

# GRYD DATA FEEDBACK LOOP TRAINING

Using a Community-Based, Participatory, Action Research Approach to Building Data-Informed Practice

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GRYD RESEARCH & EVALUATION BRIEF NO. 7

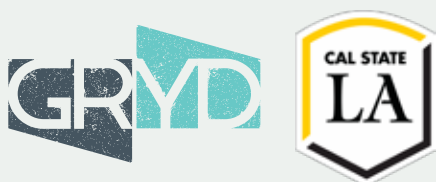
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## MESSAGE FROM THE DIRECTOR

The GRYD Research Brief Series highlights the accomplishments of the GRYD Office and its community partners as they implement the GRYD Comprehensive Strategy.<sup>1</sup> The current research brief provides an overview of the GRYD Data Feedback Loop Training and how it facilitates a data-informed approach to building effective practices. Additionally, it summarizes the accomplishments and challenges of using this approach to critically assess current services in order to enhance their effectiveness in the future. The feedback loop process explained in this brief brought to life our commitment to bridging research and practice. Investment in a robust data infrastructure and provider staff training have long been key components of GRYD's comprehensive approach to violence prevention, intervention, and community engagement. The development of an intentional process and accessible tools resulted in deep learning about the use of data to inform and inspire practice and provided actionable solutions to challenges providers face in effectively serving youth and families in the communities served by GRYD.

**ANNE C. TREMBLAY, JD**

GRYD DIRECTOR



*The GRYD Data Feedback Loop promotes on-going improvement in GRYD Prevention and Intervention Family Case Management (FCM) service delivery by empowering GRYD providers to build innovative programming solutions based on program data and their experiences.*

Bridging research and practice is a core value of the Los Angeles City Mayor's Office Gang Reduction and Youth Development Office (GRYD) Comprehensive Strategy.<sup>2</sup> In particular, GRYD is committed to delivering effective gang prevention and intervention services to youth, families, and communities using data-informed practice. The purpose of this brief is to describe how the GRYD Data Feedback Loop Training was developed for GRYD Prevention and Intervention FCM Programs, highlight the accomplishments and challenges of this approach, and summarize the lessons learned from the first year of implementation.

## A BRIEF OVERVIEW OF GRYD PREVENTION AND INTERVENTION FAMILY CASE MANAGEMENT PROGRAMS

The GRYD Prevention and Intervention Family Case Management (FCM) Programs seek to strengthen resiliency factors for young people and their families while reducing risk factors related to gang joining/embeddedness and involvement in crime and violence.<sup>3</sup> Both GRYD Prevention and FCM Programs are available to youth and young adults who have a significant presence (i.e., live or attend school) in a GRYD Zone. GRYD Prevention services focus on reducing the likelihood that youth will join a gang and are intended for youth between 10 to 15 years old who exhibit an increased risk for joining a gang. GRYD FCM services help reduce gang embeddedness for gang-involved youth and young adults between 14 to 25 years old.

Eligibility for GRYD Prevention services is determined based on the completion of an intake assessment, the Youth Services Eligibility Tool (YSET). To participate in services, a youth must score above a risk threshold. Eligibility for GRYD FCM is determined by the providers' assessment of need for services. However, young people who enroll in GRYD FCM services are required to complete an assessment, the Social Embeddedness Tool (SET), shortly after enrollment. Both tools (i.e., YSET and SET) are administered every six months to assess participant's change and progress.

Youth and young adults who enroll in GRYD Prevention or FCM services follow a six-month cycle of services comprised of seven phases (see Figure 1). During each phase, participants take part in regular family and individual meetings with GRYD case managers and other assigned provider staff, create a strength-based genogram of at least three generations, and are referred to other services as required. GRYD Prevention participants also engage in youth development activities while those receiving GRYD FCM services typically prepare for employment. Each phase makes use of multi-generational coaching and designing

problem-solving interventions with the participant and his/her family. Once participants reach Phase 7, a reassessment process is completed. Reassessment includes re-administration of the YSET/SET and evaluation of overall progress by GRYD provider staff to determine if the participant needs to repeat another cycle.

Data are captured by GRYD Prevention and GRYD Intervention Family Case Management (FCM) provider staff using the GRYD Database, which is managed by the GRYD Research & Evaluation Team. The GRYD Database collects a wide range of participation information from the time youth and families are referred for services until they complete services successfully or unsuccessfully. To date, data are available for 10,003 GRYD Prevention participants served since September 2011 and for 7,557 GRYD FCM participants served since February 2012. Additionally, the GRYD Research & Evaluation Team has access to databases containing participant responses to the Youth Services Eligibility Tool (YSET) and the Social Embeddedness Tool (SET) at the beginning of services and all retests completed thereafter. These data form the basis of reports used for the GRYD Data Feedback Training.

