

# Evidenced Based Assessments- Orientation Webinar



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Michelle Miller, PhD, LCSW, LCPC

Jessica Mays-Jones, LPC

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# Introduction of Project Coordinator and Welcome Remarks

Michelle Miller, PhD, LCSW, LCPC

- **History of Projects**
- **Funding**
- **Commitment**
  - Senior Leaders
  - Clinicians



# Introduction of Instructor




Jessica Mays-Jones, LPC



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# Learning Goals: Administration, Scoring, Interpretation and Write Up

- Trauma Symptom Checklist for Children 
- Trauma Symptom Checklist for Young Children 
- Child Sexual Behavior Inventory 
- Child and Adolescent Trauma Screen (event portion)

# Project Description

- The focus of the project is to train clinicians in the use of standardized assessments to inform the delivery of mental health services to abused and/or traumatized children.
- Clinicians participating in the project will receive training and consultation assistance on the use of the TSCC, TSCYC, CSBI, and CATS (events portion).



## Project Description cont.

- The assessment measures (TSCC, TSCYC, and CSBI) will be available via the internet through a secure, HIPAA compliant link associated with the test publisher (PAR, Inc.)—**iConnect**.
- The CATS is in the public domain and will be made available to participants via the Moodle platform.

**NOTE:** The training phase is followed by a consultation phase focusing on assessments of actual clients completed by learners. Both are required since this is a skill development project, and skills are not acquired well via lecture only.



# Project Preparations

Learners will be randomly assigned to either a live interactive webinar, video training series or an in-person training

- In-person travel costs are assumed by the state/learner's agency. In-person trainings will be 9 hours.

For all learners, the consultation phase will be completed via live video-conference interaction.

- Clinicians are not required to purchase equipment or software for the consultation phase.



# Why Assessment?

**LETS START TREATMENT NOW!**



## KNEE SURGERY





# NCA Mental Health Standard

- C. Evidence-supported trauma-focused mental health services for the child client are consistently available and include:
- a. Trauma-specific assessment including traumatic events and abuse-related trauma symptoms,
  - b. Use of standardized assessment measures initially to inform treatment, and periodically to assess progress and outcome,
  - c. Individualized treatment plan based on assessments that are periodically re-assessed,
  - d. Individualized evidence supported treatment appropriate for the child clients and other family members,
  - e. Child and caregiver engagement in treatment,
  - f. Referral to other community services as needed.

(pp. 29-30)



# Training Within the Mental Health Field

Unfortunately, the bad news in terms of individuals in the job market means there are few trained people to hire.

- Graduate schools in psychology, counseling, social work and family therapy do not teach or train about evidence-based treatment or evidence-based assessment.



# Suicide Endorsement (Outpatient CACs)

- 34% of children experienced thoughts of suicide
  - 45% when both child and parent report were available
- Parent-Child Agreement
  - 12% agreed that present
  - 54% agreed that NOT present
  - 33% did not agree though present by one report
- Age
  - 14% (ages 3-5),
  - 81% (ages 6-12), and
  - 32% (ages 13-17)



# Evidenced Based Assessment Training Schedule

- A significant commitment for clinicians
- A workshop of the assessments will not result in mastery of skills
  - A learning collaborative model is necessary – training plus consultation
  - Similar to coaching football or learning to play a musical instrument



# Training Phase Content

- Module 1: Orientation and Differential Diagnosis
- Module 2: Test and Measurement
- Module 3: Ethics and Legal Issues
- Module 4: Child and Adolescent Trauma Screen (CATS)
- Module 5: Trauma Symptom Checklist for Children (TSCC)
- Module 6: Trauma Symptom Checklist for Young Children (TSCYC)
- Module 7: Child Sexual Behavior Inventory (CSBI)
- Module 8: Matching Symptoms
- Module 9: TSCC-Screening Form
- Module 10: TSCYC-Screening Form



# Randomization to Training Type

- Clinicians will be randomized to **one of three** training types:
  - Live In-person Training
  - Live Interactive Webinar
  - Video Training Series (Pre-Recorded)



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# In-Person Training

- Instruction on the 10 modules
- 9 hours of instruction delivered in one day



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# Training Schedule For Live Interactive Webinar

## Day 1:

- Introduction and Differential Diagnosis
- Test and Measurement
- Ethics and Legal Issues

## Day 2:

- Child and Adolescent Trauma Screen (CATS)
- Trauma Symptom Checklist for Children (TSCC)
- Trauma Symptom Checklist for Young Children (TSCYC)

## Day 3:

- Child Sexual Behavior Inventory (CSBI)
- Matching Symptoms
- TSCC-Screening Form
- TSCYC-Screening Form
- Case Study





# Video Training Series

- The Video Training Series modules will be accessed on NCA Engage

<https://engage.nationalchildrensalliance.org/>

- Clinicians will be given approximately 30 days to complete the Video Training Series. All modules must be completed the Friday BEFORE the 1<sup>st</sup> consultation call. The trainer will work with each cohort on the schedule.



