FY2023 Program Evaluation of the Child Protection Training Academy for New DCFS Investigators

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Executive Summary

Since the Child Protection Training Academy launched the first simulation training in February 2016, it has trained over a thousand new child protection investigators for the Illinois Department of Children and Family Services (DCFS). Currently, teams from the Child Welfare Office of Workforce Development at the University of Illinois at Urbana-Champaign and the Department of Human Development and Family Sciences at Northern Illinois University (NIU) provide simulation training. The former provides simulation training in DCFS offices in Chicago and the latter on campus at NIU. Trainees receive first-hand experience learning a wide range of child protection tasks, from the first knock on a family's door to testifying in family court. They are guided by expert trainers and work with actors playing the family in a mock house and mock courtroom. In FY2023, the Children and Family Research Center's (CFRC) evaluation team again used multiple sub-studies to assess simulation training.

Chapter 1: Introduction

For most of FY2023, the laboratory in DCFS offices in Chicago was the only lab conducting simulation training of child protection investigators and was training all new investigators. In September 2022, simulation training started employing a hybrid model that provided in-person simulations two days of the training week and virtual simulation training the other three days. The laboratory at Northern Illinois University held its first simulation training in May 2023.

Chapter 2: Daily Experience of Simulation Training (DEST)

Trainees complete a baseline DEST measure in the morning of Day 1 and a DEST at the end of each of the five training days. The DEST measures trainees' confidence on 13 different child protection skills. Trainees rate their confidence on each skill from 1 (low) to 7 (high). The DEST also asks trainees additional questions about their on-the-job-training experience, their evaluation of the feedback and debriefing they received in the training, and their assessment of what they learned each day. One-way ANOVAs indicated a significant linear increase in confidence over the course of the simulation-training week for all 13 skills, with medium to large effect sizes ($\eta 2$ = .06 to .11, or d = .81 to 1.09). Repeated measures ANOVAs also showed a significant linear increase for all 13 skills, with medium to large effect sizes ($\eta 2$ = .06 to .13, or d = .73 to 1.09). Most of the 29 training cohorts in FY2023 experienced meaningful increases on average in confidence during simulation training.

Trainees rated the helpfulness of the feedback of trainers, actors, and medical and courtroom professionals. For each, 95% or more of trainees reported that the feedback was helpful or very helpful. On a scale from 1-extremely ineffective to 7-extremely effective, respondents rated the effectiveness of group and individual debriefing for multiple training outcomes. For each debriefing item, 77% or more of respondents rated group debriefing at 5 or above, and 84% or more rated individual debriefing at 5 or above. In regression analyses, perceptions of helpfulness of the feedback and effectiveness of the debriefing were both significantly related to increases in trainees' confidence. The group debriefing on Day 4 had the largest relationship

to trainees' confidence, and the individual debriefing on Day 2 may have had a larger effect than other individual debriefings.

Chapter 3: FY2023 Post-Training Satisfaction Survey

DCFS administers an online post-training satisfaction survey on the Certification Training experience to trainees. In a section of the survey, respondents provide written responses to two open-ended questions about their appraisal of simulation training. They also rate their agreement or disagreement with positive statements about their simulation training, using a. 5-point scale (strongly disagree=1; disagree=2; undecided=3; agree=4; strongly agree=5). Examples of items include: *The scenario environment was realistic. I was able to incorporate my training into practice*; *I felt the training was conducted in an environment conducive to learning;* and *participating in the scenarios helped to increase my confidence in my role*. The mean on the eight items ranged from 4.0 to 4.3, indicating agreement on average with the positive statements. The percentages agreeing or strongly agreeing ranged from 75.2% to 91.1%, while the percentage who strongly disagreed or disagreed was less than 10% across items. A statistical comparison showed that agreements with these positive statements were significantly higher in FY2023 than in FY2022, with medium effect sizes. Participants trained through the hybrid model had significantly higher satisfaction scores than trainees who experienced only virtual training.

Chapter 4: In Their Own Words: Qualitative Findings from the DEST and the Post-Training Satisfaction Survey

The DEST instrument and the Post-Training Satisfaction Survey also include open-ended questions about participant perceptions of simulation training. Chapter 4 provides an overview of the qualitative findings from these questions. The Post-Training Satisfaction Survey asked trainees what the most meaningful concepts or skills they learned were and what the most helpful feedback they received in their individual debriefing was. The qualitative data from this yielded four codes: 1) Reflections on and suggestions related to the Simulation Training Process; 2) Reflections on and suggestions related to instruction/the instructor(s); 3) Skills gained from training, perceived individual outcomes identified; and 4) Reflections on the felt experience and the value of experiential learning.

The DEST included a daily open-ended question: "What were the most meaningful concepts or skills you learned today?" The Day 2 and Day 3 DEST also included another open-ended question: "What was the most helpful feedback that you learned from your individual debriefing? And why?". The analysis of the DEST qualitative data also yielded four codes: 1) Reflections on the simulation training process; 2) Perceived learning – knowledge; 3) Perceived learning – skills; and 4) Enhanced self-awareness and/or self-confidence for the role. From the data, we can derive findings in three areas of knowledge:

1. Process-related findings and implications: Several trainees expressed the desire to have more time in simulation, to be exposed to more varied scenarios and clients, and to see more

demonstrations from trainers. The debriefing and feedback processes that trainers employed were perceived as positive and effective. Many trainees considered problem-based learning to be an important element in their learning process in simulation. PBL served as an anchor as trainees moved through the simulated investigation while tethered to DCFS procedure and foundational knowledge.

2. Skill-related findings and implications: Many respondents mentioned the professional knowledge and skills they gained from simulation training, such as engagement of resistant clients, de-escalation, and use of appropriate tone of voice and terminology. Trainees also noted increased awareness of assessing one's own safety—what to be aware of and how to mitigate risk. Other outcomes noted were new knowledge and skills in multidisciplinary settings, increased understanding of identification and assessment of underlying conditions, and recognizing and minimizing one's own bias.

3. Findings and implications related to self as investigator: Many respondents reflected on the internal challenges of participating in simulation learning. At the same time, many trainees talked about the importance of going through those emotional challenges. They recognized the value of simulating a difficult scenario and working through it in a safe place where real clients are not impacted and where they can practice applying knowledge and skills.

Chapter 5: Conclusion

The positive results for simulation training in FY2023 occurred during a transition from fully live training to a hybrid model incorporating two virtual training days. These results suggest the viability of the hybrid model, which is encouraging. As in previous years, trainees' confidence in their skills increased significantly over the course of their simulation training experience, large majorities of trainees found feedback and debriefing helpful, and large majorities on the post-training survey agreed or strongly agreed with positive statements about the simulation training. Qualitative findings from the DEST and the Post-Training Satisfaction Survey provide insight into specific elements of simulation training they found valuable. Many trainees found simulation training emotionally challenging, but recognized the value of going through it and found the training environment a safe place to do so.

Moreover, results were more positive in FY2023 than in FY2022. Ratings on the post-training survey of the quality of simulation training were significantly more positive on average in FY2023 than in FY2022, for every question about quality. Although we did not do a formal statistical test, ratings of feedback and debriefings on the DEST were also more positive in FY2023. In FY2022, some trainees completing the post-training survey said in their text comments that they had a negative experience. This minority of trainees in FY2022 perceived that they were disrespected and/or reported feeling appalled. In contrast, negative comments in FY2023 were rare and minor. Only a few participants in FY2023 found fault with the use of virtual methods for part of the training. One possible explanation for this improvement was the transition that occurred in FY2022 from an entirely virtual training to models that once again

featured live training. It is somewhat difficult to interpret the higher satisfaction scores for hybrid training, because hybrid training is the most recent model, and implementing it may have coincided with other program changes over time. But the data are clear enough to conclude that hybrid training appears to be viable.

Chapter 1: Introduction

The Child Protection Training Academy (CPTA) is a program providing experiential learning through simulation training and related methods to new child protection investigators hired by the Illinois Department of Children and Family Services (DCFS). DCFS partners with university teams that provide the training. After completing their initial classroom training, all new investigators come to a training laboratory to participate in simulations of real-life situations that DCFS investigators encounter. The laboratory is outfitted as a family residence. Trainees interact with individuals playing the role of a mock family involved in a child protection investigation. Simulations deal with such situations as the initial engagement with the family and a scene investigation of the residence. In a mock courtroom setting trainees participate in a simulation of a juvenile court hearing concerning a family with a founded maltreatment investigation, interacting with volunteer professionals playing the roles of judge and attorney. Trainers provide frequent debriefings to help trainees reflect on and learn from their simulations. They employ problem-based learning methods to improve critical decision-making. Problem-based learning guides trainees to distinguish between hunches and hypotheses and facts; to develop alternative hypotheses; and then gather the information they need to test their hypotheses to make sound decisions.

For most of FY2023, the laboratory in DCFS offices in Chicago was the only lab conducting simulation training of child protection investigators and was training all new investigators. This laboratory is run by the Child Welfare Office of Workforce Development of the School of Social Work at the University of Illinois at Urbana-Champaign, through a contract with DCFS. The Chicago laboratory has been providing this simulation training since 2019.

Simulation training had been provided entirely live from its inception in 2016 until the Covid-19 pandemic hit. During FY2021 and most of FY2022, however, simulation training was provided virtually because of the Covid-19 pandemic. Live training resumed March 28, 2022.

Then, in September 12, 2022, simulation training was modified and started employing a hybrid model that reduces time away from home for trainees distant from the training laboratory. Day 2 and Day 3 trainings are in person and the rest of the training days are conducted using video conferencing. Day 2 focuses on the so-called Knock on the Door simulation, in which trainees practice engaging the family and entering the home. Day 3 focuses on the Scene Investigation simulation, in which trainees practice assessing a home for safety and conducting a body examination of an infant (represented by a doll) to assess the possibility of physical abuse. As we discuss later in this report, Day 1, 4 and 5 training, provided virtually, practices skills in which face-to-face contact with the family and presence in the physical environment are less salient.

In 2021, DCFS developed an agreement with Northern Illinois University (NIU) to provide a second simulation training laboratory on the NIU campus. Since then, the NIU team completed the contracting process, overcame challenges posed by Covid-19, and hired new trainers after an extended recruitment period. The Chicago laboratory also needed an extended recruitment period to hire new trainers in FY2023, and for a while the NIU trainer was commuting from the DeKalb area to Chicago to assist with simulation training there. The NIU team provided its first simulation training in May 2023.

The Program Evaluation

In FY2023, the CFRC evaluation team again used multiple sub-studies to assess simulation training. Most of the data came from this fiscal year, but we also included some FY2022 data, particularly those data that had not been available in time for last year's analysis. We aim to analyze all data on simulation training, even though this means that our data sets are not fully in synchrony with the fiscal year. Most of the data in this program evaluation come from trainings using the hybrid model, but we also analyze data from the fully live model and virtual model as well. Some analyses in this report compare these training models.

Chapter 2 presents quantitative results from the Daily Experience of Simulation Training (DEST) measure. The DEST is an ongoing component of the simulation training program for new investigators and CFRC periodically analyzes DEST data to track changes in trainees' confidence over the course of simulation training. Analyzing the DEST for different cohorts helps assess whether the effects of simulation training on trainees' confidence is being maintained and is consistent across cohorts. Chapter 3 offers FY2022 quantitative results from feedback on simulation training on the post-training satisfaction survey that all new investigators are invited to complete following their Certification Training. Chapter 4 analyzes responses to open-ended questions on both the DEST and the post-training satisfaction survey. Trainee responses contribute to our understanding of trainees' experience of the learning process, of the impact of simulation for knowledge and skill acquisition, and of trainees' emotional responses and reflections as they progress. Chapter 5 discusses the implications of the results for understanding the current state of simulation training by CPTA and presents recommendations for next steps.

Chapter 2: Daily Experience of Simulation Training (DEST)

If it is effective, simulation training should enhance investigators' preparedness for and confidence in their work. This should increase the quality of their work with families. The program evaluation team implemented the Daily Experience of Simulation Training (DEST) [1] measure in 2018 to measure trainees' change in confidence in their skills over the course of a simulation training week. During the week of simulation training, trainees use the DEST to rate their confidence daily on 13 child protection work skills. This chapter analyzes results from the DEST to gauge trainees' changes in confidence during simulation training. The most plausible explanation for changes in trainees' confidence is the impact of simulation training, though we are limited in being able to infer a causal effect because we lack a comparison group.

Instead of splitting the training into two weeks,[2] after March 28, 2022, the training was switched back to in person and offered within a week, starting with Day 1 on Mondays and ending with Day 5 on Fridays.[3] After September 12, 2022, the simulation training was modified as a hybrid model: Day 2 and Day 3 trainings are in person and the rest of training days are via video conferencing. Two case scenarios continue to be used, one for Day 1 and Day 2 and the other for Day 3 to Day 5. Below we present results for FY2023 and compare them to results from previous fiscal years.

Methods

The DEST includes 13 items measuring trainees' level of confidence on different child protection skills. Trainees rate their confidence on each specific skill from 1 (low) to 7 (high). We analyze each item individually and also analyze an overall confidence score operationalized as the mean of the 13 items. Trainees complete a baseline DEST in the morning of Day 1 and a DEST at the end of each day, Day 1 through Day 5. The Cronbach's alpha reliability coefficients for the overall confidence score in the current sample were between 0.96 and 0.98 across the six time points, which indicates excellent internal consistency among the 13 items in the scale. The baseline DEST includes additional questions about trainees' on-the-job-training experience. The DEST also asks trainees to rate the helpfulness of feedback and the effectiveness of the debriefing from the training team on specific days. Two open-ended questions ask trainees to share what they learned those days. The qualitative results of the open-ended questions will be provided in Chapter 4.

Every day trainees were given a little time to complete the DEST, although the DEST was voluntary, and trainees were free to decline to participate or terminate participation at any time. Trainers did not know which trainees participated and who did not. The data were

[1] See, Chiu, Y.L., Cross T. P., Wheeler, A., Evans, S. & Goulet B. P. (2023). Development and Application of a Self-Report Measure for Measuring Change During Simulation Training in Child Protection. *Journal of Public Child Welfare, 17* (2), 239-257. DOI: 10.1080/15548732.2021.2016546.

