

Ask the Question: Ask, Link, Collaborate Technical Assistance Program

Data Collection Plan

In order to evaluate outcomes from the overall program and the efforts of each participating organization, it is necessary to track a variety of data points throughout the program. Doing this in a thoughtful, strategic and meaningful way will increase the likelihood of future funding to expand efforts statewide and also to enhance efforts on an organizational level. The results and data analysis from the program will be shared with all participating organizations so it can be used by organizations in their own funding efforts.

*****No protected, identifying information on patients/clients will be collected.*****



Data and information will be collected from each organization using 4 methods:

2 Focus Groups—facilitated by the Division of Community Based Military Programs; attended by organization staff during the Orientation phase and at the conclusion of the program. A focus group will be conducted with staff from each organization during the orientation and evaluation phases. Data will be captured for the purpose of a pre-program and post-program evaluation. Specific and open-ended questions will be asked. Focus on agency operational preparedness—policies, procedures & processes. Determination of whether program resulted in positive behavior changes.

2 Staff Surveys—Organization staff will be asked to complete individual staff surveys (pre-program and post-program) to evaluate level of military cultural competency, knowledge, and level of confidence to serve the identified population. Measure and compare pre- and resulting post-program level of knowledge and confidence in effectively serving SMVF. Surveys will be available to complete and submit online.

Training Surveys— All staff who attend or participate in program or recommended trainings will be asked to complete a post-training survey to evaluate level of knowledge gained and quality of training. The program ATQ training survey will be conducted by this program. Other survey trainings will be conducted, and results provided, by Star Behavioral Health Providers and Psych/Armor (external training providers).

Quarterly Program Report—the organization's Liaison will complete quarterly program reports that will collect, at a minimum, data such as the total hours of staff training in the quarter, total number of patients/clients identified as SMVF in the quarter, activities the organization has undertaken related to the program, success stories, technical assistance needs, and any other variables the organization's team had identified as important in the organization's plan.

For more detailed information as to the intended outcomes of the program, refer to the following Program Logic Model on the following pages.

ATQ PROGRAM LOGIC MODEL

Key

JMTF – Joint Military Task Force

DCBMP – Division of Community Based Military Programs

SMVF – Service members, Veterans & their Families

Practice=Provider=Agency=Organization

ATQ – Ask the Question

MCC—Military Cultural Competency

	ACTIVITIES	OUTPUTS	OUTCOMES	EVALUATION
PHASE 1: PREPARATION & ENROLLMENT Estimated Length: 3 months	<p>A. Conduct outreach in order to engage up to 40 eligible practices (provider agencies) in the Ask the Question: Ask, Link, Collaborate program. *Use of printed materials.</p> <p>B. Training development— Vendor will be secured to produce training videos. Guest speakers will be identified and engaged in the training development. Completed July 2021</p> <p>C. Vendor will be secured to evaluate data collected throughout program.</p> <p>D. Enrolled organizations will complete a Pre-Program Survey during participation in an Orientation Focus Group.</p>	<ul style="list-style-type: none"> • Up to 40 MOUs signed with participating agencies • 1 Liaison at each practice identified as the point of contact for the program • Up to 40 completed Focus Groups • A series of training videos will be created that can be promoted or used on a stand-alone basis to spread awareness and can be used as part of the live training for providers. 	<p>Short Term:</p> <ol style="list-style-type: none"> 1. Leadership of each agency will be oriented to a benefits analysis of creating an agency infrastructure to enhance the services provided to SMVF. 2. Provider agencies will build capacity to serve SMVF by enrolling and identifying a Liaison. 3. Providers will identify an internal team of staff who will participate in the 12-month pilot program and champion the changes. 4. Level of military cultural competence and operational preparedness will be identified for each participating agency during an Orientation Focus Group. 	<ul style="list-style-type: none"> • # of Providers to enter into contract to participate in the program • Geographic areas covered by contracted Providers—will strive for representation in every county/region • Participating agencies will demonstrate a higher level of military cultural competency and operational preparedness after 12 months of participation. Will evaluate comparing Pre and Post-Program Focus Group Surveys at conclusion of program.