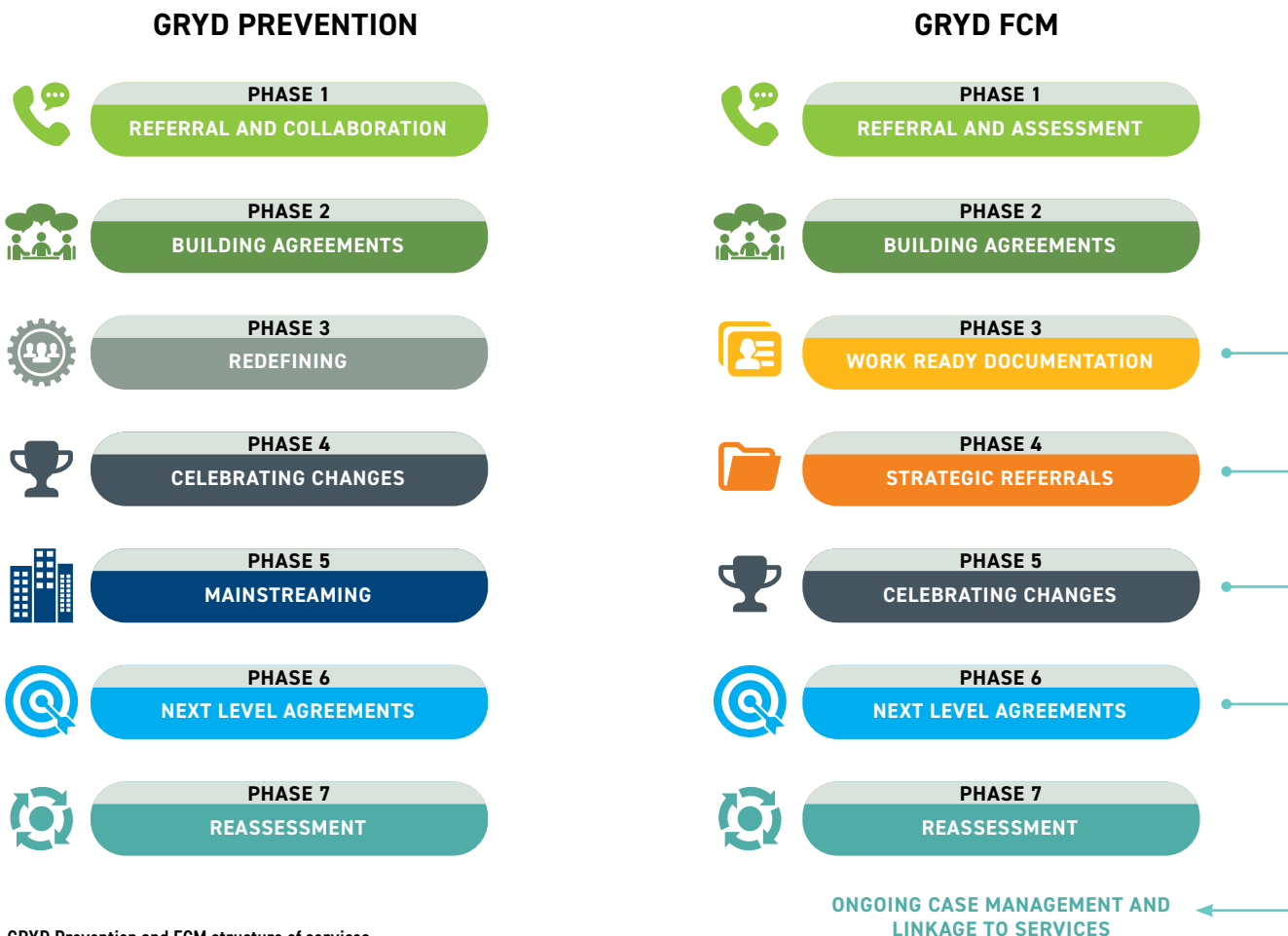


Figure 1. GRYD Prevention and FCM structure of services

# GRYD DATA FEEDBACK LOOP TRAINING

GRYD developed the Data Feedback Loop Training for GRYD Prevention and Intervention providers to establish an iterative research and action process meaningful to GRYD provider staff.<sup>4</sup> Implementing the GRYD Data Feedback Loop Training reframes the use of data from a traditional, outcome-based approach to an action-oriented process to inform program improvement. Prior to this training, GRYD data were used primarily to produce evaluation reports that were valuable to the GRYD Office at the macro level but often disconnected from GRYD provider experiences at the local level. To better connect providers to their data and directly link agency results to practices in an informative way, the GRYD Office launched Data Feedback Loop Training.

The GRYD Data Feedback Loop Training pulls from the principles of Community-Based Participatory Action Research (CBPAR);<sup>5,6</sup> to ensure GRYD providers are involved throughout the process. As a CBPAR-based program, the GRYD Data Feedback Loop Training is: **1) community-based** in that it is grounded in the needs, issues, concerns, and strategies of communities and community-based organizations that serve them; **2) participatory** because it directly engages communities and community knowledge in the research process and its outcomes; and **3) action-oriented** by supporting programmatic transformation through strategic action.



Figure 2: Illustration of the GRYD Data Feedback Loop Training

GRYD Data Feedback Loop Training began in September 2017 and continued through May 2018. The focus of the trainings was program participant attrition (i.e., dropping out of services prior to completion). Previous GRYD evaluation reports consistently reported participant dropout rates exceeding 50% for both prevention and intervention programming.<sup>7,8</sup> Given the tremendous impact attrition can play in the overall effectiveness of services, this issue provided an excellent starting point for the training.

GRYD Prevention and Intervention Family Case Management (FCM) providers attended GRYD Data Feedback Loop Training sessions bi-monthly for a total of 45 in-person meetings. These meetings facilitated on-going communication and support for GRYD Data Feedback Loop Training goals and Strategy Action Plan implementation. GRYD Prevention and FCM providers received separate Data Feedback Loop Training sessions. All sessions were co-led by a training facilitator acting as a consultant to GRYD, a designated GRYD Regional Program Coordinator (RPC), and representatives from the GRYD Research & Evaluation Team. In between these meetings, GRYD provider teams worked on developing and implementing their Strategy Action Plans in the field. To further support GRYD Data Feedback Loop Training sessions with GRYD provider teams, the training staff also met with GRYD provider management and with GRYD RPCs. Toward the end of the year of training, GRYD providers shared their best practices and findings in a poster session and had the opportunity to share their experiences at research conferences.