[2] In FY2021 and FY2022, the training was offered during parts of two weeks, starting with Day 1 on Thursdays and ending with Day 5 on Wednesdays.

[3] Due to DCFS' holiday schedule, couple weeks of training started from Tuesday and ended on Tuesday the following week during this report period.

collected through a secure website that automatically saved the data on a secure server managed by the Children and Family Research Center.

Response Rates

The response rate for the DEST at each time point was calculated by dividing the number of trainees who completed the DEST (numerator) by the total number of trainees in simulation training (denominator). Between March 28, 2022, and March 24, 2023, a total of 185 trainees participated in simulation training, and 184 (99%) completed the DEST at one time point or more. The DEST data included 1015 responses over six time points. Most of the participants were trained in the Chicago simulation training laboratory, but there were also 23 participants trained at the Springfield laboratory between March 28 and June 30, 2022, before the University of Illinois-Springfield terminated its contract with DCFS in July 2023. The daily response rate for the six time points ranged from 86% to 96% (Table 2.1). Compared to the average response rate for the post-training survey (34.2%),[4] the weighted average daily response rate of 92% is very high.[5] Out of 185 respondents, 129 (69.7%) completed the DEST at all six time points.[6] Since a large percentage of trainees completed the DEST, it is reasonable to conclude that results from the DEST are representative of trainees, and the measure is being used successfully with investigators receiving simulation training.

Table 2.1

DEST Response Rate for Each Time Point

	All (Trainees=185)		Chicago (Trainees=162)		Springfield (Trainees=23)	
Time Point	Responses	%	Responses	%	Responses	%
Baseline	178	96%	155	96%	23	100%
Day 1	173	94%	151	93%	22	96%
Day 2	166	90%	146	90%	20	87%
Day 3	159	86%	136	84%	23	100%
Day 4	172	93%	149	92%	23	100%
Day 5	167	90%	144	89%	23	100%

Analysis

One-way analysis of variance (ANOVA) was used to compare average confidence scores over time for all 184 respondents, whether or not they had responded at all six time points. Repeated measures ANOVA was used to measure change among the respondents who completed the DEST at each time point. Repeated measures ANOVA is a powerful method for examining change over time of the training week because error variance due to trainee differences is eliminated in the calculation of the F statistic, but it can only be used with

[4] Poynton, T. A., DeFouw, E. R., & Morizio, L. J. (2019). A systematic review of online response rates in four counseling journals. *Journal of Counseling & Development, 97*(1), 33–42. https://doi.org/10.1002/jcad.12233

[5] The weighted average daily response rate in the last annual report was 94%.

[6] In the last annual report, 85% of trainees completed the DEST at all six time points.

trainees who completed the DEST at each time point. Because we anticipated a trend over time toward greater confidence day by day, the specific ANOVA method of trend analysis was used to assess whether the pattern of means across time followed a trend. Both linear and curvilinear trends were assessed for both the one-way ANOVAs and repeated measures ANOVAs. In the same analysis, we also compared fully live training with the hybrid model on trainee confidence.

We conducted additional analyses to explore further meaningful patterns of DEST results. We ran additional repeated measures ANOVAs that included type of model (hybrid vs. fully live) as a between subjects factor, to see if trainee confidence differed by training model. We examined DEST results across cohorts who received simulation training in FY2023 to assess whether changes in confidence were consistent across cohorts. We examined the relationship between trainees' on-the-job training and their confidence level at each time point using the Kendall tau measure of association. We calculated standard descriptive statistics to examine trainees' appraisal of the feedback and debriefing they received in the training and compared Day 2 and Day 3 on ratings of debriefing using Student's independent sample t-tests.

Moreover, because the quality of feedback and debriefing might affect the amount of confidence the trainees gained over the training, we conducted a multiple regression analysis to assess the relationship between trainees' ratings of the feedback and debriefing and their change in average confidence across the 13 skills. Instead of using change scores, which can yield misleading results, we regressed the average Day 5 confidence score (Y variable) on both the feedback and debriefing scores while controlling for average baseline score, which were used as covariates. This produces the most valid assessment of a variable's relationship to change[7]. The regression model included all the feedback variables and debriefing variables.

Results

To provide a context for interpreting results in this section, we provided a summary table of the key simulated activities of the training week (Table 2.2). Feedback from the training team—including simulation facilitators, actors/family members, medical and courtroom professionals—are given immediately after the associated simulated activities. Individual debriefings are specifically provided after the "Knock on the Door" and "Scene Investigation" simulations. Simulation facilitators conduct a group debriefing at the end of each day except Day 5. Problem Based Learning (PBL), a method to cultivate and reinforce trainees' critical thinking ability, is taught and used throughout the training week.

Of the survey respondents, 44.6% had a bachelor's degree and 43.5% had a master's degree (12.0% had missing data). Criminal Justice (21.2%), Social Work (20.1%), and Psychology (14.7%) were the most common majors among the respondents. In response to the question of years of your employment experience in the "Child Welfare field," 54.3%% had 3 years or less, including 34.2% with 0 years of experience. Table 2.3 presents the distributions for the questions

[7] Cohen, J., Cohen, P., West, S.G. & Aiken, L.S. (2003). *Applied multiple regression/correlation analysis for the behavioral sciences*. Second edition. Mahwah, NJ; Lawrence Erlbaum Associates.

regarding trainees' on-the-job training (OJT).[8] Most of the respondents (89.2%) had OJT for four week or less. Few respondents (3.3%) had OJT for eight weeks or more.[9] Most respondents spent time in their OJT shadowing seasoned investigators (76.6%), reading related documents (62.5%), and/or learning about the DCFS Statewide Automated Child Welfare Information System (SACWIS) (39.1%).

Table 2.2

Simulation Training Week Schedule

Day	Simulation
Day 1	***Calling the Reporter***: Trainees, as a group, interview the individual who called the hotline to make the report. A training staff person plays the reporter.
Day 2 *(In Person)*	***Knock on the Door***: Each trainee takes turns initiating contact with the family (standardized patients) at the mock house.
Day 3 *(In Person)*	***Scene Investigation***: Groups of two trainees take turns conducting a scene investigation in the presence of the perpetrators (standardized patients) at the mock house.
Day 4	***Interviewing the Parents***: All trainees formulate specific questions for parents (standardized patients) together. Trainees, as a group, interview the mock father and the mock mother separately in the classroom. ***Medical simulation***: Trainees are divided into two groups representing each child. Each group report the family situation and each child's information and communicate with the doctor played by a medical professional.
Day 5	***Courtroom Simulation***: Groups of two trainees prepare parents for the hearing. In the mock courtroom, each trainee provides a portion of the testimony in response to questions from the [state agency] attorney, parents' attorney, and guardian ad litem.

Table 2.3

Characteristics of On-the-Job-Training (N=184)

Time on OJT	**n**	**%**	**Tasks done during OJT**	**n**	**%**
None	15	8.2	Shadowed seasoned investigators	141	76.6
Less than 1 week	24	13.1	Read related documents	115	62.5
1-2 weeks	76	41.3	Learned about SACWIS	72	39.1
3-4 weeks	49	26.6	Worked on investigation reports	23	12.5
5-6 weeks	12	6.5	Other	11	6.0
7-8 weeks	2	1.1			
More than 8 weeks	6	3.3			

[8] We added the questions regarding the OJT during the pandemic because some trainees experienced a greater delay in receiving simulation training. They had more time on-the-job training (OJT) prior to receiving simulation training than other cohorts prior to the pandemic.

[9] In the FY2022 report, 94.7% of respondents had the OJT for four weeks or less.

Changes in Confidence Level Over the Course of the Training

Figure 2.1 shows the changes for the entire sample of FY2023 over six time points for the 13 DEST items measuring confidence in one's skills. The average trainee's confidence level increased between baseline and the last day across all 13 items. Confidence levels at baseline (Day 1 morning) ranged from an average of 4.5 (testify in court) to an average of 5.3 (integrate compassion and investigative skill). Confidence levels on Day 5 ranged between an average of 5.9 (testify in court) to an average of 6.2 (think critically on facts vs. hypotheses). As Table 2.3 shows, one-way ANOVAs testing a linear trend were statistically significant, indicating a significant linear increase in confidence over the course of the simulation-training week for all 13 skills.

Figure 2.1

Confidence Level by Time Point

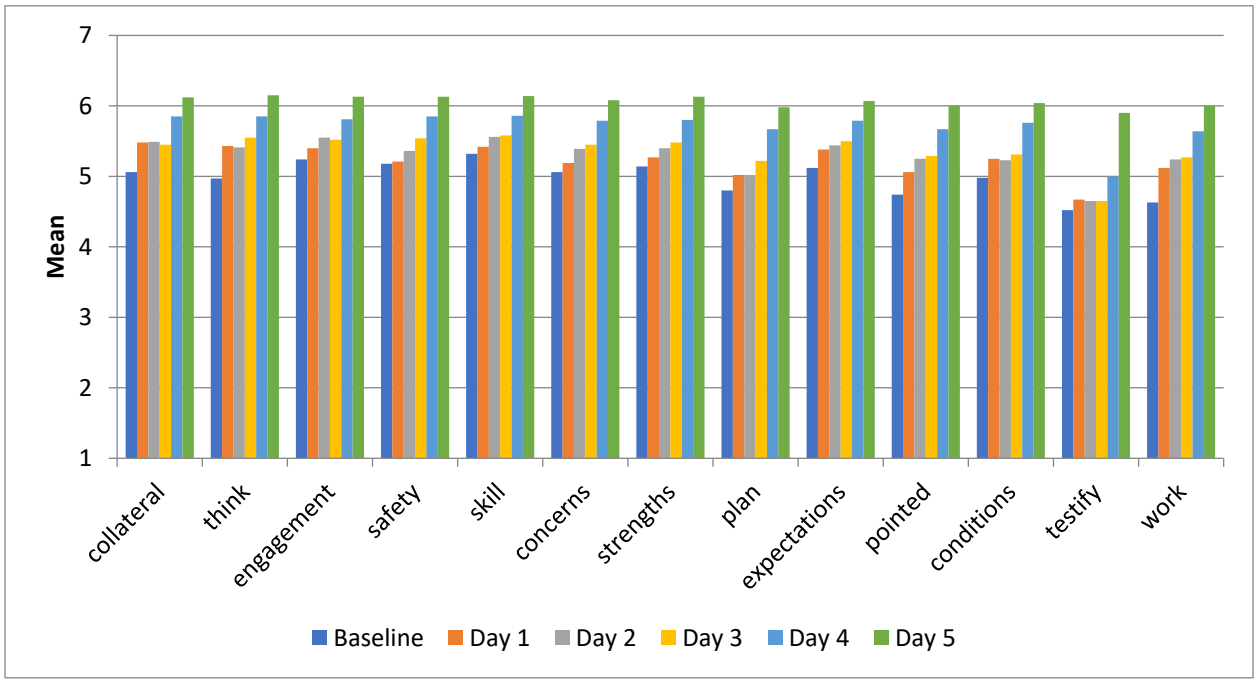


Table 2.4

One-way ANOVA Tests for Trends on Confidence over the Course of the Week (N=1,009)

	df	***Linear***	**Quadratic**	**η2[10]**
Gather info from collateral contacts	1, 1003	18.96***	1.19[a]	.07
Think critically on facts vs. hypotheses	1, 1002	25.73***	.42[b]	.10
Engage families	1, 1000	14.27***	3.02	.06
Assess safety	1, 993	21.65***	6.14*	.09
Integrate compassion and investigative skill	1, 999	12.62***	3.36	.06
Address any concerns about family statements and behaviors	1, 998	20.47***	2.29	.09
Identify family strengths	1, 996	17.88***	4.80*	.08
Explain need for safety plan and/or protective custody	1, 998	22.78***	6.93*	.09
Explain DCFS role and expectations for keeping children safe	1, 1000	15.12***	1.66	.07
Answer pointed questions from parents and caregivers	1, 988	25.26***	.93	.11
Address underlying conditions	1, 997	20.20***	5.63*	.08
Testify in court	1, 999	17.87***	21.74***[c]	.06
Work as a DCFS investigator	1, 997	24.71***	.20	.10
Total Scale Mean	1, 1002	25.17***	5.13*	.10

Note. *$p < .05$, ***$p < .001$; [a] F Deviation (3,1003)=3.78, $p < .01$, indicating a statistically higher order effect above the quadratic effect. [b]F Deviation (3,1002)=2.99, $p < .05$. [c] F Deviation (3,999)=2.70, $p < .05$.

Table 2.4 also shows significant quadratic and/or other higher order effects for some skills, meaning that some skills had "jumps" in trainee confidence on certain days in addition to the overall upward trend. Confidence in the skills of "gather info from collateral contacts," "think critically on facts vs. hypotheses," and "address underlying conditions" increased substantially from baseline to the end of Day 1, when these skills are first introduced and practiced, and then again on Days 4 and 5 (Figures 2.2, 2.3, and 2.7). At the end of Day 4, to conclude the simulated investigation and prepare trainees for the court testimony the next day, simulation facilitators specifically go over the safety threat assessment, client strengths, and safety plans in the PBL framework. This might contribute to the results related to the increased rating of "thinking critically regarding facts versus hypotheses," "safety assessment," and "identify family strengths" on Day 4 (Figures 2.3, 2.4, 2.5). Confidence in the skill of "explaining the need for a safety plan and/or protective custody" increased substantially starting at Day 4. The simulated interviews with alleged perpetrators on Day 4 focused on this specific skill (Figure 2.6). Confidence in "testifying in court" was fairly low from baseline to Day 4, and then increased substantially on Day 5, the day of the courtroom simulation (Figure 2.8).

[10] Cohen (1988) has provided benchmarks to define small (η2 = 0.01), medium (η2 = 0.06), and large (η2 = 0.14) effects.

Results for the effect size measures eta squared (η2) for the linear effects, and Cohen's d comparing the DEST scores at baseline and the last day are presented in Tables 2.4 and Table 2.5. According to Cohen's (1988)[11] guidelines, most of the effect sizes were in the medium to large range (i.e., η2 = .06 to .11, or d = .81 to 1.09). Cohen (1992, p. 156)[12] has described a medium effect as "an effect likely to be visible to the naked eye of a careful observer" and a large effect as noticeably larger than a medium effect.

