



Pathways of Care study

Pathways of Care is a representative, prospective longitudinal study of children and young people aged 0–17 years entering out-of-home care (OOHC) for the first time on final Children’s Court orders. This Research Note describes the processes undertaken and the major results from the analysis of the quality of the data as at 31 August 2011. It focuses on the three most important quality measures for a longitudinal study: a representative sample, accurate measurement of the parameters of interest and comparability over time.

Recruitment to the study began in February 2011 and, as at 31 August 2011, 978 children aged 0-35 months had entered OOHC for the first time between May 2010 and June 2011 and were potentially eligible for the study pending a final order from the Children’s Court. Of the potentially eligible children, 442 had a final order from the Children’s Court and were eligible for the study. Regional staff had verified 201 eligible children’s records for accuracy, 105 children had been recruited to the study and 53 interviews had been completed with their carers.

Recruitment, fieldwork and data collection process

The overall recruitment process described in detail in other Research Notes includes identifying potentially eligible children through Key Information Directory System (KiDS), sending information on currently eligible children to the regions for verification and updating, receiving confirmation from the regions that the verification has occurred, sending letters to the cares of the selected child to invite them to participate in the study, and then scheduling and conducting the interview using Computer Assisted Personal Interviewing (CAPI) and Computer Assisted Self Interviewing (CASI). Table 1 shows key characteristics of the children aged 0-35 months who were potentially eligible, currently eligible, verified by the region, recruited to the study and interviewed as at 31 August 2011.

Table 1: Key characteristics of the eligible, verified, recruited and interviewed sample (children 0-35 months)

Characteristics	Potentially eligible		Currently eligible		Verified by region		Recruited to study		Interview completed		
	n	%	n	%	n	%	n	%	n	%	
Community Services Regions	Metro Central	142	14.5	78	17.7	42	20.9	18	17.1	10	18.9
	Metro West	150	15.3	73	17.5	29	14.4	16	15.2	10	18.9
	Metro South West	124	12.7	36	8.1	12	6.0	6	5.7	5	9.4
	Southern	88	9.0	33	17.5	15	7.5	9	8.6	5	9.4
	Hunter Central Coast	191	19.5	93	21.0	38	18.9	20	19.1	7	13.2
	Northern	133	13.6	71	16.1	36	17.9	22	21.0	12	22.7
	Western	150	15.3	58	13.1	29	14.4	14	13.3	4	7.5
Sex of child*	Male	514	52.6	219	49.5	101	50.3	48	45.7	17	32.1
	Female	464	47.4	223	50.5	100	49.7	57	54.3	36	67.9
Aboriginality of child	Aboriginal	361	36.9	173	39.1	80	39.8	39	37.1	16	30.2
	Non-Aboriginal	617	63.1	269	60.9	121	60.2	66	62.9	37	69.8
Placement type	Foster Care	549	56.1	216	48.9	88	43.8	48	44.8	25	47.2
	Kinship Care	429	43.9	226	51.1	113	56.2	58	55.2	28	52.8
Case management	Community Services	811	82.9	371	83.9	161	82.6	86	82.7	46	86.8
	Non-government organisation	167	17.1	71	16.1	34	17.4	18	17.3	7	13.2
Total children	978		442		201		105		53		

Notes: Potentially eligible sample includes children aged 0-3 years who entered OOHC for the first time between May 2010 and June 2011 inclusive.

Source: *Pathways of Care study* – Recruitment database

Recruitment quality parameters

Ensuring that the sample is representative of the population relies on a good sample frame and a high rate of participation. Measurement is undertaken by comparing the sample and population profiles and monitoring the response rates.

Eligibility Eligibility for the study is dependent on two criteria, first ever entry into OOHC and final Children's Court orders being made. It is therefore important to examine both the numbers of children who enter care for the first time for which there are final Children's Court orders (Table 1) and the time between children first entering care and final orders. The average time between entering care and receiving a final order is 7.1 months for all children aged 0-35 months, who entered care for the first time between May 2010 and August 2010, and who obtained final orders by August 2011. Children in this group had at least a 12 month period in which they could receive final orders. Average times for the regions differ by ± 1 month.

Verification For recruiting children into the study and contacting carers, contact details are the most critical. Again to assess the value of the verification process for these key recruitment items (child and carers names, carers address and phone numbers) the proportion of records updated were examined by region, placement type and case management. Using data for the 201 verified records for children aged 0-35 months 23.0% had at least one of the key recruitment items updated on KiDS as part of verification process. The percentage of records that had at least one of the key recruitment items updated ranged from 18.5% to 32.4 % by region.

Timeliness and participation In order to assess the timeliness of the recruitment processes, dates when tasks were completed have also been collected. Using the 105 children who were recruited to the study as at 31 August 2011 the mean number of days for data processing was 13.9 days, verification at regions was 17.6 days, contacting carers, scheduling and completing interviewing was 37.6 days. Thus the total time taken to complete these tasks was around 2 months, with little variation by region or placement type.