## THE GRYD DATA FEEDBACK LOOP TRAINING PROCESS

The GRYD Data Feedback Loop Training process is built upon four fundamental steps to support the implementation of a Community-Based Participatory Action Research (CBPAR) approach. These four, progressive steps include:

- Step 1: Review the Findings from GRYD Data Feedback Reports
- Step 2: Develop and Document Action Plans to Address Issues Uncovered in the Reports
- Step 3: Implement the Action Plans
- Step 4: Assess and Report the Results for the Action Plans

A description of how these steps unfolded during the first year of GRYD Data Feedback Loop Training is detailed below. These descriptions include the data results presented to providers in Step 1; the action plan steps addressed in Step 2; the ways in which action plans were implemented in Step 3; and reflections on lessons learned from the process and its results in Step 4. Throughout each step, accomplishments and challenges experienced are highlighted.

**STEP 1**

# REVIEW THE FINDINGS FROM GRYD DATA FEEDBACK REPORTS

## STEP 1 OBJECTIVES

- Analyze data to identify factors related to dropping out of services prior to successful completion
- Present data findings to GRYD providers in a clear and meaningful way
- Help providers connect the findings to their experience in the field
- Highlight the usefulness of data to provide insight into current practices and inspire reflective thinking about future practices

The first step of the GRYD Data Feedback Loop Training process was to present participant dropout data to GRYD Prevention and Intervention Family Case Management (FCM) service providers. The purpose of this presentation was to establish the dropout rate for each program and identify which individual, family, and community factors were correlated to participant dropout. Analyses were completed across all GRYD Zones and for every individual GRYD Zone. Aggregate results were first presented to all GRYD providers participating in the training to establish a baseline of how providers were performing collectively. Following this analysis, specific GRYD Zone results were shared with providers to identify potential action areas to address.

### METHODOLOGY USED TO GENERATE GRYD DATA FEEDBACK REPORTS

GRYD Data Feedback Reports were generated by analyzing data for all GRYD Prevention and FCM participants who (1) formally entered programming and exited successfully and (2) discontinued services due to long-term non-attendance or formally dropping out of programming ("dropping out of services"). Participants who exited the program for reasons such as moving, changes in staffing, incarceration or for unknown reasons were excluded from analysis. Using these selection criteria, final samples used for the reports included a total of 3,404 youth who exited from GRYD Prevention services between September 1, 2011 and August 1, 2017, and a total of 2,663 young people who exited GRYD FCM services between February 1, 2012 and August 1, 2017.

Analyses compared participants who dropped out to those who exited successfully across several individual, family, and community factors. Chi-square tests were used to determine which factors were significantly different across groups. Significant factors fell into two categories: (1) participant characteristics and life situations prior to program participation; and (2) programmatic experiences after the start of services.

### HIGHLIGHTS FROM GRYD DATA FEEDBACK REPORT FINDINGS

As shown in Figure 3, 42.9% (N=1,462) of GRYD Prevention participants exited services successfully while 57.1% (N=1,942) dropped out of services. The pattern was similar for GRYD FCM participants: 43.7% (1,164) finished successfully and 56.3% (N=1,499) dropped out. The next step was to use data to explore why participants in both types of services did not complete their programming. The dropout rates were then used to discuss what factors may be related to participants' likelihood to leave programming unsuccessfully.

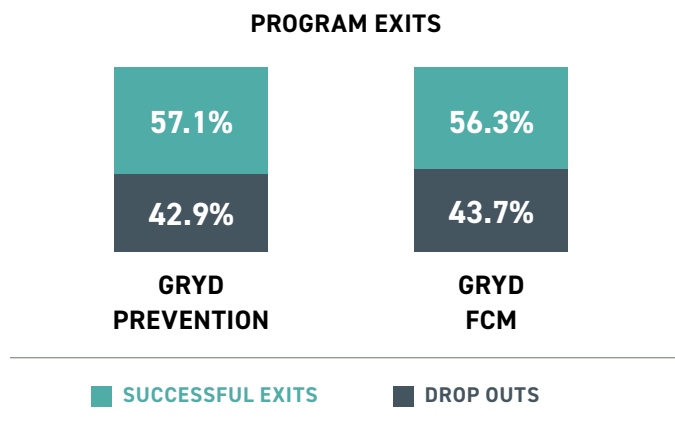


Figure 3: Program Exits for GRYD Prevention and FCM services through August 1, 2017.

Analyses revealed several significant factors related to dropping out. Participant characteristics included life situations, social bonds, risk factors (GRYD Prevention participants only), and the need for services (GRYD FCM participants only), and programmatic experiences included delays in enrollment for services and a lack of participation by the youth and/or the family (see Figure 4).