Figure 2.2

Confidence in "Gathering Information from Collateral Contacts"

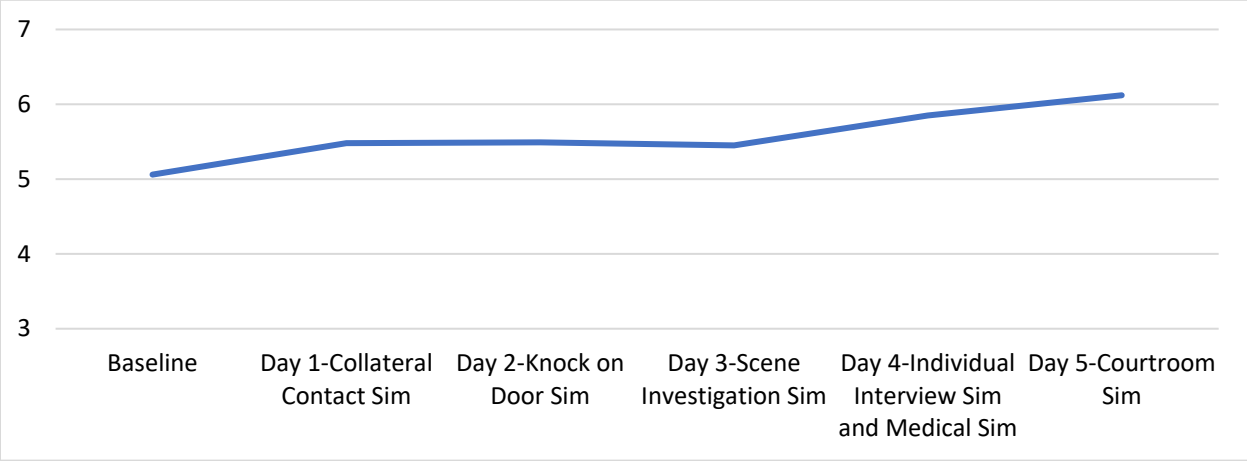


Figure 2.3

Confidence in "Thinking Critically Regarding Facts versus Hypotheses"

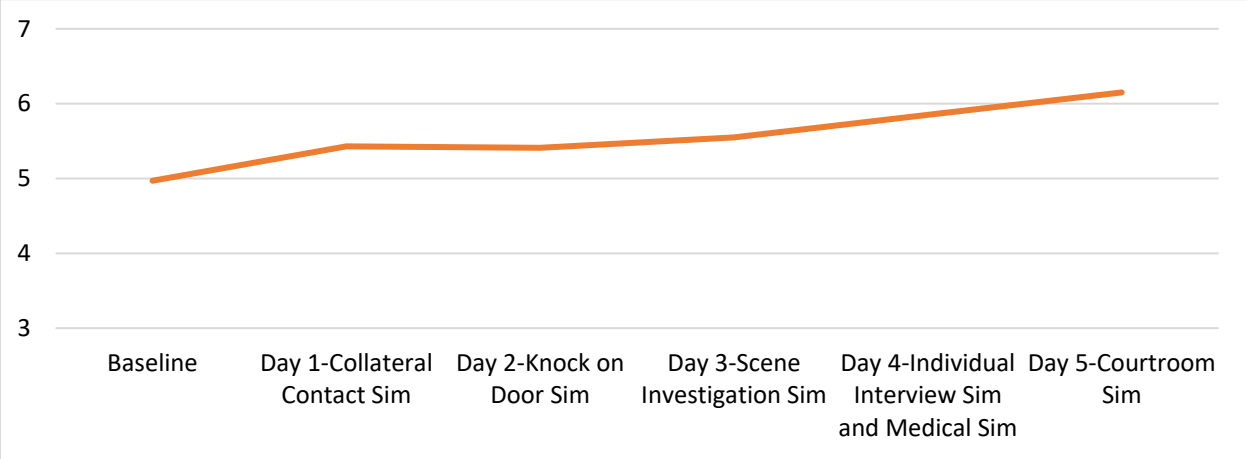


Figure 2.4

Confidence in "Assess safety"

[11] Cohen, J. (1988). *Statistical Power Analysis for the Behavioral Sciences*. New York, NY: Routledge Academic.
[12] Cohen, J. (1992). A power primer. *Psychological Bulletin*, 112, 155-159.

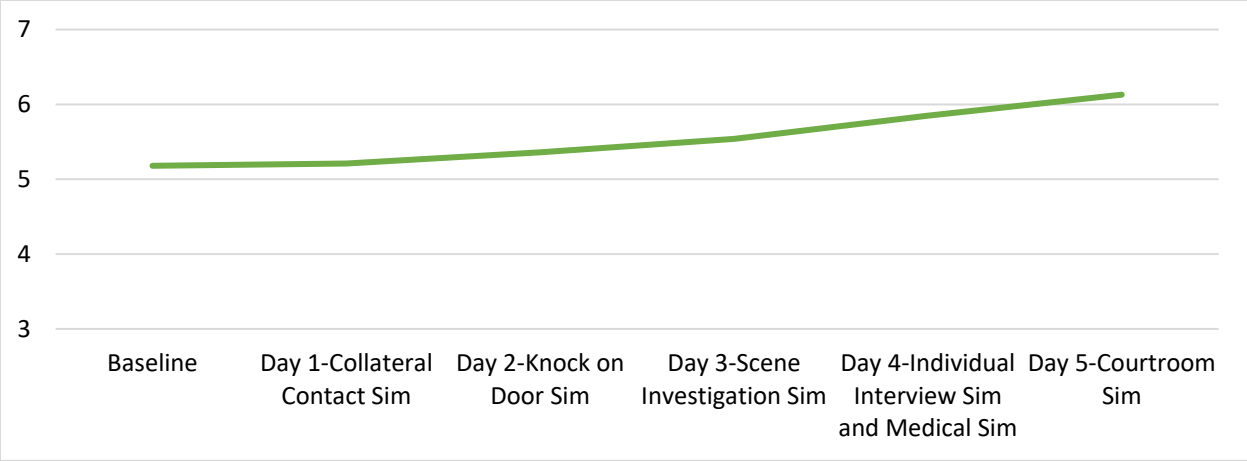


Figure 2.5

Confidence in "Identify family strengths"

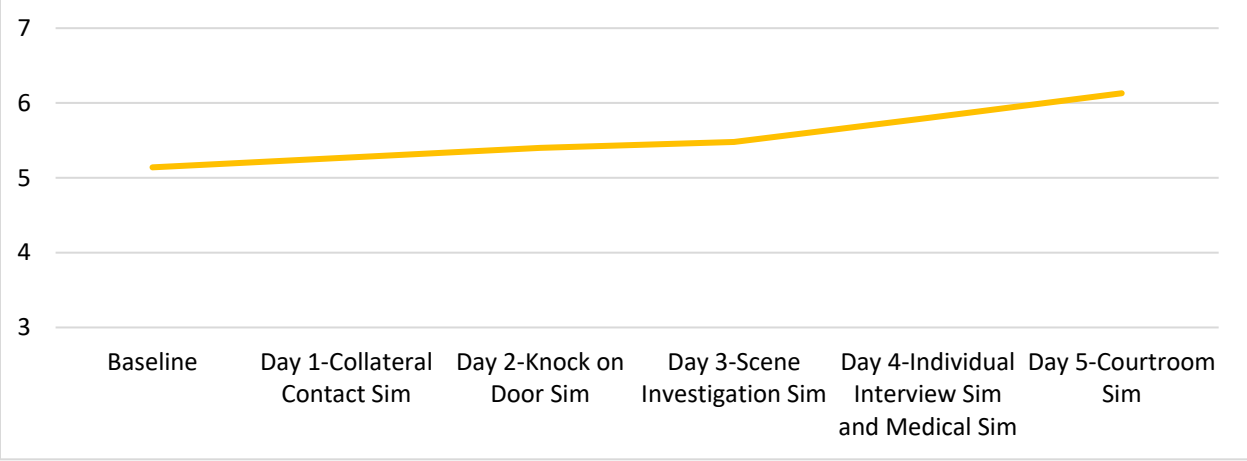


Figure 2.6

Confidence in "Explaining the Need for a Safety Plan and/or Protective Custody"

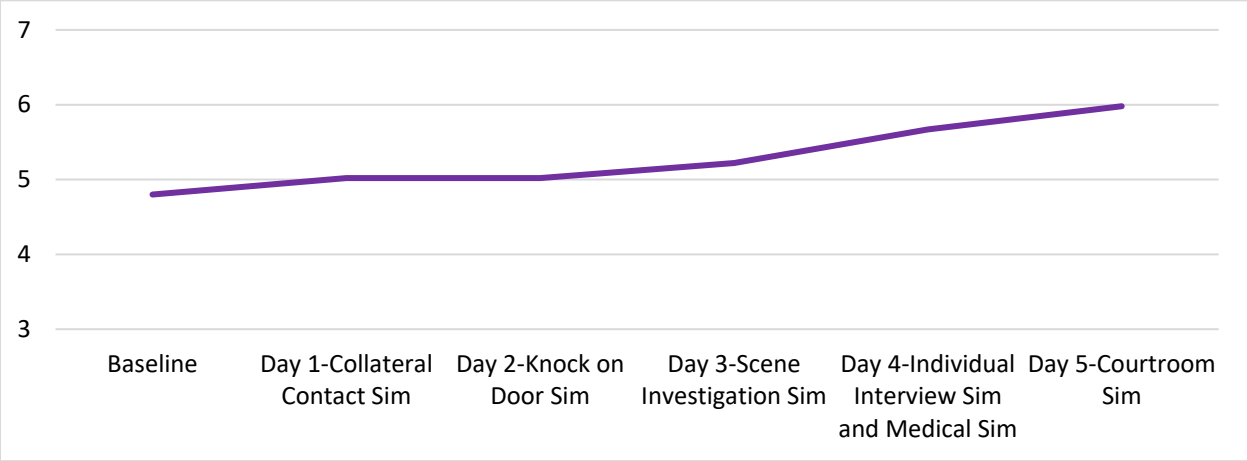


Figure 2.7

Confidence in "Address underlying conditions"

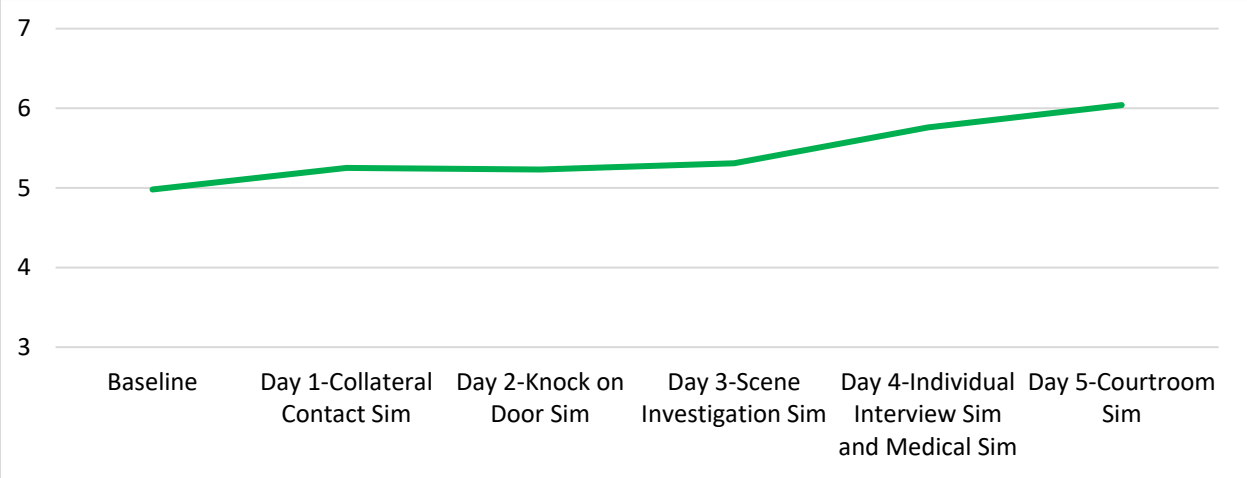


Figure 2.8

Confidence in "Testifying in Court"

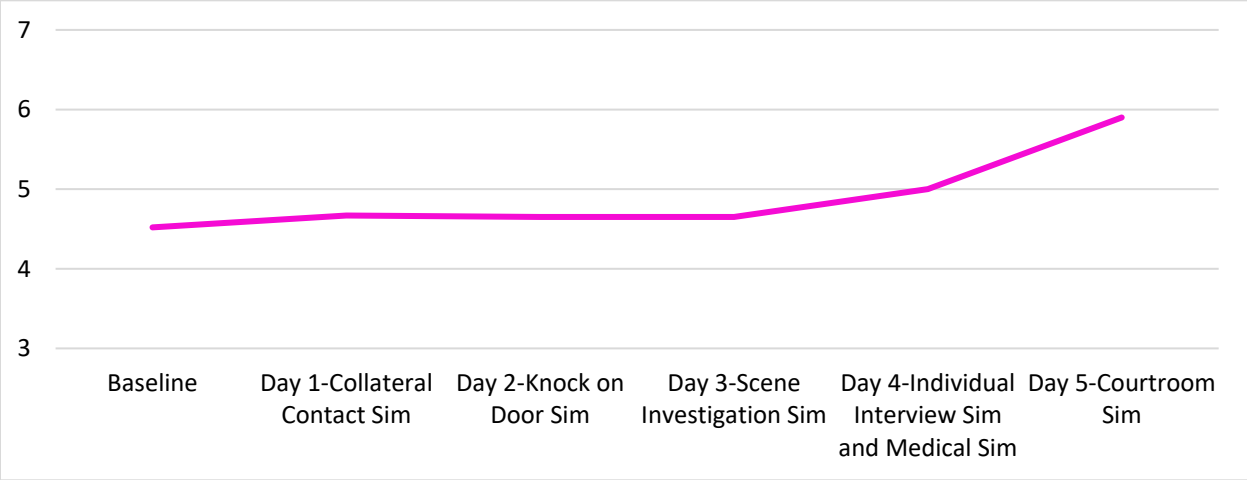


Table 2.5

Statistics for Change between Baseline and Last Day of Simulation Training

Confidence Scale	Baseline		Friday		Cohen's d[13]
	Mean	SD	Mean	SD	
Gather info from collateral contacts	5.1	1.36	6.1	0.82	0.94
Think critically on facts vs. hypotheses	5.0	1.33	6.2	0.80	1.08
Engage families	5.2	1.29	6.1	0.86	0.81
Assess safety	5.2	1.26	6.1	0.81	0.90
Integrate compassion and investigative skill	5.3	1.30	6.1	0.83	0.75
Address any concerns about family statements and behaviors	5.1	1.30	6.1	0.87	0.92
Identify family strengths	5.1	1.29	6.1	0.85	0.91
Explain need for safety plan and/or protective custody	4.8	1.47	6.0	0.93	0.96
Explain DCFS role and expectations for keeping children safe	5.1	1.30	6.1	0.87	0.86
Answer pointed questions from parents and caregivers	4.7	1.37	6.0	0.88	1.09
Address underlying conditions	5.0	1.31	6.0	0.89	0.95
Testify in court	4.5	1.78	5.9	1.06	0.94
Work as a DCFS investigator	4.6	1.59	6.0	0.92	1.05
Total Scale Mean	5.0	1.15	6.1	0.80	1.09

[13] The rule of thumb on magnitudes of Cohen's is that d = 0.2 is small; d=0.5 is medium; and d=0.8 is large (Cohen, 1988, 1992).

