of-home placement. The goal of the program is to help youth to be successful in school and ultimately earn a high school diploma. Fostering Opportunities is currently available in Jefferson County. While Fostering Opportunities was not originally included in the Colorado Lab's *Strategy Report*, the rigorous evaluation timing is opportune and recent legislation resourced the expansion of Fostering Opportunities to additional counties (HB 21-1374 Foster Youth Success Act).

Status: A Colorado-based randomized controlled trial is underway. The evaluation is assessing impacts on Clearinghouse eligible child well-being outcomes, specifically: behavioral and emotional functioning (e.g., suspensions) and educational achievement and attainment (e.g., on track for high school graduation). Results are expected by October 2022.



Action: Because ACF is no longer accepting independent systematic reviews (ISRs) and the Clearinghouse is only obligated to review new programs during periodic open calls, the Colorado Lab should take lead on preparing and submitting evidence for this innovative service to the Clearinghouse should results be favorable. If/once included in the Clearinghouse, Colorado should Colorado should consider submitting an amendment to the approved Plan for inclusion of Fostering Opportunities.

5. Colorado Community Response: Not Yet Rated

Colorado Community Response (CCR) is an innovative, voluntary program to prevent child maltreatment and strengthen families by targeting the protective factors of concrete supports and social connections. CCR targets caregivers are who have been reported to the state's child abuse and neglect hotline and "screened out" by county child welfare staff because the allegations do not meet the statutory definition of abuse or neglect and/or the child is not at imminent risk of harm. CCR is currently offered in 24 counties in Colorado. CCR was recommended in the Colorado Lab's *Strategy Report* as a prioritized service to maximize fiscal drawdown. As part of strategy development, the Colorado Lab conducted an ISR with a determination that CCR does not currently meet Clearinghouse standards. The rigorous research conducted to date on CCR was designed before the Clearinghouse standards were available and the study design does not fully align with Clearinghouse requirements. However, initial research does suggest that this service is beneficial to Colorado families and a new randomized controlled trial is currently underway with the potential to meet Clearinghouse standards for design and execution as a standalone service.

Status: A Colorado-based randomized controlled trial is underway. The evaluation is assessing impacts on Clearinghouse eligible child safety outcomes. Results are expected by June 2023.

Action: Because ACF is no longer accepting ISRs and the Clearinghouse is only obligated to review new programs during periodic open calls, the Colorado Lab should take lead on preparing and submitting evidence for this family strengthening service to the Clearinghouse should results be favorable and a "well-supported" designation achievable. If/once included in the Clearinghouse, Colorado should Colorado could consider submitting an amendment to the approved Plan for inclusion of CCR.



Meeting Rigorous Evaluation Requirements for Services Already in Colorado's Prevention Plan





Current Rigorous Evaluations of Services in the Plan

Rigorous evaluations are currently underway for four services already included in Colorado's Prevention Plan. These services require ongoing rigorous evaluation, as well as CQI, because they either have an evidence designation of "supported" or the service is not yet included in the Clearinghouse, but a favorable ISR was completed.

Coordinated by the Colorado Lab

- Child First
- Fostering Healthy Futures for Preteens
- Fostering Healthy Futures for Teens

Resourced by CDHS, but not coordinated by the Colorado Lab

SafeCare

Child First

Child First is a home-based, two-generation intervention provided to families with children ages 6 months through 5 years in which the child has shown developmental delays or a parent or caregiver in the family screens high for psycho-social risk. The program is delivered by a two-person team consisting of: (1) a clinician whose primary responsibly is therapeutic assessment and intervention, and (2) a care coordinator, who facilitates connecting the family with community resources. The program aims to promote healthy child and family development through combining these two complementary approaches to healing from trauma and adversity.

Child First is designated as a "supported" practice by the Clearinghouse. Colorado will participate in a multi-state randomized controlled trial conducted by MDRC with the goal of building evidence toward a "well-supported" designation. The study will assess the impact of Child First on child safety (involvement with child welfare system), child well-being (behavioral and emotional functioning), and adult well-being (mental or emotional health, substance use or misuse, economic security and housing stability).