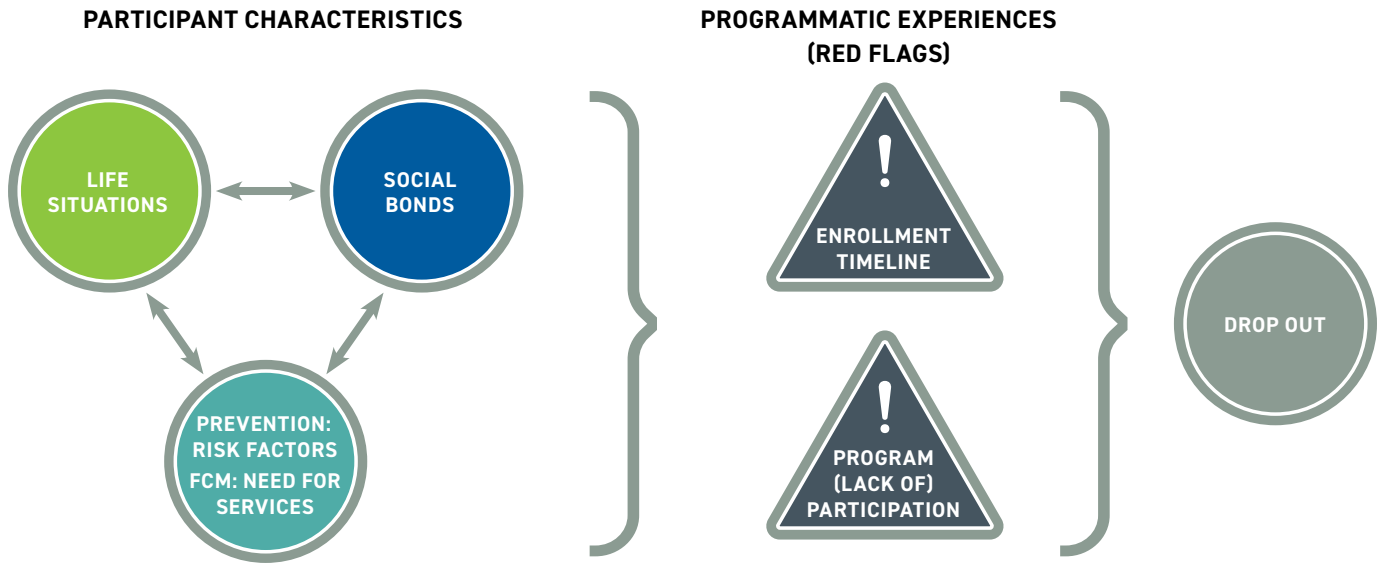


Figure 4: Areas related to program dropout for GRYD Prevention and FCM services.

## PARTICIPANT CHARACTERISTICS AND PROGRAM DROPOUT

### LIFE SITUATIONS

As shown in Figure 5, GRYD Prevention participants were 10% more likely to drop out if they were living with a relative or guardian compared to biological parents and if they were arrested in the last six months (prior to enrollment). They were 9% more likely to drop out if they had been suspended or expelled from school within the last six months, and 7% more likely to drop out if they were currently or previously involved with the Department of Children and Family Services as a victim of maltreatment.

For GRYD FCM participants, situational circumstances played an important role in predicting dropout status. Those who were arrested in the six months prior to enrollment were 11% more likely to drop out as shown in Figure 5. In addition, GRYD FCM participants were 10% more likely to drop out if they had not travelled outside of their immediate neighborhood in the past six months (prior to enrollment), and they were 8% more likely to drop out if they were under the supervision of Probation or the Department of Corrections in the same time period.

### LIFE SITUATIONS OF PARTICIPANTS WHO WERE MORE LIKELY TO DROP OUT OF SERVICES WERE...

GRYD PREVENTION	GRYD INTERVENTION FCM
<b>+10%</b> <b>Living with a guardian or relative</b> Compared to youth living with both biological parents	<b>+11%</b> <b>Arrested in the last 6 months</b> Compared to young people who were not arrested in the last 6 months
<b>+10%</b> <b>Arrested in the last 6 months</b> Compared to youth who were not arrested in the last 6 months	<b>+10%</b> <b>Had not travelled outside of a 3 mile radius for a prosocial activity in the last 6 months</b> Compared to young people who had
<b>+9%</b> <b>Received school disciplinary actions</b> Compared to youth who did not receive school disciplinary actions in the 6 months prior to enrollment	<b>+8%</b> <b>Under the supervision of Probation or Dept. of Corrections in last 6 months</b> Compared to young people who were not
<b>+7%</b> <b>DCFS involvement previously or currently</b> Compared to youth with no DCFS involvement	

Figure 5: Life Situations related to program dropout for GRYD Prevention and FCM participants.

**SOCIAL BONDS, RISK FACTORS, AND SERVICE NEEDS**

GRYD Prevention participants with friends who engaged in antisocial behavior were 9% more likely to drop out than those whose groups of friends did not. Similarly, GRYD FCM participants who reported strong emotional commitment to their group were 13% more likely to drop out. GRYD Prevention participants who were identified on the Youth Services Eligibility Tool (YSET) as youth who frequently engaged in impulsive risk-taking or neutralized guilt (i.e., justified decisions to alleviate guilt) were 9% and 6%, respectively, more likely to drop out than youth who scored lower on these scales.

For GRYD FCM participants, an additional need for specific services identified by their GRYD case manager increased the likelihood of dropping out. Those experiencing homelessness were 16% more likely to drop out of GRYD FCM services and 15% more likely to drop out if they had reentered the community from a correctional facility in the past six months prior to enrollment. GRYD FCM participants were 12% more likely to drop out if they had a pattern of substance misuse, abuse, or dependency than those who did not use any substances. Additionally, GRYD FCM participants who reported being unemployed were 11% more likely to drop out while those who had mental health needs were 9% more likely to drop out than GRYD FCM participants with no mental health needs reported.