In order to monitor acceptance and participation in the study, response rates by key characteristics have been calculated. As shown in Table 2, based on the 124 carers of children aged 0-35 months who had been contacted to participate in the study as at 31 August 2011, 84.7% agreed to participate.

Table 2: Percentage of carer's agreeing to participate in the study.

Characteristics	Response rates %	
CS Region	Metro Central	69.2
	Metro West	94.1
	Metro South West	100.0
	Southern	81.8
	Hunter Central Coast	83.3
	Northern	91.7
	Western	87.5
Aboriginality of child	Aboriginal	84.8
	Non-Aboriginal	84.6
Placement Type	Foster Care	94.0
	Kinship Care	78.4
Case Management	Community Services	83.5
	Non-government organisations	90.0
Overall	84.7	

Note: Response rates calculated from the 124 carers who had been contacted to request participation in the study as at 31 August 2011.

Source: *Pathways of Care study – Recruitment database*

Field work and data collection quality parameters

Ensuring that the data being collected are accurate and comparable over time is achieved by having valid and reliable questions, well trained staff, concise collection tools and appropriate, well-documented processes. Measurement is undertaken by monitoring the collection process including time taken, validating a proportion of the surveys, and examining question responses; in particular the proportion of 'don't know' or 'refused' responses.

Interview times A benefit of computer assisted interviewing (CAPI and CASI) is that data are entered directly into the computer and times taken for the overall interview, as well as individual components, are also collected. Thus the total



average time in the home was 119 minutes (11 minutes for introductions, scanning, closing the interview etc.), 108.0 minutes for the CAPI and CASI components and the Ages and Stages Questionnaires (ASQ) module. The two main parameters that could impact on interviewing times, because of different numbers of questions and skipping patterns, are placement type and the child's age. With regard to placement type, average interview times were very similar for kinship carers (107.7 mins) and for foster carers (108.3 mins). With regard to the child's age, average interview times increased with age: 10-12 months (99.9 mins), 13-23 months (109.3 mins) and 24 months and over (118.5 mins).

Validation In order to monitor the quality of the interviews being conducted with carers, the data collection agency conducts validation phone calls. The validations are done to ensure that data are collected accurately and that interviewers are administering the questionnaire professionally. Validation phone calls are made soon after the main interview. From the 53 interviews, 20 validations have been completed. To date all of the carers who were validated reported that the interviewer was courteous and professional at all times. As part of the validation process carers were also asked two additional questions: 'What did you think of the questions?' and 'How did you find the experience?'. This was done to identify unforeseen problems with the interview process at an early stage. The majority of carers responded positively to both of the questions giving responses such as the relevance of the questions and their clarity and understanding the benefits of the study and the opportunity it gave them for reflection on the child and their role as carers. The ongoing detailed information from these questions will be used to inform the development of the Wave 2 questionnaires.

Analysis of question responses Initial quality analysis of the interview data involved: testing of questionnaires to ensure that sequencing is correct, running frequencies for all data items, examining frequencies for completeness, robustness, correct sequencing, acceptance, and internal consistency, ensuring that the data matches the relevant question, examining the text responses to open-ended questions, and preparing a list of data quality issues for discussion with the data collection agency.

This initial analysis shows that there are only a small number of questions that received 'don't know' or 'refused' responses. There is also very little missing data due to the benefits of computer assisted interviewing that ensures interviewers are directed to the correct questions based on earlier responses.

Analysis of the open-ended questions indicates that some are providing a wealth of information for further qualitative analysis, some will be able to have pre-coded responses for the next wave of data collection and a few may not be required at all, as they appear to not be providing any additional information to that collected in the associated pre-coded item.

For the standardised scales such as the Brief Infant Toddler Social Emotional Assessment (BITSEA) and Kessler 10 (K10), that are being completed by the carer using CASI and the Ages and Stages Questionnaire (ASQ3) and Short Temperament Scale for Infants (STSI) being administered using CAPI, enough questions are being answered for the corresponding scales and subscales to be calculated.

Summary

Examination of the data collected on the recruitment processes to date has revealed that:

- good sampling strategies and high response rates (84% of carers) have ensured that the sample is representative of children entering into care for the first time care under final orders
- the recruitment process takes about 2 months from when the child is eligible to join the study for the interview to be completed with their carer
- the verification process is important to continue as just over 20% of child and/or carer contact details were updated on KIDS prior to contacting the carers to participate in the study.

Information collected as part of the field work and analysis of the question responses show that:

- interviews are professionally administered by the data collection agency using CAPI and CASI
- interviews are taking just under two hours on average with the carers and are well accepted by the carers, as evidenced by the validations conducted by the data collection agency
- there are little missing data due to the benefits of computer assisted interviewing that ensures interviewers are directed to the correct questions based on earlier responses
- the majority of the items are robust and there are only a small number of questions that received 'don't know' or 'refused' responses
- adequate numbers of questions have been answered in the standardised scales for the corresponding scales and subscales to be calculated.

The outcomes from this data quality analysis will be used to assist with the efficient processing of the full dataset and to inform the development of the Wave 2 questionnaires (keeping in mind the importance of continuity for longitudinal data).