- Evaluation Team: Meghan McCormick, MDRC
- Evaluation Timeframe: April 1, 2022 to June 30, 2026
- Step to Building Evidence: Step 5
- Key Deliverables: Annual reports will be submitted by MDRC on January 31 of each year detailing study progress, see <u>SOW</u> for more information. Outcomes report for 15-month follow-up data is due January 31, 2025. Outcomes report for the 36-month follow-up data is due January 31, 2027.

Fostering Healthy Futures for Preteens

Fostering Healthy Futures for Preteens (FHF-P) is a 30-week mentoring and skills program for children ages 9 to 11 who have current or previous child welfare involvement due to one or more adverse childhood experiences (ACEs). FHF-P uses a combination of (a) structured, one-on-one mentoring between the child and a graduate student intern who serves as a mentor; and (b) participation in group-based skills training



that proves opportunities for children to learn new skills, strengthen existing skills for effective problemsolving, resisting negative peer pressure, successfully managing anger, and achieving self-control.

FHF-P has not yet been rated by the Clearinghouse, but is rated as a "well-supported" practice by an ISR coordinated through the Colorado Lab. The ISR was submitted to the Children's Bureau for approval as part of Colorado's Prevention Plan. Dr. Heather Taussig (University of Denver) is conducting an ongoing rigorous evaluation of FHF-P, which can be used to fulfill the ongoing rigorous evaluation requirement of Family First until approval of the ISR for inclusion in the Clearinghouse and a waiver of evaluation is requested. The study is anticipated to assess the impact of FHF-P on child well-being (substance use, behavioral and emotional functioning, educational achievement and attainment).

Evaluation Team: Heather Taussig, PhD, University of Denver

Evaluation Timeframe: SFY23 to SFY24

Step to Building Evidence: Step 5 (Randomized Controlled Trial)

Key Deliverables: TBD based on evaluation plan

Fostering Healthy Futures for Teens

Fostering Healthy Futures for Teens (FHF-T) is a mentoring and skills training program for children entering or in 8th or 9th Grade with current or previous child welfare involvement due to one or more ACEs. FHF-T uses a combination of (a) one-on-one mentoring between the child and a graduate student intern who serves as a mentor; and (b) participation in a series of six teen workshops that build on a child's strengths and interests by engaging teens in visioning and goal-setting exercises, skills training, and workshops to build on their competencies and reduce adverse outcomes.

FHF-T has not yet been rated by the Clearinghouse but is rated as a "supported" practice by an ISR coordinated through the Colorado Lab. The ISR was submitted to the Children's Bureau for approval as part of Colorado's Prevention Plan. Dr. Taussig is conducting an ongoing rigorous evaluation of FHF-T, with the goal of building evidence toward a "well-supported" designation. The study is anticipated to assess the impact of FHF-T on permanency and child well-being (behavioral and emotional functioning, delinquent behavior).

Evaluation Team: Heather Taussig, PhD, University of Denver

Evaluation Timeframe: SFY23 to SFY24

Step to Building Evidence: Step 5 (Randomized Controlled Trial)

Key Deliverables: TBD on evaluation plan

SafeCare

SafeCare is an in-home behavioral parenting program that targets risk factors for maltreatment by teaching parents/caregivers skills in three areas: (1) home safety, (2) child health, and (3) parent-child or parent-infant interaction. SafeCare is designed for parents and caregivers of children birth through 5 years who are either at risk for or have a history of child neglect and/or physical abuse. The program aims to reduce child maltreatment while building long-term protective factors for families.



SafeCare is designated as a "supported" practice by the Clearinghouse. The Social Work Research Center at Colorado State University is preparing to launch a multi-year quasi-experimental design (QED) study with the goal of building evidence toward a "well-supported" designation. The study is anticipated to assess the impact of SafeCare on child well-being and adult well-being.