Changes in Confidence Level with the Repeated Measure Sample

Although 129 respondents completed at least part of the survey at every time point during the FY2023, three of the respondents had more than 25% missing data on the confidence items. Excluding the three respondents, a repeated measures ANOVA was conducted with the 126 respondents. Differences across time points were statistically significant for all 13 items (Figure 2.9 and Table 2.6). Consistent with the findings in the previous section, the confidence of respondents on performing the 13 investigative skills showed a significant linear increase over the course of simulation training week and the effect sizes were in the medium to large range (i.e., $\eta 2 = .06$ to $.13$, or $d = .73$ to 1.09) (Table 2.6 and 2.7). As Figure 2.9 illustrates, confidence increased steadily for almost all skills across the simulation training week. The skills of "answer pointed questions from parents and caregivers" and "testify in court" showed a somewhat different pattern. The average confidence score for "answer pointed questions from parents and caregivers" increased substantially on Day 4 and Day 5 after the simulation of interviewing the parents. The average confidence score for "testify in court" stayed near baseline until Day 4, when it increased substantially—Day 5 was the day trainees did the courtroom simulation and the preparation for the testifying occurred on Day 4 afternoon.

Figure 2.9

Changes in Confidence Level over 6 Time Points of the Simulation Training Week

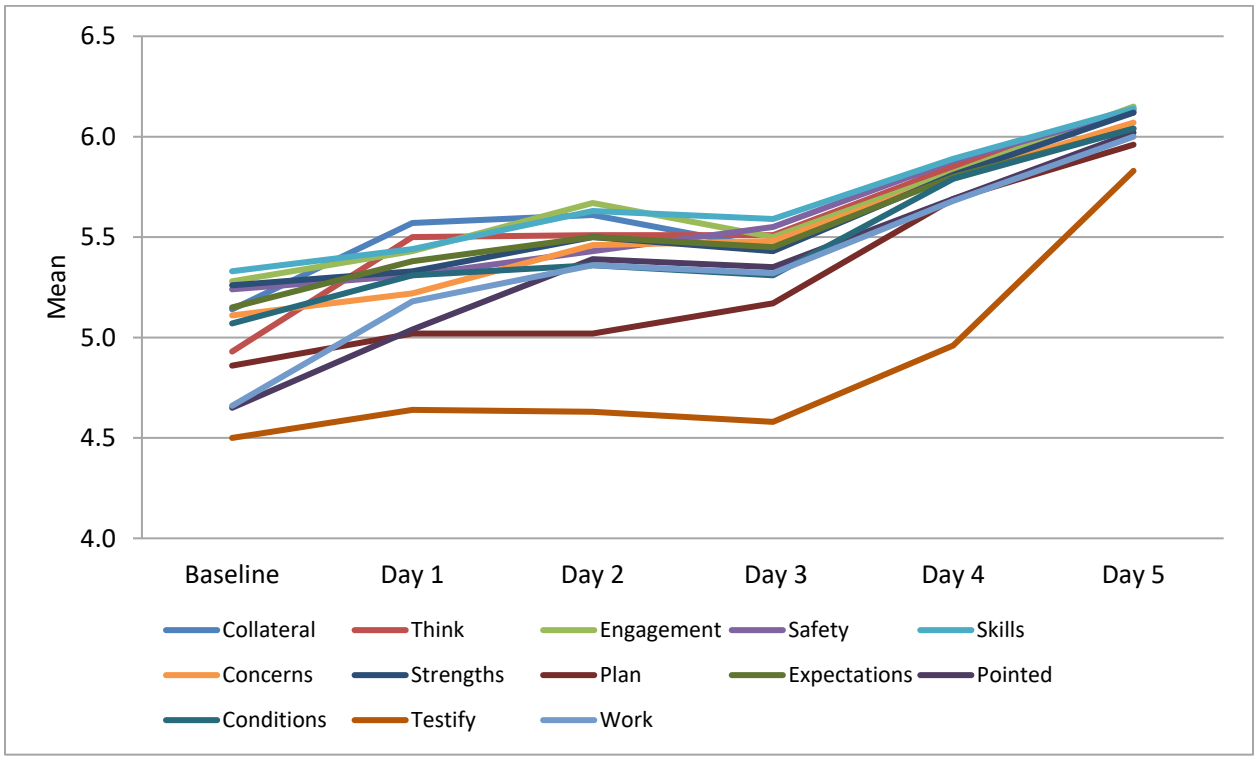


Table 2.6

Repeated Measures Analysis of Variance Test of Linear Effects (all p < .001)

Confidence Scale	N	*F*	η2
Gather info from collateral contacts	126	29.78	0.08
Think critically on facts vs. hypotheses	123	40.33	0.11
Engage families	124	22.65	0.07
Assess safety	119	30.02	0.09
Integrate compassion and investigative skill	123	21.79	0.06
Address any concerns about family statements and behaviors	122	29.87	0.09
Identify family strengths	121	24.18	0.07
Explain need for safety plan and/or protective custody	121	36.69	0.09
Explain DCFS role and expectations for keeping children safe	123	24.64	0.06
Answer pointed questions from parents and caregivers	115	42.74	0.13
Address underlying conditions	121	28.71	0.08
Testify in court	125	43.17	0.08
Work as a DCFS investigator	122	41.35	0.11
Total Scale Mean	126	54.53	0.11

Table 2.7

Statistics for Changes between Baseline and Last Day of Simulation Training-Repeated Measures Analysis of Variance Sample

Confidence Scale		Baseline		Friday		Cohen's
	N	Mean	SD	Mean	SD	*d*
Gather info from collateral contacts	126	5.1	1.29	6.1	0.80	0.93
Think critically on facts vs. hypotheses	126	4.9	1.32	6.1	0.80	1.09
Engage families	126	5.3	1.28	6.2	0.84	0.79
Assess safety	126	5.2	1.27	6.1	0.80	0.84
Integrate compassion and investigative skill	124	5.4	1.26	6.1	0.83	0.73
Address any concerns about family statements and behaviors	124	5.1	1.27	6.1	0.87	0.88
Identify family strengths	125	5.3	1.23	6.1	0.81	0.85
Explain need for safety plan and/or protective custody	126	4.9	1.48	5.9	0.94	0.87
Explain DCFS role and expectations for keeping children safe	125	5.1	1.33	6.1	0.87	0.82
Answer pointed questions from parents and caregivers	123	4.7	1.38	6.0	0.88	1.09
Address underlying conditions	126	5.0	1.29	6.0	0.90	0.89
Testify in court	126	4.5	1.77	5.8	1.10	0.89
Work as a DCFS investigator	126	4.7	1.56	6.0	0.91	1.04
Total Scale Mean	126	5.0	1.11	6.1	0.80	1.07

Comparing Fully Live Training and the Hybrid Model on Trainee Confidence.

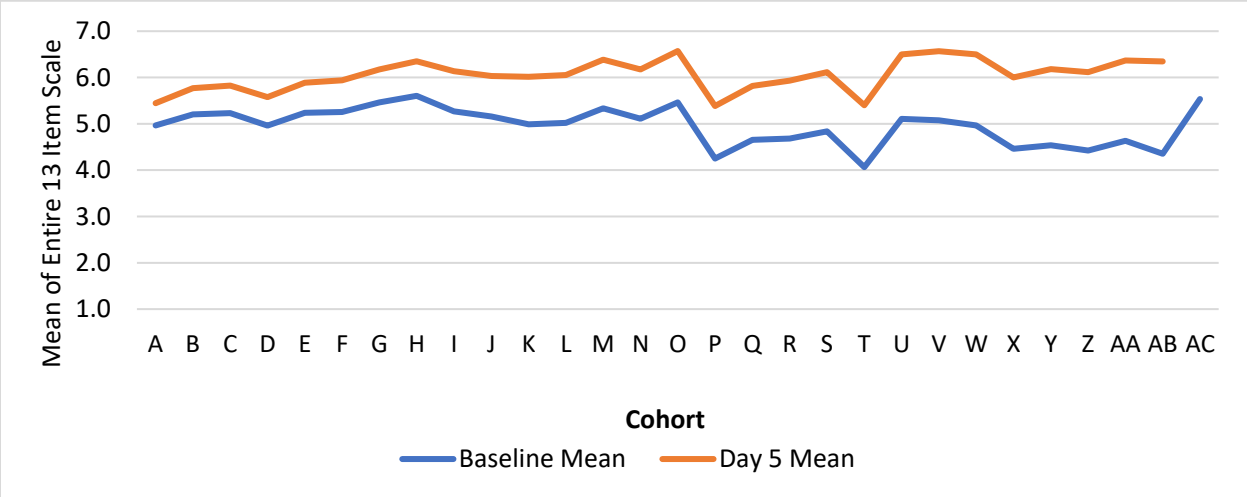
Trainees who experienced fully live training did not differ significantly on confidence from trainees who experience the hybrid model. There were statistical trends for the items *Answer pointed questions from parents and caregivers* (p=.056) and *Work as a DCFS investigator* (p=.071), with slightly higher scores for trainees that experienced the hybrid model versus those who experienced fully live training. It should be noted, however that the hybrid model was implemented at a later time period than fully live training, Scores being higher during the hybrid model time period might reflect program improvements the Chicago laboratory has been making over time.

Examining DEST Results Across Cohorts

Comparing DEST results across cohorts enables us to see if changes in trainees' confidence have been consistent across trainings. We examined DEST results by training cohort for 29 cohorts from March 2022 to March 2023. Chicago staff trained most of the cohorts this fiscal year and Springfield staff trained some cohorts prior to the end of June 2022. The sample size of each cohort ranged from 2 to 9. Figure 2.10 depicts the results of the cohorts in order from smallest to greatest change. The blue line shows the mean confidence level (across the 13 skills) at baseline for each cohort and the orange line shows the mean confidence level for each cohort at week's end. Thus, the gap between the blue line and orange line represents the increase in confidence over the course of the week. We can see that there is a noticeable gap for all but one cohort between the blue line and the orange line, indicating substantial change in most weeks. Note that the cohort AC did not have the Day 5 data because none completed the DEST on the day. Though the sample size of each cohort is small, these results suggest that most cohorts, on average, experienced meaningful increases in confidence during virtual simulation training.

Figure 2.10

Trainee Confidence Levels at the Beginning and End of the Simulation Training Week by Cohort in FY2023



Note. The cohort AC did not have the Day 5 data because none completed the DEST on the day.

On-the-Job-Training and Confidence Level

Last year, analysis with Kendall's tau statistic showed that those with longer OJT tended to be slightly more confident than those with shorter OJT. However, the results from the same analysis with this year's respondents showed no statistically significant relationship between OJT and confidence.

Appraisal of Feedback and Debriefing

Feedback from the training team during individual and group debriefings is important for facilitating trainees' learning. In the DEST, we asked participants to rate the helpfulness of the training team's feedback and the effectiveness of individual and group debriefings. Each day trainees were asked to rate the helpfulness of whatever feedback they received that day: the simulation facilitator from Day 1 to Day 4, actors/standardized patients on Day 2 and Day 3, medical professionals on Day 4, and courtroom professionals on Day 5. Note that the rating of classroom trainer's feedback was excluded because the classroom trainers did not always attend the simulation training with their trainees after the training format was changed to be virtual. Each time trainees answered the question about feedback, 95% or more reported that the feedback was helpful or very helpful. This was true for each contributor to the training and for each day that this was measured (Table 2.9). Note that 184 trainees in total participated in the survey. There was a fairly high rate of missing data for the feedback questions, from 8% (Day 1 for simulation facilitators) to 35% (Day 3 for actors/family members), as compared to rates of missing data for the confidence scales (between 3% and 16%).

Respondents were also asked to rate the effectiveness of their group debriefing every day between Day 1 and Day 4 and individual debriefing on Day 2 and Day 3 (individual debriefing was only provided on those two days). Three specific prompts were presented: 1) debriefing identified the areas in which I need to grow; 2) debriefing provoked in-depth discussion that led me to reflect on my skills; and 3) debriefing allowed me to connect with class materials and their practical application.[14] A seven-point rating scale was used, ranging from 1-Extremely ineffective to 7-Extremely effective. Over 77% of respondents rated the effectiveness of group debriefing at 5 or above across all three areas. The positive ratings for group debriefing also increased significantly from Day 1 to Day 4 (see Figure 2.11 and Table 2.10). The effectiveness of group debriefing during Day 2, Day 3, and Day 4 were significantly better than on Day 1. The effect sizes were in the small to medium range ($\eta 2$ = .02 to .03). Across Day 2 and Day 3, over 84% of respondents rated the effectiveness of individual debriefing 5 or above across all three areas (see Figure 2.12). There was not a statistically significant difference between Day 2 and Day 3 in the ratings for individual debriefing. The positive ratings of debriefing support the conclusion that both group and individual debriefings helped facilitate learning.