**SOCIAL BONDS, RISK FACTORS, AND SERVICE NEEDS OF PARTICIPANTS WHO WERE MORE LIKELY TO DROP OUT OF SERVICES WERE...**

GRYD PREVENTION	GRYD INTERVENTION FCM
<p><b>+9%</b> <b>Antisocial norms identified in group of friends</b> Compared to youth whose group of friends are not antisocial</p>	<p><b>+13%</b> <b>More emotional commitment to Group</b> Compared to young with lower levels of emotional commitment</p>
<p><b>+9%</b> <b>Frequently engaged in impulsive risk taking</b> Compared to youth who did not</p>	<p><b>+16%</b> <b>In need of housing</b> Compared to young people not in need of housing</p>
<p><b>+6%</b> <b>Frequently neutralized guilt</b> Compared to youth who did not</p>	<p><b>+15%</b> <b>Reentry in the last 6 months</b> Compared to young people who did not experience reentry in the 6 months prior to enrollment</p>
	<p><b>+12%</b> <b>Substance abuse</b> Compared to young people with no identified issues</p>
	<p><b>+11%</b> <b>Unemployed</b> Compared to young people who were employed</p>
	<p><b>+9%</b> <b>Mental health issues</b> Compared to young people with no identified issues</p>

Figure 6: Social Bonds related to dropout for GRYD Prevention and FCM participants.

**PROGRAMMATIC EXPERIENCES AND PROGRAM DROPOUT**

Programmatic experiences were also related to program dropout. These included the length of time from referral to enrollment and regular and ongoing participation in services. Both GRYD Prevention and FCM participants with enrollment timelines of 61-90 days were more likely to drop out than those who completed the referral to enrollment process in less than 30 days (10% and 14% more likely for GRYD Prevention and FCM respectively). Lack of program participation was also related to program dropout for both GRYD Prevention and FCM participants. GRYD Prevention participants who attended fewer than 10 activities were 77% more likely to drop out than their peers who attended 51-60 activities; those whose families attended fewer than 10 activities were 63% more likely to drop out when compared to GRYD Prevention participants' families who attended from 41-50 activities. Similarly, GRYD FCM participants who attended fewer than 10 activities were 68% more likely to drop out than those who attended 41-50 activities; young people whose families attended no activities were 68% more likely to drop out than those whose families attended 11-20 activities.

**PROGRAMMATIC EXPERIENCES OF PARTICIPANTS WHO WERE MORE LIKELY TO DROP OUT OF SERVICES WERE...**

GRYD PREVENTION	GRYD INTERVENTION FCM
<p><b>+10%</b> Referral to enrollment timeline between 61-90 days Compared to youth with a referral to enrollment timeline of less than 30 days</p>	<p><b>+14%</b> Referral to enrollment timeline between 61-90 days Compared to youth with a referral to enrollment timeline of less than 30 days</p>
<p><b>+77%</b> Youth who attended fewer than 10 activities Compared to young people who attended 51-60 activities</p>	<p><b>+68%</b> Young people who attended fewer than 10 activities Compared to young people who attended 41-50 activities</p>
<p><b>+63%</b> Family members who attended fewer than 10 activities Compared to families who attended 41-50</p>	<p><b>+68%</b> Family members who attended no activities Compared to families who attended 11-20</p>

Figure 7: Programmatic Experiences related to drop out for GRYD Prevention and FCM participants.

## PRESENTING THE RESULTS TO PROVIDERS

These results suggest that swift enrollment helps to secure engagement and some participants and their families may need additional modes of engagement once they enroll in services to prevent program dropout. Presentation of these issues in the aggregate successfully brought awareness of the issues and set the stage for exploring them further in individual provider findings. Following this presentation, results for individual GRYD providers were distributed to each respective team

(i.e., individual GRYD provider reports were not shared across all GRYD providers). GRYD Regional Program Coordinators (RPCs), Research & Evaluation Team members and the training facilitator helped GRYD provider teams review their individual reports and discussed the relationship between the findings and staff experiences in delivering services. This process, in turn, yielded reflective discussions to identify areas to target in their action plan in Step 2.

## LESSONS LEARNED IN STEP 1

**Understanding the data and practice relationship.** GRYD providers started to understand the relationship between the data they input and its value in understanding their practices. Using GRYD Zone specific data, GRYD providers were able to recognize service provision gaps or challenges that they had felt to be true but were now able to see represented in the data.

**More attention to data.** When reviewing their data, GRYD providers often questioned the timeframe used for the sample and gaps in data due to missing data. These concerns provided the opportunity to reiterate the importance of consistent and accurate data entry by providers. These discussions helped providers recognize their role in the data collection process and in ensuring their data are as complete and accurate as possible. As a result, some GRYD providers refocused their efforts around meeting service delivery goals and entering services into the GRYD Database by creating tracking sheets or integrating a regular data review into meetings. For example, many GRYD providers reviewed their intake processes to determine how they were assessing and capturing in the GRYD Database a participant's need for housing.



**STEP  
2**

## Develop and Document an Action Plan to Address Issues Uncovered in the Reports

### STEP 2 OBJECTIVES

- Identify at least one way to reduce dropout rates
- Clearly articulate the action item
- Develop a Strategy Action Plan to address action area
- Identify possible barriers and develop strategies to overcome them

After reviewing their findings in Step 1, GRYD providers recognized that some of their practices and protocols (i.e., intake process, enrollment timelines, number of activities provided for clients, etc.) were directly impacting their dropout rates. One example was the lack of client and family engagement at the onset of programming. GRYD providers attributed this, in part, to a disconnect between GRYD policies and actual practice.

After identifying the possible issues related to dropout in their agencies, GRYD providers worked in teams to develop a Strategy Action Plan to address at least one of these issues. The Strategy Action Plan was designed to support the integration of data feedback into a strategic plan to improve a practice or practices. As shown in Figure 8, the Strategy Action Plan tasked GRYD providers to clearly identify and document the specific areas in

their programming that contributed to early dropout (e.g., lack of family engagement) and how they planned to address them.