- Evaluation Team: Marc Winokur, PhD, Colorado State University
- Evaluation Timeframe: QED launch in SFY23; full evaluation timeline TBD
- Step to Building Evidence: Step 4 (QED)
- Key Deliverables: TBD based on evaluation plan



Building Evidence for Adaptations of Services to Better Meet Needs of Colorado Families





Building Evidence for Adaptations of Services

Adaptations of programs/services already rated by the Clearinghouse require separate evidence-building to have the adaptation rated by the Clearinghouse and subsequently included in Colorado's Prevention Plan.

The Colorado Lab has identified one program/service that should be prioritized for evidence-building of an adaptation:

Telehealth/Hybrid Multisystemic Therapy

What Counts as an Adaptation?

When reviewing the research base for programs/services to be included in the Clearinghouse, studies reviewed must all represent similar implementations of the program and use the same implementation manual or other documentation. The Clearinghouse defines adaptations as:

- Adaptations to content (e.g., adding a new component to an established program/service).
- Adaptations to modality (e.g., changing from in-person to online).

Adaptations or modifications to processes, such as accelerating program delivery (e.g., from two times/week to three times/week) over a shorter period, are acceptable.

Benefits of Building Evidence for Adaptations

Building evidence for adaptations of services/programs offers several benefits to both the state and families served, including:

- Expanding geographic reach and access of evidence-based practices, especially for rural communities.
- Promoting inclusion and equitable achievement of outcomes for racially, socially, and culturally diverse families.
- Maximizing federal fiscal drawdown of services included in the Prevention Plan while minimizing
 additional requisites necessary to draw down funds because the service already has a base for
 meeting CQI requirements and fiscal claiming.

Programs/Services Identified as Ripe for Adaptation and Evidence-building

Programs/services are ripe for adaptation when they meet three conditions: (1) already included in the Clearinghouse (ideal: with a "well-supported" designation), (2) already included in Colorado's Prevention Plan, and (c) offers one or more of the identified benefits to the state and/or families.

To date, the Colorado Lab has identified one program/service that should be prioritized for evidence-building of an adaptation based on these conditions: Telehealth/Hybrid Multisystemic Therapy (MST).



Telehealth/Hybrid Delivery of MST

MST is designated as a "well-supported" practice by the Clearinghouse. Telehealth/hybrid delivery of MST is considered an adaptation by the Clearinghouse and thus requires separate evidence-building to have the adaptation rated by the Clearinghouse. The evaluation of the telehealth/hybrid delivery of MST is associated with a Transition Fund Act-resourced contract for implementation of this innovative model.

- Evaluation Team: Dr. Suzanne Kerns, Kempe Center
- Evaluation Timeframe: March 1, 2022 to February 28, 2024
- Step to Building Evidence: Steps 1, 2, and 3
- Key Deliverables: (1) Initial Report June 30, 2023 on implementation; (2) Final Report
 March 31, 2024 on reach, implementation, and outcomes such as: arrests/re-arrests during
 treatment, out-of-home placements, if the youth is in school or working; and (3) Brief Report
 March 31, 2024 on how to approach building evidence for a hybrid/telehealth adaptation of a
 service already rated by the Clearinghouse.



Considering Long-term
Opportunities to Expand the
Service Array: Beyond SFY23





Long-term Opportunities to Expand the Service Array

As we look ahead beyond SFY23 to long-term opportunities to expand the evidence-based service array in Colorado, there are opportunities to:

- 1. Leverage existing spaces to improve the collaborative process of evidencebuilding and adding services to Colorado's Prevention Plan.
- 2. Invest in evidence-building for services positioned to advance equity and fill gaps in populations served, outcomes of interest, and geographic areas.

Leveraging Existing Spaces

To improve the collaborative process of evidence-building and adding services to Colorado's Prevention Plan, three existing spaces should be leveraged and intentionally aligned with to promote Colorado's Family First strategy. These spaces are the Child Welfare Prevention Task Group, the Colorado Child Abuse Prevention Trust Fund, and the OCYF Internal Data Team.