[14] The Center for Medical Simulation (2009). *Debriefing Assessment for Simulation in Healthcare (DASH).* Authors: Boston, MA. https://www.unmc.edu/academy/community/simulation/wp-content/uploads/sites/5/2017/04/IMSH_2009_DASH.pdf

Table 2.9

Trainees' Ratings of Training Team's Feedback by Days

	Day 1		Day 2		Day 3		Day 4		Day 5	
	n	%	n	%	n	%	n	%	n	%
Simulation Facilitators										
Very unhelpful	2	1.2%	3	1.9%	2	1.4%	1	0.6%	-	-
Not helpful	2	1.2%	2	1.2%	1	0.7%	0	0.0%	-	-
Helpful	47	27.6%	33	20.4%	32	21.8%	35	21.7%	-	-
Very helpful	119	70.0%	124	76.5%	112	76.2%	125	77.6%	-	-
Total	**170**	**100%**	**162**	**100%**	**147**	**100%**	**161**	**100%**	-	-
Actors/Family members										
Very unhelpful	-	-	5	3.1%	2	1.7%	-	-	-	-
Not helpful	-	-	2	1.3%	4	3.3%	-	-	-	-
Helpful	-	-	33	20.6%	25	20.8%	-	-	-	-
Very helpful	-	-	120	75.0%	89	74.2%	-	-	-	-
Total			**160**	**100%**	**120**	**100%**	-	-	-	-
Medical Professionals										
Very unhelpful	-	-	-	-	-	-	1	0.6%	-	-
Not helpful	-	-	-	-	-	-	0	0.0%	-	-
Helpful	-	-	-	-	-	-	39	24.8%	-	-
Very helpful	-	-	-	-	-	-	117	74.5%	-	-
Total	-	-	-	-	-	-	**157**	**100%**	-	-
Courtroom Professionals										
Very unhelpful	-	-	-	-	-	-	-	-	0	0%
Not helpful	-	-	-	-	-	-	-	-	1	0.6%
Helpful	-	-	-	-	-	-	-	-	15	9.3%
Very helpful	-	-	-	-	-	-	-	-	145	90.1%
Total	-	-	-	-	-	-	-	-	**161**	**100%**

Figure 2.11

Appraisal of Group Debriefing Effectiveness

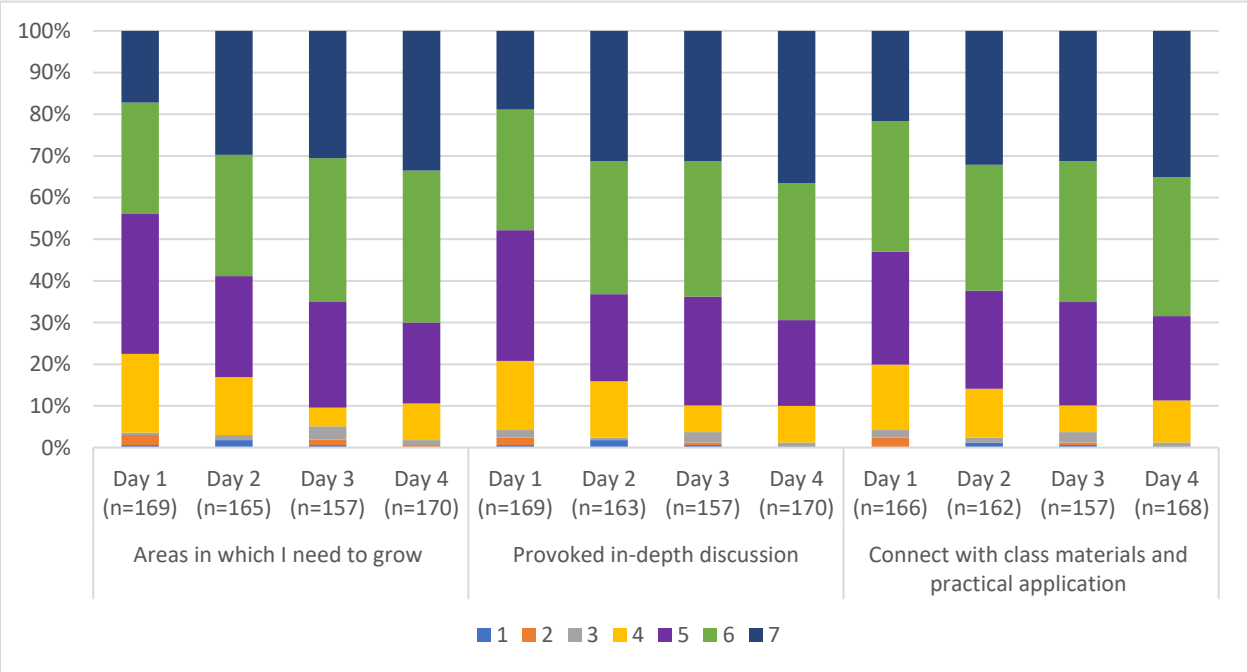


Figure 2.12

Appraisal of Individual Debriefing Effectiveness

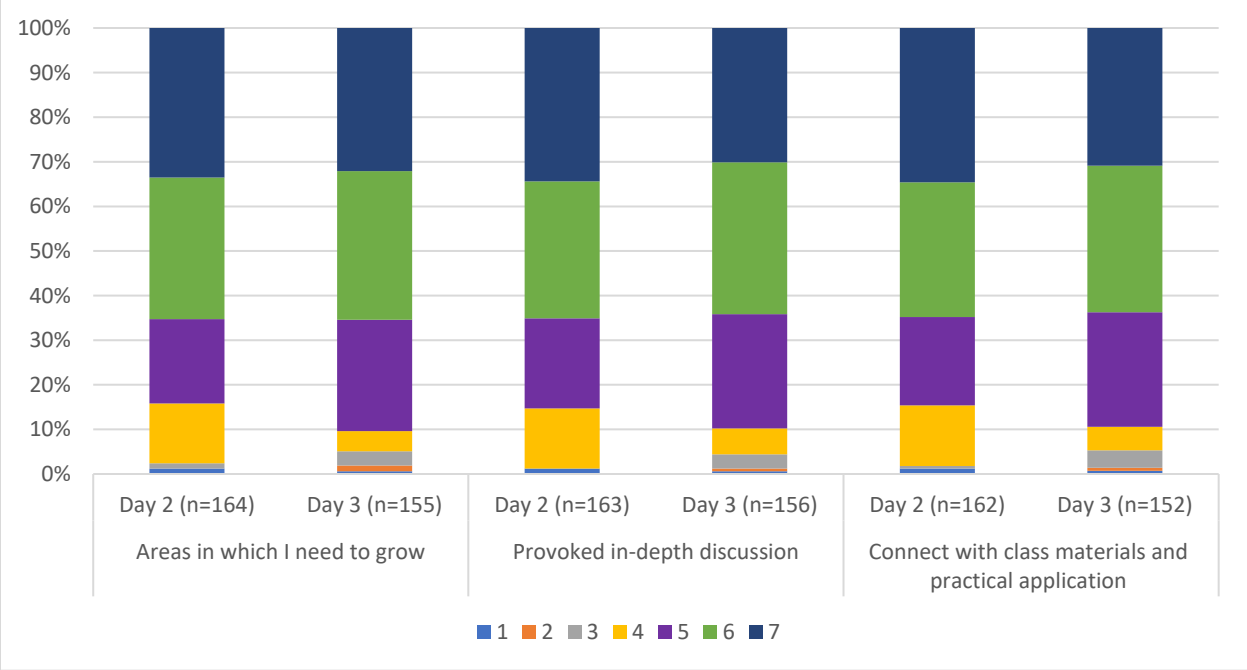


Table 2.10

One-way ANOVA Comparison of Group Debriefing Effectiveness by Training Day

	df	Linear	η2	Post Hoc Comparison of Means Test
Areas in which I need to grow	1, 657	8.21***	0.03	Day4 > Day1; Day 3> Day 1; Day 2> Day 1
Provoked in-depth discussion	1, 655	7.12***	0.03	Day4 > Day1; Day 3> Day 1; Day 2> Day 1
Connect with class materials and practical application	1, 649	4.31***	0.02	Day4 > Day1; Day 3> Day 1

Note. ***p < .001

Because the quality of feedback and debriefing might affect the amount of confidence trainees gained over the training, we conducted a hierarchical multiple regression analysis to assess the relationship between trainees' ratings of the feedback and debriefing and their change in average confidence across the 13 skills. As Table 2.11 shows, we entered the following sets of variables into the regression model in sequence:[15] a) average baseline confidence score, b) helpfulness of feedback ratings (for simulation trainers, actors/family members, medical professionals, and courtroom professionals), c) ratings of effectiveness of group debriefing (for Days 1, 2, 3, and 4), and d) ratings of effectiveness of individual debriefing (for Days 2 and 3). The four helpfulness of feedback variables explained 7.9% of the variance in average Day 5 confidence scores, over and above what was explained by average baseline confidence scores [*F* change (4, 104) = 3.625, *p* = .008]. Similarly, the four group debriefing variables explained 9.5% of the variance in average Day 5 confidence, over and above the previous variables in the model [*F* change (4, 100) = 5.022, *p* < .001]. These results indicate that perceptions of helpfulness of the feedback and effectiveness of the debriefing were both significantly related to increases in trainees' confidence. The set of individual debriefing variables were not significantly related to changes in trainees' confidence over and above the effects of the feedback and group debriefing variables (but see below for result suggesting a possible effect of individual debriefing on Day 2). These results are similar to those from a hierarchal regression analysis reported in the last year's program evaluation report, though the method of analysis was slightly different (Table 2.11).

The results for the individual predictor variables in Table 2.11 further our understanding of the relationship of feedback and debriefing to increases in confidence. Ratings of feedback from different participants (trainers, actors/family members, medical professionals, and courtroom professionals) were all correlated. No one source of feedback had a greater effect than another source—it was the set of feedback variables from different sources that had a significant effect. While the set of group debriefing variables also had a significant relationship to increases in

[15] See Cohen, Cohen, West & Aiken, ibid.

confidence, it was the group debriefing on Day 4 that had the largest effect, an effect that was statistically significant in itself. Finally, there was a statistical trend (p=.058) suggesting that individual debriefing on Day 2 may have added independently to increasing trainees' confidence.

Table 2.11

Final Multiple Regression Model Predicting Day 5 Confidence Score (Mean) (N=110)

Variables	*B*	*SE*	*Beta(β)*	*p*	R^2 *Change*	*Sig. F Change*
Baseline Confidence Score (Mean)	.287	.054	.422	<.001	.352	<.001
Helpfulness of Simulation Trainers' Feedback (Mean)	-.178	.268	-.072	.508	.079	.008
Helpfulness of Actors/Family Members' Feedback (Mean)	-.173	.170	-.099	.310		
Helpfulness of Medical Professionals' Feedback	.230	.167	.132	.172		
Helpfulness of Courtroom Professionals' Feedback	.095	.186	.041	.610		
Effectiveness of Group Debriefing-Day 1 (Mean)	.064	.069	.090	.359	.095	<.001
Effectiveness of Group Debriefing-Day 2 (Mean)	-.088	.110	-.118	.427		
Effectiveness of Group Debriefing-Day 3 (Mean)	.016	.113	.021	.887		
Effectiveness of Group Debriefing-Day 4 (Mean)	.243	.100	.296	.017		
Effectiveness of Individual Debriefing-Day 2 (Mean)	.210	.110	.274	.058	.018	.146
Effectiveness of Individual Debriefing-Day 3 (Mean)	-.051	.095	-.075	.594		

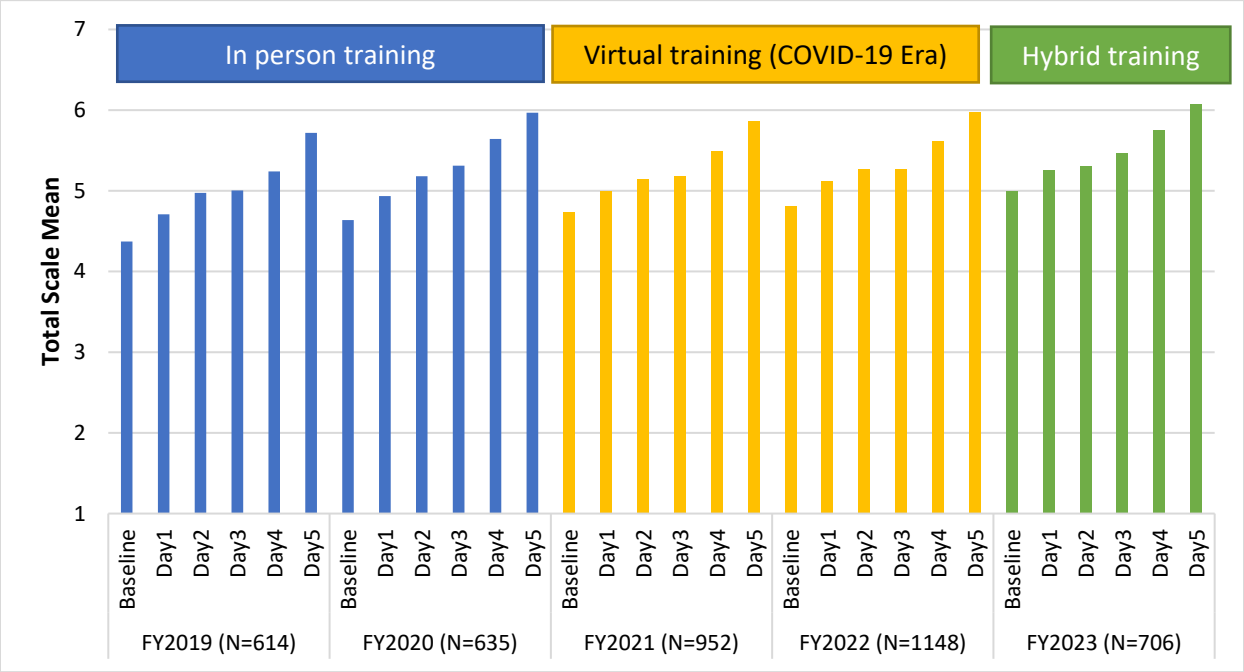
***Note*.** Constant = 2,316, *F* (11,109) = 10.65, *p*<.001, R^2 = .544. Font colors show sets of variables that were entered into a hierarchical multiple regression model in sequence.