# NCA Engage: Video Training Series

- This training requires a login to NCA Engage. For clinicians affiliated with a CAC, the CAC Director can add them to the CAC's Account. Please see the "Getting Started" tab on the NCA Engage webpage.
- If clinicians are not with a CAC, contact Michelle Miller [mmiller@nca-online.org](mailto:mmiller@nca-online.org) for an Organizational ID which is required to register for an account.
- Once the clinician has a login, the NCA Engage Administrator will add the training modules to the clinicians Dashboard. Click on "Dashboard" to access the EBA Video Training Series



# Consultation Phase

- 10 group consultation calls.
- Group consultation calls are 90 minutes for 10 weeks.
- Must participate in 8 of 10 group consultation calls.
- Three 30-minute individual consultation calls (scheduled through 10to8) with clinician and trainer.
- Must present 3 **de-identified** cases over the course of 3 group consultation calls (i.e. not all on one day).



## Consultation Phase cont.

- **De-identified** case presentations must be for children ages 8 to 12.
- Written reports can be within the format of an existing agency document; however, the content will conform to a style of integration of findings to describe the child – NOT merely a report of test scores.
- Trainer will email supervisors participation and presentation log.



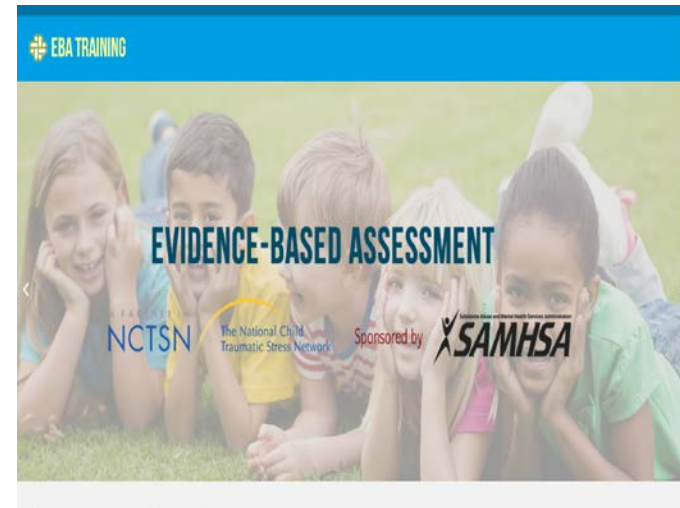
# Learner Requirements

- Attestation
- Confidentiality Contract
- Pre-training survey
- Attend training (In-Person, 3 Interactive Webinar Trainings using **Zoom** video-conferencing platform or Video Training Series)
- Participate in 8 of 10 group consultation calls
- Present three cases (children [ages 8-12] plus caregivers) where all three measures (TSCC, TSCYC, and CSBI, and CATS) are administered, scored, interpreted, and integrated into a written report (all reviewed by trainer)
- Pass 10 quizzes (open book/notes) with a score of 80% after no more than 3 attempts. NOTE: Clinicians can wait until consultation call phase to complete the quizzes.
- Post-training survey



# Evidenced Based Assessment Training Resources

- <https://childabusetraining.org/training/>



- Videoconferencing Platform
- <https://10to8.com>



# Assessment Administration (TSCC, TSCYC, CSBI)



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LEARN MORE NOT REGISTERED?

## PARiConnect™

Welcome to the new platform!

[Forgot password?](#)

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# Advisory Board

## Professional and Stakeholders

- Both may sign in and observe the training and/or consultation
- Stakeholders may be adults abused as children or parents of abused children
- They will contact trainer and advise when they “enter and leave” the training





# What Happens Next - Clinicians

- Email from Michelle Miller regarding the type of training you have been assigned (In-Person, Live Interactive Webinar or Video Training Series)
- Email from Master Trainer regarding training dates and consultation call schedule
- Email from webmaster Dr. Jongpil Cheon with EBA website log in information
- Clinicians assigned to the Video Training Series you will need to create an NCA Engage account if you do not already have one. If you are not with a CAC please contact Michelle Miller [mmiller@nca-online.org](mailto:mmiller@nca-online.org) for required organizational ID



# What Happens Next - Clinicians

- Email Invitation from PAR iConnect to set up account
- Email from Master Trainer with Pre-Training Survey



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# What Happens Next – Senior Leaders

- Encourage clinicians to begin scheduling clients immediately so that they have clients at the start of the consultation phase.
- Assist clinicians in schedule adjustment to accommodate training and consultation phase
- Provide support for the clinicians during their participation of the project
- Explore funding streams for assessment upon completion of the EBA project



# Train-The-Trainer

## **Eligibility:**

- Completed training
- Assisted another trainer
- Trained a cohort under supervision of trainer

## **Process:**

- Complete an application and submit to the Training Committee (Wherry, Miller, Mackey & Trainer)



# Contact Information

- Michelle Miller, PhD., Project Coordinator, Mental Health, NCA [mmiller@nca-online.org](mailto:mmiller@nca-online.org)
- Jessica Mays-Jones LPC, [Mays.jessicac@gmail.com](mailto:Mays.jessicac@gmail.com)





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