Child Welfare Prevention Task Group

The <u>Prevention Task Group</u> was launched in May 2021 to promote Colorado's Family First strategy and to strengthen the State's ongoing commitment to a prevention-oriented child welfare system. The Prevention Task Group is as a policy advisory group of the Child Welfare SubPAC within CDHS. Three subcommittees lead the work of the Task Group: (1) County/Regional Prevention Implementation Subcommittee, (2) State Prevention Integration Subcommittee, and (3) Data and Evaluation Prevention Subcommittee.

As illustrated in this <u>Family First Implementation and Strategy Cycle</u> infographic, there are several places that this Task Group and subcommittees touch in the Family First strategy process. Key opportunities to use this group—and how these opportunities inform the evidence-building requirements of Family First—are summarized in Table 2.

Table 2. Opportunities to Use the Prevention Task Group in Promoting Colorado's Family First Strategy

Opportunity	Who	How	Touchpoint with Rigorous Evaluation
Screen services/programs for adding to the Prevention Plan	State Prevention Integration Subcommittee	Services/Program Screening Process and accompanying triage form and decision- making rubric	Consult with Colorado Lab on: (a) fidelity adherence and CQI needs for proposed services; (b) how proposed services fill gaps in target outcomes.



Opportunity	Who	How	Touchpoint with Rigorous Evaluation
Identify opportunities for evidence-building priorities	Data & Evaluation Prevention Subcommittee	Use results of the services/program screening process	Make recommendations to the Colorado Lab on: (a) evidence-building investments necessary to expand the service array; and (b) timeline for investments
Expand the target populations included in the Candidacy definition (i.e., Phase II)	County/Regional Prevention Implementation Subcommittee	Strategies for a collaborative approach (e.g., rule workgroup) to expanding the definition and making sure target populations are feasible for Family First inclusion are in process	Expand the target populations included in the Candidacy definition (i.e., Phase II)

Colorado Child Abuse Prevention Trust Fund: The Colorado Child Abuse Prevention Trust Fund (Colorado Trust), established in statute in 1989, exists to prevent the abuse and neglect of Colorado's children. The Fund focuses on efforts to strengthen families before the first occurrence of child maltreatment. The Colorado Trust will manage and oversee the process for distribution of funds in the pool obtained through Family First fiscal drawdown.

The Colorado Lab recommends that distribution of Family First pooled funds focus on both (a) reinvestment in the Family First strategy to strengthen capacity for successful evidence-building and service implementation, and (b) new investment in community-based prevention practices not otherwise eligible for inclusion in Family First. This dual-pronged resourcing strategy is critical to creating a comprehensive service continuum inclusive of Colorado's diverse families and communities.

Focus on Family First reinvestments in:

- State Intermediary fiscal support in meeting fidelity adherence, CQI, and claiming requirements.
- Family First Fidelity Monitoring Statewide Platform to ensure sufficient technical and personnel capacity.
- Incentives for sites to ensure sites are retained through multi-year rigorous evaluations and to cultivate a positive culture in Colorado around evidence-building for Family First.



Ramp up funds to resource costs associated with training, implementation support, and assuring
fidelity to the model for services prioritized for evidence-building and without an identified and
resourced State Intermediary during the rigorous evaluation period.

Focus on community-based prevention investments in programs/services that are:

- Developed by and for Black, Indigenous, and people of color, rural, tribal, and other underserved communities (e.g., L-Grupo of La Cocina).
- Regional or county specific and not available/appropriate to scale throughout the state (e.g., place-based programming of LifeSpan Local).
- Rooted in individualized approaches not conducive to manualization (e.g., Grand Family Coalition).
- Currently community- or county-designed and place-based, but with high potential for scaling and Family First inclusion with additional implementation and evaluation support.

OCFY Internal Data Team (Morgridge Family Foundation funded)

The Morgridge Family Foundation (MFF) is resourcing an internal data team within OCYF. This team will provide internal capacity to engage in program implementation and evaluation in order to (1) build and implement a coordinated OCYF research agenda and strategy; (2) provide technical assistance to teams on program design, implementation, and evaluation; (3) advance existing OCYF programs on the evidence continuum; and(4) reduce reliance on ad hoc external evaluations that are presently limited by research institution capacity, funding, and alignment with external research priorities. This unit enacts and institutionalizes OCYF's strategic priority to strengthen data-driven decision-making.