Once an area of development was identified, GRYD providers had to establish goals that were both specific and measurable (e.g., engage parents in programming twice a month) in order to gauge whether or not their strategies were effective. A key part to identifying strategies required GRYD providers to consider and plan for potential barriers they may face. Once clear and specific strategies were identified, GRYD providers could request direct support from the GRYD Office or other departments within other City of Los Angeles (i.e., City Council Offices, Recreation and Parks, etc.). Once GRYD providers and Regional Program Coordinators (RPCs) agreed on the components of the Strategy Action Plan, all parties signed off on the document, essentially entering a contract.

STRATEGY ACTION PLAN	PLAN DESCRIPTION
<b>ACTION AREA</b>	Provide a description of the issue contributing to early dropout
<b>INTENDED GOAL</b>	Identify the intended end result after the strategy is implemented.
<b>PROPOSED SOLUTION STRATEGY</b>	Provide a description of the strategy intended to address this issue
<b>POTENTIAL BARRIER</b>	Identify potential obstacles or limitations that could hinder a GRYD provider from achieving their goals.
<b>STRATEGIES TO ADDRESS BARRIERS</b>	Propose ways to overcome barriers if and when they arise.
<b>ROLES AND RESPONSIBILITIES FOR IMPLEMENTATION</b>	Identify a list of who is involved in the proposed solution and expectations for each person.
<b>NEEDED RESOURCES TO SUPPORT IMPLEMENTATION</b>	Describe how the GRYD Office could support the implementation of their strategy (e.g., GRYD approval to utilize resources in a different way than originally planned).

Figure 8: GRYD Data Feedback Loop Strategy Action Plan.

## LESSONS LEARNED IN STEP 2

**Focusing on strategic change.** All GRYD Intervention provider staff had the opportunity to integrate their voice into the strategic use of data to improve practices. This was particularly empowering for GRYD Community Intervention Workers (CIWs), who historically found the usefulness of data to be limited. Ultimately, providers were able to see how data could facilitate collaboration within their teams and with the GRYD Office to improve the quality of their programming.

**Creating a communal approach to strategy identification.** Alignment of issue areas to appropriate strategies was an effort involving GRYD providers, GRYD Regional Program Coordinators (RPCs), Research & Evaluation Team members and the training facilitator. It shifted the decision-making process from a top-down approach (i.e., management dictating to staff) to an action-oriented approach driven by GRYD provider staff experience and shared opinions.

**Digging deep for solutions: aligning strategies to an identified area.** Some GRYD providers struggled to create a Strategy Action Plan that correlated with the program dropout statistical indicators identified in the GRYD Data Feedback Report. For example, "Increase GRYD Funding" was identified as a cure-all strategy, even though the chosen area of development did not require a monetary solution. In these instances, GRYD RPCs and the training facilitator worked closely with GRYD providers to identify strategies that aligned with the identified area and were implementable. These conversations encouraged innovation in, and ownership of, strategies identified by GRYD providers.

**Strategic use of barriers.** The "Potential Barriers" section was initially viewed as a way to voice grievances (i.e., displeasure with their colleagues, managers, or the GRYD Office) instead of focusing on how making strategic incremental changes could have a transformative and sustainable impact on the quality of services delivered. This led to greater inclusion of GRYD provider staff in all roles as part of the training sessions in order to increase the transparency of and expectations for the process and to encourage buy-in at all levels. Additionally, the role of the GRYD RPCs and the types of support that they and the GRYD Office could provide were discussed and clarified.

STEP  
3

## Implement the Strategy Action Plan

### STEP 3 OBJECTIVES

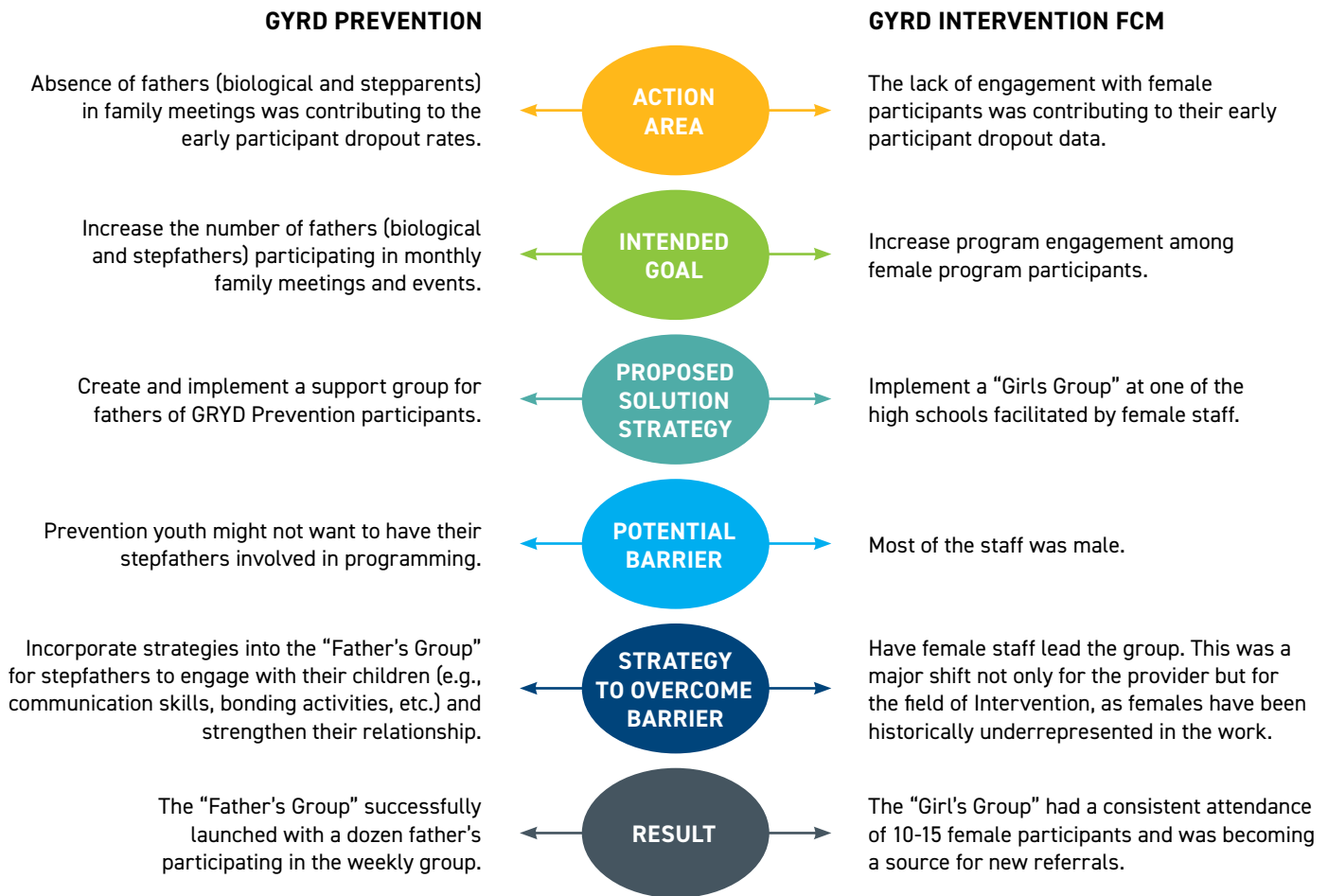
- Secure support for implementation of the Strategy Action Plan
- Provide progress updates and discuss experiences with GRYD Regional Program Coordinators (RPCs) and other providers
- Access and utilize technical assistance from GRYD RPCs and the training facilitator when necessary
- Be accountable for implementing the Strategy Action Plan