Historical Comparison on DEST Results over Time

The DEST has been used continuously since 2018 to assess simulation training in the CPTA. This enables us to compare results on the DEST over the course of four fiscal years: 2019 to 2023. As Figure 2.13 shows, the results are similar for each fiscal year. There were comparable confidence scores and comparable increases in confidence from Day 1 to Day 5 for each fiscal year.

Figure 2.13

Confidence Level by Time Point by Fiscal Year[16]



Discussion

The Daily Experience of Simulation Training (DEST) provides valuable real-time data on trainees' changes in confidence during simulation training. It is the only evaluation method to date that measures change over the course of the simulation training week. All but one of the simulation training participants completed the DEST at least once during their training week. The high response rates enhance the validity of the results. This year was the last year that contained the data from the trainings at Springfield. The DEST in FY2023 continued to show statistically significant linear increases in confidence for all the 13 skills, with effect sizes in the medium to large range despite several changes of training.[17] This suggests that simulation training is helping increase trainees' confidence in their skills over the course of the training week.

The cohort analysis also showed that increases in confidence were consistent across 27 cohorts in FY2023, including both cohorts with Springfield trainees and Chicago trainees.[18] Because sample sizes for this analysis were small and the reliability of individual results is limited, we

[16] FY2023 in this figure only included the data from July 1, 2022, to March 28, 2023, due to the cutting date for this year's analyses.

[17] Several changes were made during this year: 1) the training was switched back to be fully in person between April to September ; 2) Instead of splitting the training into two weeks, the training was changed back to be within a week, starting with Day 1 on Mondays and ending with Day 5 on Fridays; 3) after September 12 2022, the training was modified as a hybrid model: Day 2 and Day 3 trainings are in person and the rest of training days are via a video conferencing.

[18] There were 28 cohorts in total; yet one cohort did not complete the Day 5 DEST.

think it is inadvisable to examine individual cohorts with smaller changes in the DEST. A better use of the cohort results is to conclude that increases in confidence during the simulation training week are typical but not guaranteed, so quality control remains important.

The analysis concerning trainees' OJT and confidence level showed a different result from last year. Last year, we found that those with longer OJT tended to be slightly more confident than those with shorter OJT.[19] The same analysis with this year's sample showed no statistically significant relationship between OJT and confidence. This may reflect changes that have occurred over time in the OJT trainees receive.

In terms of the appraisal of the training team, each member of the simulation team included in the analysis continued to receive positive feedback from large majorities of trainees this year. The results concerning the helpfulness of feedback and effectiveness of debriefing with the training team suggest the importance of these elements of the training, since higher ratings on feedback and debriefing were related to greater increases in confidence. Trainers may want to reflect on why the group debriefing on the Day 4 simulations (the Interviewing the Parents Simulation and Medical Simulation) and the individual debriefing on the Day 2 (Knock on the Door simulation) had the biggest effect on increased confidence. Understanding this may help trainers maximize the impact of all debriefings.

One limitation of the DEST is that it measures trainees' subjective sense of their abilities and is not an objective measure of their skills. So, we cannot know for certain from the DEST whether trainees' skills are actually increasing over the course of simulation training. Nevertheless, it is sensible to judge that trainees have a reasonably accurate appraisal of their own skills. Moreover, developing confidence through training is certainly a prerequisite to doing one's job well, and people's appraisal of their skills is likely to be correlated with their actual skills, even though correlation may be modest. In addition, training is unlikely to be effective if trainees do not believe that their skills are increasing.

Another limitation is that changes in trainees' confidence is an imperfect measure of the impact of simulation training. Our thinking was that the most plausible explanation for changes in confidence during the training is the effect of what the trainers provided. But an alternative explanation is possible. Trainees may give themselves ratings indicating increasing confidence but believe that this was due to their own effort to learn the skills during the week, and not credit the trainers with help in increasing their confidence. The high ratings on both feedback and debriefing suggest that trainees do credit the training team with helping them, and a regression analysis suggests that more value placed on the courtroom professionals' feedback and individual debriefing predicts greater increase in confidence. These results suggest that simulation training is likely to improve trainees' confidence.

Despite these limitations, the DEST provides important information on trainees' experience of the simulation training experience and data on their appraisal of growth in skills that are important for practice. It has provided consistent data on every cohort of simulation training for

[19] Cross, T.P., Chiu, Y. L., Havig, K., & Tran, S.(2022). *FY2022 Program Evaluation of the Child Protection Training Academy for New DCFS Investigators.* Report to Illinois Department of Children and Family Services. Urbana, IL: Children and Family Research Center, University of Illinois at Urbana-Champaign.

several years, suggesting the impact of the training experience and offering data that assist in quality control. Results from these data consistently indicate that trainees experience increases in skills over the course of simulation training and support the value of the training.

Chapter 3: FY2023 Post-Training Satisfaction Survey

All newly hired child protection investigators participate in Certification Training for Child Protection, which includes five weeks of classroom training followed by five days of simulation training. DCFS administers an online post-training satisfaction survey to trainees on the Certification Training experience. Ten survey questions ask about trainees' assessment of simulation training. Survey respondents provide written responses to two open-ended questions about their appraisal of simulation training and rate the quality of simulation training on eight Likert-scaled questions. For this year's evaluation, DCFS provided data from the post-training survey from March 3, 2022, to February 21, 2023. This chapter analyzes quantitative data on simulation training from the FY2023 post-training survey to assess trainees' experience of simulation training. Data from the open-ended questions of the post-training survey are analyzed in Chapter 5, along with data from the open-ended questions

Methods

The post-training survey includes eight items in which trainees rated the quality of simulation training on 5-point Likert scales that range from strongly disagree to strongly agree. We computed descriptive statistics for the entire sample on these scales. Table 4.1 displays the associated labels for each of the respective questions in the survey. Because of the changes in the administration of simulation training over time, we also a) used analysis of variance (ANOVA) to compare the mean satisfaction item scores from Fiscal Years of 2022 and 2023, and b) compared trainees by the training model they experienced: purely virtual, in-person, and hybrid. In the latter, we also include laboratory site (Chicago vs. Springfield) as a between-subjects factor to render the test of training model independent of site effects. It should be noted that analyses a) and b) are related and will likely yield similar results, since purely virtual methods were used for most of Fiscal Year 2022, while the hybrid model started in Fiscal Year 2023.

Table 4.1

Simulation training satisfaction questions in the survey

Label	Question in the survey
Prepared	I felt prepared to participate in the SIM lab.
Environment	The simulation environment was a safe learning environment.
Learning	I felt the training was conducted in an environment conducive to learning.
Realistic Scenario	The scenario environment was realistic. I was able to incorporate my training into practice.
Realistic Experience	The SIM lab provided a realistic experience of the challenges I will face when working in the field.
Confidence	Participating in the scenarios helped to increase my confidence in my role.
Respected	I felt respected during my debriefing.
Feedback	The debriefing sessions provided valuable feedback.

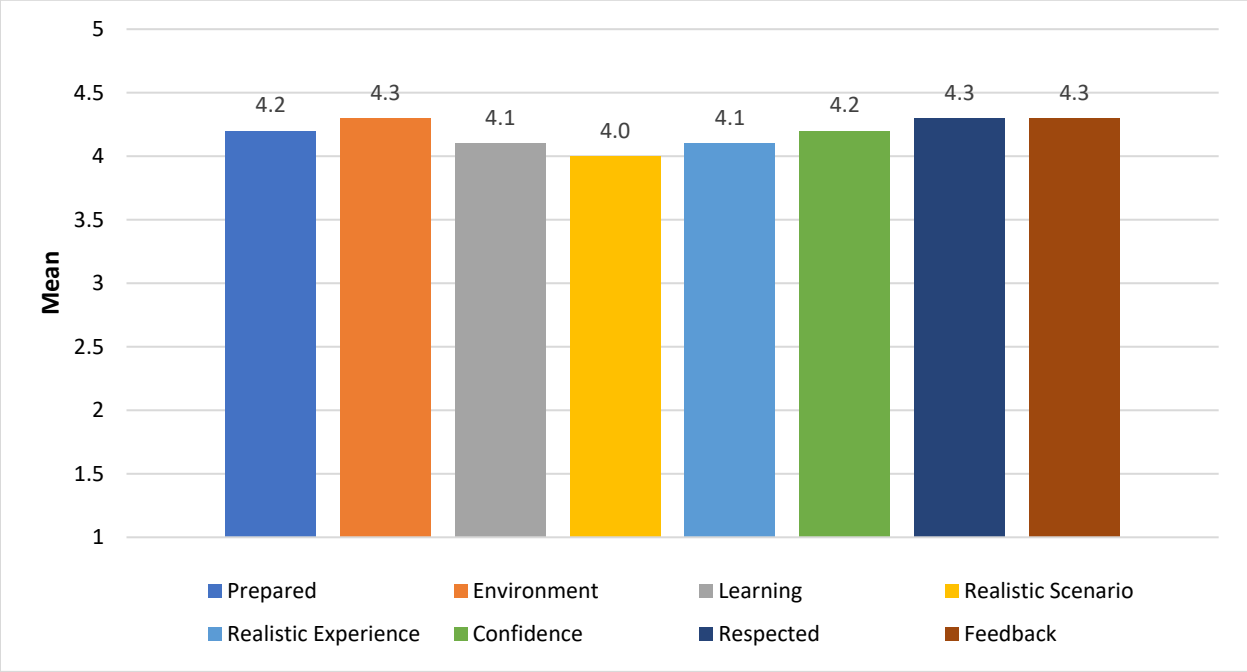
Results

Simulation Training Satisfaction

There was a total of 113 survey respondents from the observed period from March 3, 2022, - February 21, 2023. On the 5-point scale (strongly disagree=1; disagree=2; undecided=3; agree=4; strongly agree=5), the mean on the eight items ranged from 4.0 (realistic scenario) to 4.3 (environment, respected, feedback; see Figure 4.1). Based on these data, the average response across all items was at least "agree," which suggests some degree of satisfaction for the overall group of participants. Figure 4.2 shows the distribution of ratings on the satisfaction items for the entire sample of FY2023 (N=113).

Figure 4.1

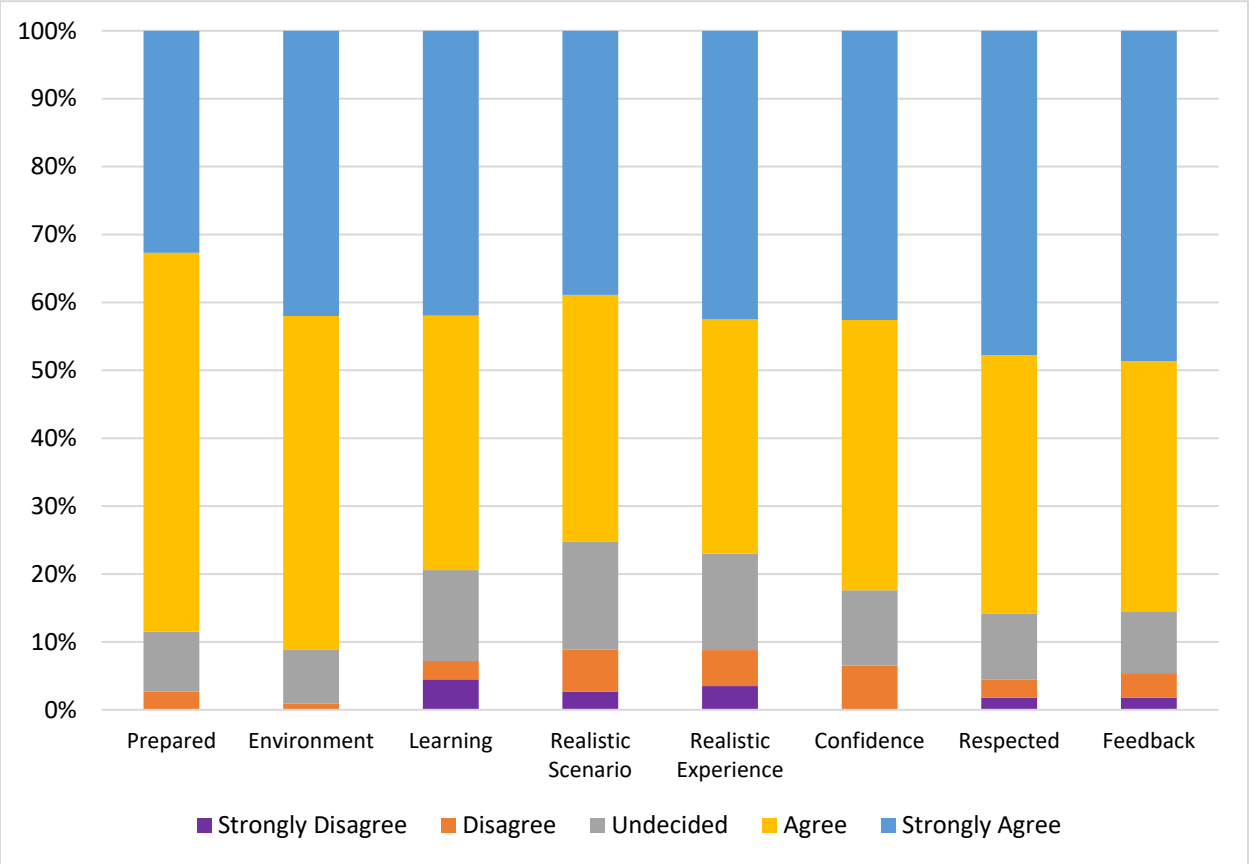
Mean Simulation Training Satisfaction Ratings



Majorities of respondents ranging from 75.2% to 91.1% agreed or strongly agreed with most of the items. Somewhat smaller majorities agree or strongly agreed with the statements on realistic scenario (75.2%) and realistic experience (77.0%). Less than 10% strongly disagreed or disagreed for any of the positive statements presented in each of the respective items.