The internal team can strengthen the evidence-building pipeline of Family First by:

- Readying services/programs for rigorous evaluation through activities such as developing logic models, theories of change, and replication materials (program design—Step 1 of Steps to Building Evidence).
- **Building capacity to track outputs and outcomes** (performance management—Step 2 of Steps to Building Evidence) as services/programs prepare for CQI and fidelity adherence requirements.
- Assessing opportunities to scale and evaluate community- and county-designed services to additional regions of Colorado (readiness and value to Colorado's Prevention Plan).
- Identifying opportunities to build evidence for adaptations of programs already rated by the Clearinghouse to make them more culturally, linguistically, and geographically responsive.
- Identifying opportunities to build evidence for applicability of programs already rated by the Clearinghouse to assess if and how well the practice will work in Colorado to drive outcomes.



Advancing Equity and Filling Gaps

To advance equity in Colorado's prevention efforts and to fill gaps in populations served, outcomes of interest, and geographic areas, evidence-building in four areas should be invested in. These areas are: (1) culturally and linguistically responsive services; (2) service access for rural and underserved areas; (3) services matched to Phase II candidacy target populations; and (4) known service array gaps in age, acuity, or outcomes (as identified the Colorado Lab's *Strategy Report*).

Table 3 provides recommendations for program/services positioned to advance equity and fill gaps with an appropriate level of evidence-building investment. The Child Welfare Prevention Task Group, the Colorado Child Abuse Prevention Trust Fund, and the OCYF Internal Data Team—in partnership with the Colorado Lab—should be activated during these evidence-building investments (see Leveraging Existing Spaces for details).

Table 3. Evidence-building Opportunities to Advance Equity and Fill Gaps

Evidence- building Area	Programs/ Services Recommended	Target Population or Gap	Clearinghouse Designation	Service Array	Exists in Colorado?	What Is Needed
Culturally and linguistically responsive services	Familias Unidas	Latinx adolescents and their families	Well- Supported	In-Home Parent Skill-based; Mental Health, Substance Use	No	Evidence- building of program applicability
	Family Spirit	American Indian Mothers (ages 14 to 24)	Promising	In-Home Parent Skill-based	No	Family Spirit
	Strong African American Families	African American youth (ages 10 to 14) and caregivers	Planned for review (not yet rated)	Mental Health, Substance Use	No	Evidence- building of program applicability (assuming a "well- supported" designation
Service access for rural and underserved areas	Hybrid (Telehealth) Adaptations of Services					Collaborating with underserved areas to identify programs and match adaptations to their needs and goals



Evidence- building Area	Programs/ Services Recommended	Target Population or Gap	Clearinghouse Designation	Service Array	Exists in Colorado?	What Is Needed
Services matched to	Incredible Years - School Age		Promising	Mental Health	Yes	Rigorous evaluation
Phase II candidacy target populations	Incredible Years – Toddler Basic		Promising	Mental Health	Yes	towards a well- supported rating
Known service gaps	Brief Strategic Family Therapy Gap filled: lack of services for older children/youth in in-home parenting, gaps in family functioning track of mental health array for children under		Well- Supported	In-home Parent Skill-based; Mental Health; Substance Use	No	Include in Prevention Plan + Waiver of Evaluation
	Trust-Based Relational Intervention — Caregiver Training Gap filled: Iimited services for older children/youth in mental health array, gaps in family functioning track of mental health array for children under 11		Promising	Mental Health	Yes	Rigorous evaluation towards a well- supported rating



Conclusion

This annual report provides considerations and recommendations for advancing Colorado's Family First strategy and aligning prevention efforts cross-system, in common commitment to Colorado's children, youth, and families. The Colorado Lab is prepared to provide coaching and consultation for activation of identified priorities, as part of the Lab's position as the coordinator of rigorous evaluation for Family First on behalf of the State of Colorado.