With actionable strategies developed, GRYD providers turned their attention to implementation. Implementation required all GRYD provider staff, management, and RPCs to understand the purpose of the approach and their role in executing the strategy. Since GRYD Data Feedback Loop Training sessions did not include all GRYD provider staff and management, training participants had to secure engagement and buy-in for their take their Strategy Action Plans from their management and colleagues. GRYD RPCs and the training facilitator held GRYD provider management workgroups with agency supervisors and leadership to support this process and made themselves available for consultation and troubleshooting between sessions.

As training sessions and workgroups with GRYD provider staff and management progressed, GRYD provider teams worked diligently to implement their plans and analyze the experiences. During training sessions, GRYD provider teams were encouraged to share their progress and any barriers they encountered. By sharing this information, team efforts were supported through discussion with GRYD RPCs, the training facilitator, and other provider teams.

Examples on the following page illustrate the implementation plans and the outcomes for Strategy Action Plans developed by a GRYD Prevention Providers team a GRYD Intervention Family Case Management (FCM) team.

FEEDBACK LOOP STRATEGY ACTION PLAN EXAMPLES



LESSONS LEARNED IN STEP 3

**Redefining expectations for GRYD provider management participation.** The ability to provide additional institutional support was instrumental to successfully implementing strategies. This support took many forms, such as allowing GRYD provider staff to have flexible schedules to meet the needs of the family or being open to innovative ideas that would have previously been shut down or ignored. GRYD RPCs held GRYD provider management accountable for the implementation of the Strategy Action Plan, creating a space in which innovations were not only discussed by GRYD provider staff, but, were also were implemented by them.

**Leveraging GRYD RPC support for successful implementation.** GRYD RPCs were active partners in guiding the implementation process. GRYD RPCs reviewed Strategy Action Plans with GRYD provider staff and managers, evaluated progress and encouraged strategy adjustment as necessary. Furthermore, in instances where GRYD provider management were disconnected from the process or were reticent to adopt new practices, GRYD RPCs were able to use their leverage as representatives of the GRYD Office to ensure that GRYD provider management was complying with GRYD contract stipulations. Additionally, they provided consistent support to GRYD provider staff in the successful implementation of their Strategy Action Plan objectives.

**Engaging management in the process.** Despite the role of GRYD RPCs, buy-in across all GRYD provider staff roles did not always take place because individuals in management positions did not always participate in the GRYD Data Feedback Loop training sessions. Future training will need to engage agency management and leadership in a more direct way.

**STEP  
4**

## Assess and Report the Results for the Strategy Action Plan

### STEP 4 OBJECTIVES

- Reflect on and assess the implementation experience
- Present a summary of the experience to GRYD Office staff, GRYD Research & Evaluation Team members, the training facilitator, and other GRYD providers

The last step of the GRYD Data Feedback Loop Training focused on GRYD provider reflections of their experiences implementing the Strategy Action Plan for their GRYD Zone. GRYD providers were encouraged to assess how service delivery had changed and identify additional adjustments to sustain success after the training sessions ended. A poster presentation was used as a capstone activity for GRYD providers to share their process, success, and lessons learned with the GRYD provider community.

The poster session played a significant role in the training because it created an opportunity for GRYD providers to engage with and learn from one another, the GRYD Office, the GRYD Research & Evaluation Team, and the training facilitator. GRYD providers used the posters to tell the story of how they bridged research to practice to build stronger, more effective practices for the young people and families they serve.



## LESSONS LEARNED IN STEP 4

**Presenting work in a peer forum.** The capstone assignment gave GRYD providers the opportunity to exhibit what they had implemented with pride and intensified the efforts of organizations to further align their internal messaging and galvanize resources to produce high-quality presentations for public viewing.