	ACTIVITIES	OUTPUTS	OUTCOMES	EVALUATION
PHASE 2: Military Cultural Competency & ATQ Training Estimated Length: 1 month	<p>A. Staff at each organization will complete an online Pre-Program Survey to measure level of knowledge & confidence in effectively serving SMVF.</p> <p>B. Provider Liaisons will facilitate the promotion of the program’s training to the agency staff and ensure staff from all appropriate departments enroll in the training.</p> <p>C. DCBMP will make funds available to participating practices for program implementation and maintenance through an application process.</p> <p>D. ATQ trainings will be provided to all agency staff participating in the program (four virtual trainings will be offered).</p> <p>E. Provider staff will be provided information about, and encouraged to attend, additional and external military cultural competency (MCC) trainings related to their professional roles (Star Behavioral Providers or through the NH Governor’s Challenge State Training Portal provided by Psych/Armor).</p> <p>F. Staff who attend trainings (ATQ & external MCC) will complete Pre and Post Training Survey.</p> <p>G. Provider Liaison will track & report total hours of staff training on a quarterly basis.</p> <p>H. Post-ATQ training: Provider Liaisons will facilitate an internal meeting with trained staff to collect ideas for an agency plan for implementing ATQ and operationalizing it within the practice (this plan will include elements of how to collect helpful data identifying trends within the SMVF population).</p>	<ul style="list-style-type: none"> • 3 ATQ trainings of up to 3 hours/each will be provided offering all staff an opportunity to find a time that works for their schedule. • Each practice will hold a meeting with internal staff to begin development of an implementation plan. • Funds will be provided to meet eligible implementation needs identified by practices through an application process. • Report of total staff training hours from each practice quarterly to include ATQ training and external MCC training. • Quarterly reports from SBHP and Psych/Armor re: training outcomes. 	<p>Short Term:</p> <ol style="list-style-type: none"> 1. Liaisons will be trained & equipped to transfer knowledge to other staff at the agency who were not able to attend the training. 2. Increased knowledge among staff regarding the needs of SMVF community related to military culture. 3. Increased knowledge among staff regarding the importance of how to ask the question, how to use the information to link patients to effective treatment and how/when to collaborate with partners. 4. Increased level of confidence among staff to address the needs of SMVF. 5. Organizations will have a plan for how to collect valid data that will allow for evaluation of statewide trends. <p>Long Term:</p> <ol style="list-style-type: none"> 6. Increased military cultural competence among staff. 	<ul style="list-style-type: none"> • # of total staff training hours (ATQ & MCC) • # of staff attending the ATQ trainings • # provider practices that complete this training phase of the program • Geographic areas represented by staff attending the trainings • Level of participant knowledge related to military culture as demonstrated through Post Training Surveys (surveys conducted by SBHP, Psych/Armor and program for ATQ training) • Level of staff confidence as demonstrated through Pre & Post Program Surveys completed by staff at each organization.

	ACTIVITIES	OUTPUTS	OUTCOMES	EVALUATION
PHASE 3: IMPLEMENTATION Estimated Length: 6 months	<p>A. DCBMP will provide consultation to each practice to assist in development of agency infrastructure to implement and operationalize ATQ within the practice and also to ensure effective data collection is being performed that is consistent of statewide measures.</p> <p>B. Funds will continue to be available to participating practices for program implementation and maintenance through an application process.</p> <p>C. DCBMP will assess needs of each practice and develop plan to meet needs on a statewide and ongoing basis. This recommendation will be shared with the JMTF.</p> <p>D. Participating practices will implement customized data collection plans that are consistent with desired statewide measures. <ul style="list-style-type: none"> ○ Provider Liaison will submit quarterly program reports outlining variables identified in data collection plan. </p> <p>E. Provider staff will continue to attend MCC training as-needed and as available.</p> <p>F. Provider Liaison will continue to report total staff training hours quarterly.</p>	<ul style="list-style-type: none"> ● Intake procedures will be modified at each practice to Ask the Question ● Funds will be provided to meet eligible implementation needs identified by practices through an application process. ● Participating practices will devote operational resources to build & maintain infrastructure. ● Quarterly reports from each participating practice including total # staff training hours. ● Pre & Post Training Surveys completed by all training participants attending SBHP, Psych/Armor Portal or ATQ trainings. 	<p>Short Term:</p> <ol style="list-style-type: none"> 1. All participating practices will identify SMVF at the point of intake. 2. Participating practices will increase knowledge and value regarding helpful data collection practices for statewide evaluation and programming. 3. Increased knowledge among staff regarding the needs of SMVF community related to military culture. 4. Increased level of confidence among staff to address the needs of SMVF. 5. Enhanced understanding of how to collect and utilize accurate data will result in effective & consistent data collection methods implemented across participating organizations. <p>Long Term:</p> <ol style="list-style-type: none"> 6. Provider practices will demonstrate commitment to building and maintaining an effective internal infrastructure aimed at providing quality services to SMVF. 7. Increased military cultural competence among staff. 	<ul style="list-style-type: none"> ● Average # per month of SMVF seen at each practice ● Trends of SMVF seeking treatment ● Intercept assessment to identify gaps in services ● # of total staff training hours ● Geographic areas represented by staff attending the trainings ● Level of participant knowledge related to military culture as demonstrated through Post Training Surveys ● Level of staff confidence as demonstrated through Pre & Post Program Surveys [Staff at each participating organization will be surveyed]