Figure 4.2

Distribution of Training Satisfaction Ratings (N=113)



Comparison with the Previous Year's Satisfaction Ratings

Figure 4.3 shows the differences between means between Fiscal Years 2022 and 2023 on the eight Likert-scaled satisfaction items. Table 4.2 shows the results for the analyses of variance comparing the two fiscal years. On each item, satisfaction was significantly higher in 2023 than in 2022. All of the η2 values were close to .06, Cohen's suggested standard for a medium effect size,[20] which he described as a "an effect likely to be visible to the naked eye of a careful observer."[21]

[20] Cohen, J. (1988). *Statistical Power Analysis for the Behavioral Sciences*. New York, NY: Routledge Academic.
[21] Cohen, J. (1992). A power primer. *Psychological Bulletin*, *112*, 155–159.

Figure 4.3

Overall means for 2022 and 2023 on satisfaction items

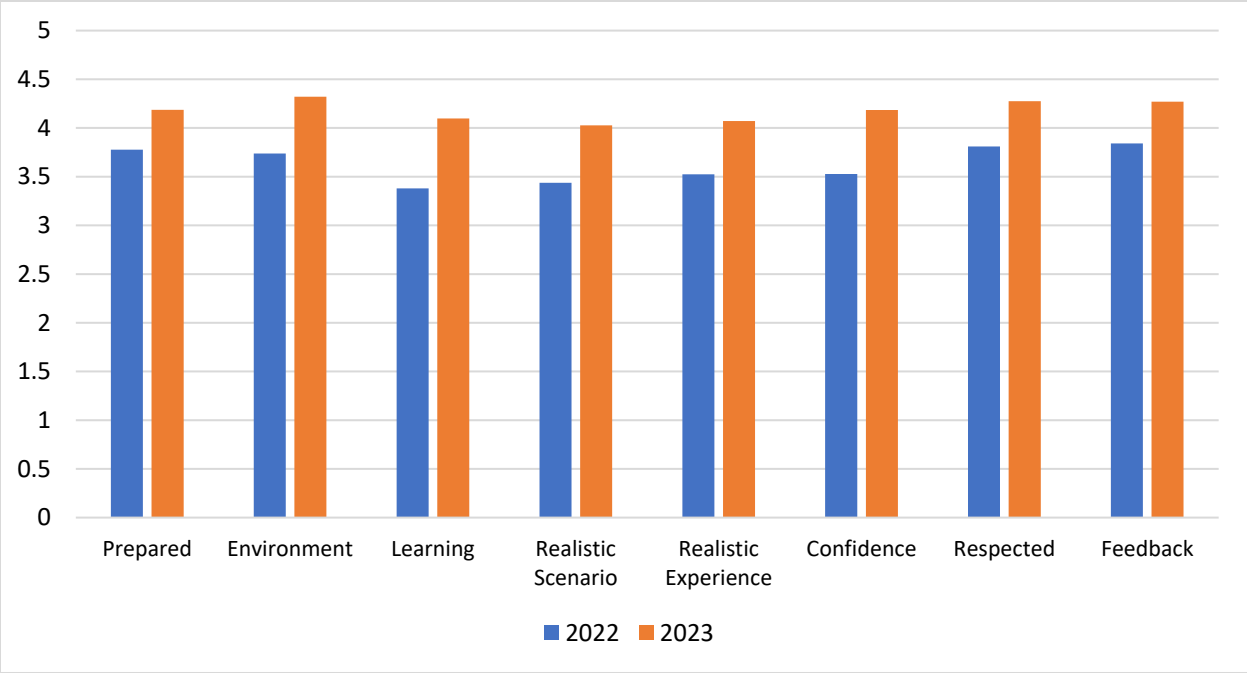


Table 4.2

Statistical significance and effect sizes for comparison by year on mean satisfaction item scores

Satisfaction Items	Significance Test	η2
Prepared	Welch F (1,226.31)=13.93***	.05
Environment	Welch F (1,196.25)=21.46***	.08
Learning	Welch F (1,229.76)= 22.17***	.09
Realistic Scenario	Welch F (1,232.56)=15.21***	.06
Realistic Experience	Welch F (1,235.67)=13.35***	.05
Confidence	Welch F (1,220.07)=21.35***	.08
Respected	Welch F (1,224.58)=11.23***	.04
Feedback	F (1,235)=10.86**	.04

Note. *p <. 05, **p < .01, ***p < .001

Comparison by Training Model

Table 4.3 shows the results of the analyses of variance comparing the three training models: virtual only, in-person only, and hybrid. All the η2 values indicated medium to large effect sizes (following the convention that a η2 = .06 represents a medium effect size and a η2 = .14

represents a large effect size).[22] On each item, participants trained through the hybrid model had significantly higher satisfaction scores than trainees who experienced only virtual training. The hybrid model also had significantly higher scores than in-person only for "I felt prepared to participate in the SIM lab" and "The scenario environment was realistic. I was able to incorporate my training into practice." However, those trainees who had in-person only training did not differ significantly on any satisfaction item from trainees who had virtual training only.

We should reiterate the caution that different training models were used at different time periods we examined in this report (first, virtual only; then, in-person only; then, hybrid). The CPTA program aims at program improvement over time. Thus differences between the training models could represent change over time that may have been only partially related to training model or not at all, and the effects by training in these analyses are related to the effects by year in the previous set of analyses.

Table 4.3

Statistical significance, effect sizes, and comparison of means for comparison by training model on mean satisfaction item scores

Satisfaction Items	Significance Test	η2	Comparison of Means
Prepared	F (2,110)=4.55*	.08	H > V,I
Environment	F (2,109)=4.56*	.08	H > V
Learning	F (2,109)=8.05**	.13	H > V
Realistic Scenario	F (2,110)=6.66**	.11	H > V,I
Realistic Experience	Welch F (2,63.85)=6.99**	.10	H > V
Confidence	F (2,109)=3.94*	.07	H > V
Respected	F (2,110)=4.33*	.07	H > V
Feedback	F (2,109)=3,52***	.06	NS

Note. H = hybrid model of training, V = virtual training only, I = in-person training only. *p <. 05, **p < .01, ***p < .001.

Discussion

As in previous years, most participants reported satisfaction on the Likert-scaled items in the survey, with the majority of participants responding they agreed or strongly agreed with the positive statements expressed by the items. Thus, most participants felt that simulation training achieved its objectives and provided them with a realistic experience, valuable feedback, and increased confidence in their role. Notably, a comparison of ratings showed that trainees in 2023 gave significantly higher ratings to simulation training than trainees in 2022 on every question. The medium effect sizes for the comparison suggest that if someone were able to observe carefully the experience of trainees, they would notice an improvement in 2023 compared to trainees in 2022. It is reasonable to give the CPTA credit for this improvement,

[22] Cohen (1988), ibid.

which led from fairly high satisfaction scores among trainees in Fiscal Year 2022 to even higher satisfaction scores among trainees in Fiscal Year 2023.

Trainees who experienced the hybrid training reported greater satisfaction across items than trainees who experienced virtual-only training, and higher even than in-person training on two satisfaction items. Given the many negative comments about virtual-only training in FY2022 data (noted both in this report in Chapter 4, and in last year's report), it seems likely that this represents a preference for having some live training. Perhaps they especially appreciate the hybrid model because it involves less travel. However, the hybrid training came at a later time period, and these differences by training model might be alternatively explained by the effect of program improvement over time. Although we cannot definitively interpret the differences in satisfaction by training model, we can confidently infer that the vast majority of trainees did not react negatively to the hybrid model, nor did any feel that the use of virtual methods spoiled the hybrid training. It is reasonable therefore for the CPTA to consider the hybrid model a viable method of delivering the training.

Chapter 4: In Their Own Words: Qualitative Findings from the DEST and the Post-Training Satisfaction Survey

In addition to the quantitative data collected by the DEST instrument (see Chapter 2) and the Post-Training Satisfaction Survey (see Chapter 3), each measure includes open-ended questions that provide qualitative data about participant perceptions of simulation training. Trainee comments offer additional insight into individual experiences that may not be otherwise be captured. When synthesized, qualitative data can help inform efforts to improve and maintain simulation processes that support learning.

When examined together, the qualitative data from the Post-Training Satisfaction Survey and the DEST contribute to our understanding of trainees' experience of the learning process, the impact of simulation for self-identified knowledge and skill acquisition, and the trainee's affective responses and reflections as they progress. This chapter will provide an overview of the qualitative findings for each instrument, followed by a discussion of connections and implications rooted in the words of simulation participants.

Post-Training Satisfaction Survey Qualitative Findings

DCFS administers an online post-training survey in which participants provide written responses to two open-ended questions about their experience in each day of the training. At each time point trainees were asked, "What were the most meaningful concepts or skills you learned today?" On both Day 2 and Day 3, another question was added, asking, "What was the most helpful feedback that you learned from your individual debriefing? And why?"

An initial read of the data was conducted with results from last year's survey in mind to develop a sense of the best codes to use to organize this year's data set. Out of that process, four codes were established to guide the analysis and reporting of this set of data. Codes were applied and then the data within each coded category were organized around commonly expressed ideas and experiences; illustrative quotes were then selected for each as discussed below. The four domains were:

1. Reflections on and suggestions related to the simulation training process
2. Reflections on and suggestions related to instruction/the instructor(s)
3. Skills gained from training, perceived individual outcomes identified
4. Reflections on the felt experience and the value of experiential learning

These categories effectively reflect the responses provided by trainees, with most comments focused on suggestions for the improvement of the simulation training process. Minimal data were centered on criticism of individual instructors and many participants praised the benefits of simulation. A few described concrete skills or knowledge gained. Additionally, some included reflections on their affective experience of simulation training. Below are some of the highlights of data for each coded category.

Reflections on and Suggestions Related to the Simulation Training Process

Many trainees discussed the desire for more time in simulation. One individual highlighted the impact of time limitations and the value of doing more and more varied simulation:

> *I believe that we should be able to do simulations for two weeks with more than two scenarios. I believe it was very helpful and did us a disservice to only be able to do it for one week.*

While such concerns were expected based on findings in previous years, they did come with concrete suggestions from trainees in many cases. Some reflected on their ideas for best use of available training time as preparation for real investigation. Their feedback related to length of the training, timing of simulation, and how simulation and classroom training can work together in terms of timing and exposure to the material:

> *My suggestion would be to give two weeks of simulations—the first week is about knowing what not to do, the second week could be about polishing and developing techniques. I am sure the training coordinators would have a plethora of real-work experience to share with us if they had more time.*

> *I feel that SIMS are just as important as the foundation training, so maybe do Monday - Thursday Classroom and then on Friday work in SIMS [on] what you have learned that week…*

> *The SIMS lab was great however I feel this should be incorporated throughout training and not left for the final week. Learning foundational information and [*having*] a SIMS lab to apply what you learn and continue that method throughout training.*

> *That hands-on learning was the best part for me. I just feel that that week needed to be two weeks. Only because squeezing everything in … a week was a little stressful. Especially when it came to us having to go to court. You have seven people work on the case and when it came time to court and answering questions, I feel that I wasn't ready.*

> *I think we all could have benefited from additional time at SIMS. In the short time we had, I think the trainers did exceptionally well in loading us up with as much knowledge and experience as they could. We learned a lot about this in training outside of SIMS but doing more of that side of the job in SIMS would have left me feeling better prepared for the real-world job. I also wish we would have had a chance to do simulations by ourselves.*

Some of our data came from trainees in FY2022 whose simulation training was entire virtual because of the Covid-19 pandemic. A number of these trainees felt that the use of virtual methods was unrealistic, and some felt that this made the training ineffective.

it does not allow a realistic feel having to engage while being virtual; being virtual was the only part I disliked about SIMS lab.

Being virtual made it difficult to imagine the simulation was real and observe the environment or children. I would have also liked to have had to fill out all the form[s] *necessary for the cases because I don't feel that I know what forms are required and all the information on them.*

The SIMS process over the computer is an extremely unrealistic waste of time. The most realistic and important issue needing to be addressed is safety and how to position and conduct yourself. As well as how to read a room and get out if needed. This experience negated the learning of that increasingly important topic completely. Retraining is needed for all who did not get in-person sims.

The number and intensity of complaints about the use of virtual methods decreased substantially when the lab began to use the hybrid model, but still a couple of trainees expressed a preference for fully in-person simulation training.

Other notable data emerged related to participant perceptions about the process of simulation training. One trainee alluded to a developmental model of learning that builds over time stating, "*I would have liked to have a less intense case first where we can go through the entire process including using all of the forms. And then move on to the more intense case after that.*"

Others discussed specific competencies or knowledge to which they would have liked more exposure during simulation. The following individuals talked about concerns about level of difficulty in the first simulation:

I felt the scenarios were good. I feel the scenarios gave too much push back. I feel as if I conducted too much time with "verbal judo." I feel that I did not get the important information for an investigation. I would like to see one scenario with a lot more cooperation and less push back so the time can be spent focusing on gathering info.

I feel as trainees, there should be a variety of clients not just the difficult ones! Maybe the mini scenario doing a cooperative parent that way the trainees can get a feel of going through the process and then maybe the longer one having that more difficult parent.

The role players' behaviors weren't conducive so much to learning at times. I wanted to LEARN not try to put out a fire or de-escalate, I know how to do that...I wanted the PROCESS and verbiage to use more. I also feel like weeks of field training in our community would be beneficial to see a case all the way through.