**Encouraging growth through effective technical assistance strategies.** The unfamiliarity of the task resulted in many GRYD providers reaching out to their GRYD Regional Program Coordinators (RPCs) for additional support. The hands-on aspects of creating a poster allowed GRYD RPCs to work collaboratively with GRYD provider teams and better understand team limitations. This collaboration resulted in delivery of technical assistance geared towards achieving a better understanding of how to interpret data, connect it to service delivery, construct a presentation, and present on their process leading to overall skill-building among GRYD provider staff.

**Capability of GRYD provider staff to execute the capstone project.** For some teams, the capstone was their first exposure to creating a poster that would capture programmatic efforts in this format and proved to be a formidable task. In future trainings, those leading the trainings will need to provide more guidance and support to help providers learn these skills.

# THE IMPACT OF GRYD DATA FEEDBACK LOOP TRAINING

Bridging research to practice through data feedback loops is incredibly valuable, but it is an approach that takes time, patience, and commitment to a problem-solving process. Everyone involved must be willing to see the "story" produced by provider data and use the information to identify the strengths and gaps in current programming. The process is challenging, but the rewards are significant. Key benefits of connecting research to practice in this way include:

## **ESTABLISHING A PLATFORM TO REVIEW AND DISCUSS DATA TOGETHER IN A MEANINGFUL WAY.**

When GRYD providers come together with members of the GRYD Research & Evaluation Team, GRYD Regional Program Coordinators (RPCs), and a training facilitator it is possible to dig deeper into the story the data is telling. The data provides an unbiased look at how GRYD providers are operating in terms of the implementation and documentation of their work. This provides an opportunity for GRYD providers to understand and take ownership of the narrative.

## **BUILDING TEAM COHESION TO REACH A COMMON GOAL.**

The GRYD Data Feedback Loop process brought about not only changes in how GRYD provider staff were working with participants but also how they were working with each other. There were changes in the way GRYD provider agencies operated internally in areas such as communicating needs around supervision, resource access, schedule flexibility, and other areas. Going through the process of the GRYD Data Feedback Loop resulted in a better understanding of the perspectives across all GRYD provider staff levels regarding how GRYD services function, what the expectations are, and how to leverage resources to meet desired goals.

## **CREATING SPECIFIC INTERVENTIONS TO ADDRESS GAPS IN SERVICE DELIVERY.**

GRYD providers gained the capacity to approach programming in a more intentional way to meet specific gaps in engagement and services, such as creating groups to engage fathers as a core part of services and to deliver needed services to young women with gang involvement. Importantly, GRYD providers recognized connections between the actions and subsequent improvements for participants and their families.

# MOVING FORWARD

The implementation of the GRYD Data Feedback Loop Training forged a bridge between research and practice by using a community-based, participatory, action-oriented process to continuously inform sustainable and effective programming. This process was empowering for GRYD providers on many levels. The GRYD Data Feedback Loop Training created an environment which improved the understanding of the relationship between research and practice; encouraged collaborative problem solving among GRYD provider staff, GRYD provider management, and GRYD Regional Program Coordinators (RPCs); and provided the opportunity for peer feedback and validation. Based on first year of implementation, we recommend the following to jurisdictions interested in creating data feedback loops to inform practices:

1. Build a culture that is inclusive of data. Framing data as a tool for reflection and exploration is essential to generating useful information for on-going program development. Data collection begins and ends with the staff delivering services; thus, the significant role data plays in the delivery of practice must be a core value of any agency delivering services to youth and their families.
2. Build a data infrastructure. Well-designed case management systems that collect critical data about who is being served and how they are being served are essential to supporting and guiding team discussions about programming. These discussions play a key role in continuously identifying best practices and addressing any gaps in service provision.
3. Focus on investigating issues that align with programmatic goals and are meaningful to providers. The purpose of the feedback loop is to engage those delivering services in their own practice to better understand what they are doing well and where they can improve. Feedback loops are not about compliance or accountability in a punitive sense, but rather a way to build provider capacity to enhance their strengths and address their challenges.
4. Integrate individuals from all staffing levels (management, staff, etc.). Often program development is a "top-down" enterprise in which those at higher levels of leadership and management decide how programming will be implemented. The utility and value of the data feedback approach is to create equity and collaboration in the development of programming, which in turn contributes to equity in the delivery of services.

5. Include a neutral entity (such as the GRYD RPCs) in the construction and implementation of a Strategy Action Plan. Having a third partner that has a more "neutral" role to the delivery of services within particular providers significantly contributes to the constructive nature of data feedback efforts. This entity can balance discussions, resolve disputes, and provide additional technical assistance around data interpretation and other areas.
6. Create opportunities for providers to share their work with their peers. An essential part of the data feedback process is the opportunity to reflect and share about the Strategy Action Plan experience in a setting that encourages constructive feedback and builds relationships between providers as allies in developing solutions in an environment where multiple perspectives are honored and respected. By sharing in this way, an on-going learning community is created for all involved.

In sum, building data feedback loops requires planning, commitment, and steady leadership; however, when accomplished, the process generates a unique level of trust, comradery across all partners, and a belief that the process will result in better service delivery and outcomes. The GRYD Data Feedback Loop Training facilitates this process by empowering providers with data to transform their practices through strategic action.

#### SUGGESTED CITATION

Kraus, M., Brown, A.L., De Santiago, C., & Herz, D.C. (2020). *GRYD Data Feedback Loop Training: Using a community-based, participatory, action research approach to building data-informed practice* (GRYD Research Brief No. 7). Los Angeles, CA: California State University, Los Angeles.

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