	ACTIVITIES	OUTPUTS	OUTCOMES	EVALUATION
<p style="text-align: center;">PHASE 4: EVALUATION & RECOGNITION Estimated Length: 2 months</p>	<p>A. Participating practices will continue to implement data collection plan.</p> <ul style="list-style-type: none"> ○ Provider Liaison will continue to submit quarterly program reports outlining variables identified in data collection plan until conclusion of program. ○ Second set of data will be collected 6-months post program. ○ Third set of data will be collected 12-months post program. <p>B. Vendor will conduct assessment and evaluation of data/trends and make recommendations for future data revisions.</p> <p>C. Provider staff will continue to attend MCC training as-needed and as available.</p> <p>D. Provider Liaison will continue to report total staff training hours through the end of the program.</p> <p>E. Organizations will complete Post-Program Survey during Phase 4 Focus Groups.</p> <p>F. Staff at each organization will complete an online Post-Program Survey to measure level of knowledge & confidence in effectively serving SMVF.</p> <p>G. DMAVS will use criteria identified throughout program to develop a rubric identifying the components of a Veteran-Friendly Service Provider.</p> <p>H. Practices that meet all program requirements for program completion will be recognized by DMAVS as a NH Veteran-Friendly Service Provider.</p>	<ul style="list-style-type: none"> ● Quarterly report from each participating practice. ● Monthly data analysis report will be available no later than 3 months post-program completion. ● Final data analysis report will be in a format that can be shared on organizations' websites. ● Pre & Post Training Surveys completed by all training participants (ATQ & external MCC). ● Report of total staff training hours from each practice quarterly to include ATQ training and external MCC training. ● Up to 40 Post-Program Surveys conducted through Focus Groups ● Individual, Post-Program Staff Surveys completed online by staff at each organization. ● Rubric of criteria to be recognized as a NH Veteran-Friendly Service Providers 	<p>Short Term:</p> <ol style="list-style-type: none"> 1. Criteria of Veteran-Friendly Service Providers will be clear & identifiable. 2. Increased knowledge among staff regarding the needs of SMVF community related to military culture. 3. Increased level of confidence among staff to address the needs of SMVF. 4. A basis for statewide, consistent data collection will be established. 5. Foundation for the NH Veteran-Friendly Service Provider program will be established. <p>Long Term:</p> <ol style="list-style-type: none"> 6. Data will provide valuable information regarding the service needs, substance use risk of SMVF. 7. Greater participation by providers in statewide efforts to benefit SMVF navigating healthcare systems. 8. Increased military cultural competence among staff. 9. Increased confidence of provider staff to address needs of SMVF. 10. A model for Veteran-Friendly Service Providers will be established. 	<ul style="list-style-type: none"> ● Review of case studies to identify successes and failures (lived experience testimonies). ● # of total staff training hours ● Geographic areas represented by staff attending the trainings ● Level of participant knowledge related to military culture as demonstrated through Post Training Surveys ● Level of staff confidence as demonstrated through Pre & Post program Surveys [Staff at each participating organization will be surveyed] ● Staff at participating agencies will demonstrate an average increase in cultural competency at conclusion of 12 months as shown through Post-Training surveys. ● Participating agencies will demonstrate a higher level of military cultural competency and operational preparedness after 12 months of participation. Will evaluate comparing Pre and Post-Program Focus Group Surveys.