Cincinnati Children's
change the outcome

Every Child Succeeds

Division Photo

F. Putnam, J. Van Ginkel, R. Ammerman.

Division Data Summary

Research and Training Details

Number of Faculty	1
Number of Joint Appointment Faculty	3
Direct Annual Grant Support	$301,063
Peer Reviewed Publications	1

Faculty Members

Judith B. Van Ginkel, PhD, Field Service Professor

Joint Appointment Faculty Members

Robert Ammerman, PhD, Professor
Psychology
Causes and prevention of child abuse and neglect, prevention of behavioral and emotional problems in children, family adaptation to childhood disability and chronic illness, and adolescent drug and alcohol abuse.

Thomas DeWitt, MD, Professor
General & Community Pediatrics
Faculty development and community-based education and research.

Frank Putnam, MD, Professor
The Mayerson Center for Safe and Healthy Children
Child abuse prevention, evaluation and treatment.

Significant Accomplishments in FY08

Quality Improvement

Quality improvement (QI) has become an essential component of effective healthcare. In early childhood prevention programs, however, QI is in its earliest stages. Every Child Succeeds, a prevention program for first time, at risk mothers and their children, has taken a leadership role in developing and evaluating QI approaches for home visitation. Every Child Succeeds has constructed a state of the art data collection and management system which is the foundation of QI efforts. This web-based system, called eECS, is a data repository for 16 home visitation agencies across seven counties and two states. Over 100 home visitors record outcomes and related data on families participating in Every Child Succeeds. This information in turn is summarized in charts and tables that are used to direct services, focus supervision, and inform program administration about performance effectiveness. Home visitors, agency managers, and administration work together to identify areas in need of improvement, and use the strategies that have been developed at CCHMC to study the impact of new strategies designed to enhance efficiency and improve outcomes for children and families. Taken together, the QI program in Every Child Succeeds is an innovative approach to prevention that has emerged as a model for the field.

Literacy

Even though brain research is replete with evidence demonstrating that brain stimulation in the earliest weeks and months of life is vital to lifetime success and even though we know that the first three years of life are more critical to the development of human capacity than any three that follow, there are few materials and/or tested strategies to address the emerging literacy needs of young children 0-3.

Early literacy development is an important precursor to school readiness. In July 2007 Every Child Succeeds partnered with the National Center for Family Literacy (NCFL), the Toyota Motor Manufacturing North America Inc. and the Charles H. Dater Foundation to address this need by launching the three year *Bringing Literacy Home* program.

Elements of this program include: creating a literacy curriculum with weekly lesson plans and supporting materials that starts at birth and continues to age three; designing and implementing a two-day language and literacy training module for home visitors; initiating a demonstration pilot with two provider agencies to test and refine the program curriculum and strategies and initiating a rigorous evaluation to assess effectiveness and fidelity to the model.

At the conclusion of the pilot, half of the ECS home visitors will be trained; the other half will serve as a comparison group to allow us to measure the impact of the new curriculum. At the end of three years, our goal is to have a proven curriculum and teaching strategies that effectively build language and literacy skills in our infants and toddlers. Further, if we can demonstrate that our curriculum and strategy makes a difference, we believe that there is a market for the materials beyond Every Child Succeeds and the home visitation field.

Maternal Depression

Maternal depression can be a devastating condition that adversely affects parents and children. For first-time, at risk mothers who participate in Every Child Succeeds, depression has been identified as a significant problem, affecting 44% of those receiving services. Although home visitation programs around the county recognize that maternal depression is a significant concern, no evidence-based strategy to help mothers and their families has been developed. In response, we created the Maternal Depression Treatment Program (MDTP). The MDTP was established with the support of a grant from the Health Foundation of Greater Cincinnati, and In-Home Cognitive Behavioral Therapy (IH-CBT) was developed to address maternal depression. IH-CBT is an evidence-based treatment for depression that is adapted for use with new mothers in Every Child Succeeds. Delivered in the home in order to overcome one of the primary barriers to receiving effective treatment, IH-CBT is closely integrated with ongoing home visitation. In the MDTP, all mothers in Every Child Succeeds are screened for depressive symptoms. Those with clinically elevated symptom levels are given a more thorough assessment, followed by delivery of IH-CBT. Currently, through a grant from the National Institute of Mental Health, we are conducting a clinical trial to examine the efficacy of IH-CBT in comparison to treatments received in the community. Maternal depression has emerged as a primary focus of the clinical and scientific efforts of Every Child Succeeds, and we are in the forefront of informing the next generation of home visitation strategies.

Significant Publications in FY08

Ammerman, R.T., Putnam, F.W., Kopke, J.E., Gannon, T.A., Short, J.A., Van Ginkel, J.B., Clark, M.J., Carrozza, M.A., & Spector, A.R. (2007). Development and implementation of a quality assurance infrastructure in a multisite home visitation program in Ohio and Kentucky. Journal of Prevention and Intervention in the Community, 34, 89-107.

SIGNIFICANCE: This article describes the design, implementation, and impact of a quality assurance program for a child abuse prevention program. It is the first published description of the application of QA methods, originally developed for healthcare and manufacturing, in a prevention context.

Division Collaboration

Collaboration with Child Policy Research Center

Collaborating Faculty: Edward Donovan, M.D.

Ongoing efforts to describe and understand the impact of home visitation on infant mortality.

Collaboration with Center for Health Policy and Clinical Effectiveness

Collaborating Faculty: K.J. Phelan, M.D.

Injury prevention in young children.

Mentions in Consumer Media

- The noteworthy successes of Every Child Succeeds Cincinnati Enquirer Editorial , Newspaper

Division Publications

1. Ammerman RT, Putnam FW, Kopke JE, Gannon TA, Short JA, Van Ginkel JB, Clark MJ, Carrozza MA, Spector AR. **"Development and implementation of a quality assurance infrastructure in a multisite home visitation program in Ohio and Kentucky."** In: J Galano, ed. *The Healthy Families America initiative : integrating research, theory and practice.* [New York]: Haworth Press; 2007: 89-107.

Grants, Contracts, and Industry Agreements

Grant and Contract Awards		Annual Direct / Project Period Direct
Ammerman, R		
Treatment of Depression of Mothers in Home Visitation National Institutes of Health R34 MH 073867	06/01/06 - 05/31/09	$131,085 / $405,000
Increasing Retention in Home Visitation Health Resources and Services Administration R40 MC 06632	01/01/06 - 12/31/09	$169,978 / $680,359
	Current Year Direct	**$301,063**