In contrast, another individual felt the time spent in simulation was not challenging enough considering the challenges of real investigations:

> *At times it felt that actors were going through a script and the exchange did not always feel organic. Trainers should be a little harder on people. Feelings are important but learning our job should be more important. Acknowledge strengths but that should not be the focus. People are too worried about being nice. Simulations should be a more difficult experience. There should be more scenarios added. Running through a single scenario doesn't do that much to build skills. … A lot of time is wasted with new rapport building instead of training.*

> *There was too much emphasis on preparation and debriefing—it was too "touchy feely." Not enough time was spent on the actual doing.*

Other trainees mentioned a desire for simulation to support their learning about work with specific types of clients and cases. For instance:

> *While I did enjoy the Sims Lab, I do wish that I was in an environment where I could have interviewed the child. A lot of the training was heavily focused on interviewing the Perp/Caregivers or collaterals. While I … have witnessed interviewing children, I do not want to come off as unconfident and practice would have alleviated my concerns a little.*

Another individual stated:

> *I wish that we could have experienced a simulation of protective custody and having the conversation about protective custody with caregivers. …I also wish we would have had more hands-on practice with case documentation: forms needed for a new investigation, and how and when to fill them out.*

Reflections on and Suggestions Related to Instruction/the Instructor(s)

In addition to feedback on the process of simulation training, participant comments also centered on their perceptions of the instruction and instructors themselves. Much of this data was positive, noting key characteristics and strategies used by trainers that were perceived as facilitative of an effective and enjoyable experience:

> *It was a very informative process.* [*Trainer*] *did an excellent job helping us see our strengths and weaknesses and gave us concrete information on how to strengthen our approach with children and families.*

> *I am so THANKFUL for [trainer]! She did a great job training all of us and made sure that we knew the material. If we didn't know something, she made sure to encourage us to*

still ask questions to figure everything out. Having someone who takes the time to train and really train makes a difference.

The facilitation team played a crucial role in helping me understand what the agency expects from me as an investigator. My mistakes were not mistakes at all, but opportunities for growth and improvement.

They kept things moving at a good pace, and connected policy learned from prior training to the experience of simulation, further establishing a good foundation for working in the field. The debriefing and feedback were extremely helpful in building confidence and awareness of areas of strengths and those of which can be improved upon. I felt totally supported as a new worker, and welcome as a new member of the investigation team.

These findings point to how important trainer feedback is for participant learning and confidence. A trainer's ability to reframe participant "mistakes," demonstration of mastery of the material, identification of trainee strengths, and support for addressing weaknesses were highlighted. Another participant also communicated how much they valued the instructors' perceived experience and knowledge, stating, "*I would love to also see how the trainers would do this exercise. I want to watch the experts. Even though we are job shadowing it's not the same."*

Conversely, there were some comments that were critical of a trainer or method of instruction. While many trainees demonstrated a respect for the knowledge of instructors, others felt that things were too skewed toward their status as experts and not enough emphasis on shared knowledge and learning. One quote illustrates this:

Simulations felt like an all-one-way approach. If you did not say or think like the [trainer] then your answers were incorrect. More teamwork needed to [be] incorporated into the training. It's new for everyone…not feeling scared to fail but supported by teammates and a chance to learn the experience together and foster collaborative thoughts.

Skills Gained from Training, Perceived Individual Outcomes Identified

This domain offers more insight into participant perceptions of their own learning outcomes based on their experience in simulation. Some of those reflections were generalized, but nonetheless reflect an awareness of learning:

Sims made everything seem real and brought me to think outside of the box. Most importantly I learned from mistakes and learned what I can do differently when working with families who are resistant.

Others mentioned more concrete learning, for instance as demonstrated below, related to professional behavior in the field setting:

> *This was very helpful, especially watching the video—it made me much more aware of my overall demeanor and tone of voice, etc.*

> *The simulation was an incredible experience, and definitely challenging! I feel like staff were a little quick to stop us when we were making mistakes, but I got a good appreciation for how much I have to control the tone and pacing of a visit.*

Many others identified enhanced ability to complete child and home environment safety assessments resulting from the simulation experience. For instance:

> *Simulation Lab really showed me how to look for signs of abuse on the kid's body that parents might otherwise try to hide. I also learned the importance of the home safety check and making sure the home and all closed doors are checked properly.*

> *[It] gave me an idea of what to expect on the field. I was also very happy to see where I made mistakes especially with observing the injuries on the child.*

Another individual wrote about the perceived impact for investigation skills like de-escalation, re-direction, and adapting to each situation in the moment:

> *I felt like SIMS was very valuable and allowed me to reflect on how to approach families and their homes. I feel like being given debriefing helped make me aware of how to tweak things within my approach and how to make tough conversations go as smoothly...also, how to attempt to de-escalate situations if they get tough and how to redirect when needed.*

The same individual also reflected on using critical thinking skills in action in the simulation training:

> *I think that it also sheds light on your perspective of things and how to really use your investigative skills. Just because you think a situation or reasoning of why something is happening within a family is not always the outer view they are presenting and there can really be bigger and more underlying issues going on and how it is our role to try to dig a little deeper and form a safe space in order to get the information we need to make the best decision for the families, and especially the children.*

Reflections on the Felt Experience and the Value of Experiential Learning

Experiential learning methods such as simulation training provokes affective responses in addition to allowing for key cognitive processes to take place as critical elements of child welfare worker preparation. Some individuals highlighted their emotional experiences, positive and/or negative, to the simulation experience:

> *This was a difficult experience, and it was shocking, and I was overwhelmed, however I would have liked to get my lead experience in SIM than to have been caught off guard in the field, so it was a valuable experience.*

> *Simulations was definitely a sensory overload; however, it did give us an insight on how a real home investigation could possibly look like. I wish we had more time in simulation.*

These two quotes illustrate the impact of simulation as an experience as "shocking" and a "sensory overload," while also acknowledging the value of going through it. Knowing the realities that investigators face in the field makes entering that world in a simulated format all the more important. As participants note, it's better to begin that process in a setting where real clients are not impacted and where the worker is safe and can make mistakes. Another individual builds on that further, noting important learning related to care for the self as well as care for others in the child welfare role:

> *Overall, the lab was a good experience. I acknowledge that it's a lot to cover in a short amount of time. But I think they made a genuine effort to prepare new investigators for the field. I am appreciative of the emphasis on self-care, it is needed.*

Perhaps one of the most important functions of training is to help ensure that the job is a good fit for an individual as much as it is to ensure an individual is prepared for the job. Responses such as the ones below are not uncommon in trainee responses to simulation training for child welfare work and may not be indicative of whether or not an individual is suited for the work, but certainly do reinforce the importance of debriefing to support the processing of this learning. The following reflections highlight the anxiety and doubt many new workers feel:

> *It stressed me out that I could not sleep the night before. I enjoyed the first day. It made me question if I want to continue in DCP. It is difficult to learn when one is stressed in a learning experience.*

> *I felt very stressed each day. I was so worried about criticism and daily SIMS that I forgot practices that I knew how to do. …It made me wonder if I wanted to continue to do DCP. I have not made a final decision yet. While it helped me to think differently, not get locked into a theory, to get facts and dig deep when it comes to investigation. I was mentally exhausted every day.*

DEST Survey Qualitative Findings

Qualitative data were also collected as part of the DEST survey via two open-ended questions. The DEST included a daily open-ended question: "What were the most meaningful concepts or skills you learned today?" The Day 2 and Day 3 DEST also included another open-ended question: "What was the most helpful feedback that you learned from your individual debriefing? And why?". There were 184 trainees who completed the DEST, but not all responded to the open-ended items and not all responses to the open-ended items were substantive (e.g., some were one-word responses). An initial read was conducted with results from last year's survey in mind to develop a sense of the best codes to use to organize this year's data set. Out of that process, four codes were established to guide this analysis:

1. Reflections on the simulation training process
2. Perceived learning – knowledge
3. Perceived learning – skills
4. Enhanced self-awareness and/or self-confidence for the role

These categories effectively capture the responses provided by trainees, with most comments focused on self-identified learning. Minimal data were centered on criticism of simulation training or described a negative experience, and some praised the process and instructors. In comparison with the post-training survey findings presented above, the DEST responses provide more information related to acquisition and application of knowledge and skills. The findings also provide insight into the impact of simulation for an individual's self-awareness and/or self-confidence in the role of investigator. Below are some of the highlights of data synthesized into each coded category.

Reflections on the Simulation Training Process

Many trainees discussed processes and experiences that contributed to their learning in simulation training. Primarily these included data related to group-based processes, experiential learning, and problem-based learning (PBL). PBL is a model to assist the investigator in moving beyond assumptions and employing a logic-based approach to a case of reported child maltreatment. It provides
a method to cultivate and reinforce trainees' critical thinking ability in the context of an investigation. PBL was mentioned by several trainees as important to their ability to learn from the experience and as a framework that will guide future work. One trainee stated:

> *The review of the problem-based learning technique really helped iron out how it is used, and see it applied throughout the reporter contact. I really enjoyed the simulation framed with that.*

Another also referenced how PBL is helpful in the investigative process:

The discussion of the allegations—how to identify their narrative and what that means for my investigation—was very helpful to me. I wish we spent more time on that, maybe developed facts and hunches for each allegation.

Another individual wrote about how a process like PBL can help minimize the assumptions that investigators may unintentionally make and help them maintain a more objective stance:

I learned that I need to assess the situation from a standpoint that is more neutral in the beginning and constantly be working to remain free from personal work history training tendencies. I struggle a lot with unlearning different aspects of what I was taught in the academy so I need to be mindful that in this role the strategies to get the information will be a lot different

Another important element of the simulation training discussed by participants was participation in a group learning and debriefing process. Many felt this to be valuable in terms of feedback from instructors, but also in terms of learning from peers and seeing different approaches to effective investigation. One individual stated that the most helpful element was "*discussing the report within the group so that I could get an understanding from their point of view.*" Two others shared these thoughts:

I appreciate using a group method to analyze the type of questions we need to ask because it opens your mind to different ideas and perspectives to approaching and interpreting our report.

When the class came up with so many questions to ask the reporter it made me better prepared to do the interview. Therefore, I will not spend time thinking about my next question. I believe the more we interview the more confident I will be to do an interview.

Another trainee talked about the value of feedback from the actors in the case scenarios saying: "*I loved being able to hear the feedback from the family about what they felt."* This highlights the importance of not only trainer feedback but interactions with the actors and medical and court staff to better understand different perspectives and the role of the investigator in that context.

Lastly, the positive reinforcement received during debriefing was noted by several trainees as being important to their experience in simulation:

It was nice to hear what I do right. The department has always focused on what I did wrong. As someone coming from placement after 3 years, it was refreshing.

We were all very supportive of one another as we went through the process today. We learned what worked and what needed to be improved upon.

Perceived Learning – Knowledge

Trainees were asked to comment on what they felt they learned during simulation. Many comments were focused on acquisition of new knowledge or application of existing knowledge (e.g., policy) in a real-world setting. According to one individual, learning centered on "b*eing able to strategically use certain aspects of training to implement into real-world situations and being able to verbally communicate with families and children.".*

Trainees commonly noted that they learned to apply DCFS policy and to use proper procedures and terminology in investigations. One comment is illustrative of the importance of simulation: "*Knowledge of the policies and practices doesn't ensure effective implementation at all times.*" This quote alludes to the gap that can exist between knowledge of a concept and acting on that knowledge consistently and with fidelity.

A few topics related to application of knowledge learned in the classroom emerged from the data, including home and child safety assessment, specific Illinois laws and DCFS policy, the role of the agency and the investigator, and the procedures involved in investigation of an allegation. One person summed this up by saying their critical learning was in "*how to navigate procedures 300 and learning about the practice application of procedures.*" One trainee indicated more global learning about the agency, saying: "*I learned the purpose of DCFS.*" Others also reflected on gaining a fuller understanding of DCFS during simulation training. One talked about the importance of engagement and application of trauma knowledge as an investigator:

> *…Knowing the policy procedures. Understanding our purpose is to support families to be safe and together. Knowing what to expect as far as how people respond and how trauma affects them. Knowing how the job affects me. Leaning how to engage to gain trust and goals. Knowing what the guides are for taking protective custody.*

Trainees also commented on the importance of gaining new knowledge about the role of DCFS in the community. One person stated:

> *Learning about the resources DCFS provides for those in poverty. Learning the steps how to investigate a case. Learning the vocabulary and communications of DCFS and the other positions/agencies through DCFS.*

Perceived Learning – Skills

Trainees mentioned in their comments a number of skills they felt they learned during simulation training. Communication with multidisciplinary professionals and in a court setting; engagement; documentation; re-wording and effective interviewing; use of open-ended

questions; active listening; and safety assessment of the child, home, and for oneself were discussed.

Some trainees talked about engagement skills that support rapport- and trust-building when conducting an investigation. These comments reflect some of the skills that may come into play as investigators work to bring theoretical concepts to life:

> *Learning more specific word choice and how to engage the families. Certain word choices could make the family shy away from talking with you or making them defensive.*

> *To learn how to finesse to get parents/caregivers to buy in (i.e., taking photos needed for an investigation, taking photos of environment).*

Many trainee comments were centered on the value of simulation for developing interviewing skills. In particular, the ability to formulate questions and persist in questioning as necessary was frequently highlighted as illustrated below:

> *I learned to write relevant questions before going out on an investigation…could help benefit while in the field. I learned to re-word questions for collaterals that could help provide more insight into the prospective family of investigation.*

> *Simply, digging deeper when you have the opportunity. Remembering to use strengths to build rapport and never assume or "anchor in."*

> *I have learned a lot about reframing my questions and thinking more critically about HOW I say things to people I am interacting with. I have learned about how to re-word things to accomplish the same goal while completing investigative interviews within the field and also talking to collateral contacts.*

> *Ask, Ask, Ask. There are not too many questions to be asked. Do not leave with question mark in my head about certain things.*

> *To make sure I cover all areas of questions I need to ask for worker safety. To remain professional and not overstep a boundary between professionalism and friendliness.*

Another area that emerged from that data was acting on the three key values that are emphasized throughout classroom and simulation training for investigators: “GER” — genuineness, empathy, and respect. One individual stated:

> *I learned that it is important to exercise empathy and respect while also being genuine because it really takes you far with families.*

Trainees also talked about balancing values like respect and empathy with the need to complete tasks associated with the investigation, for instance:

> *Learning to speak carefully and truthfully while maintaining appropriate level of authority, learning to explain how important it is for family to cooperate. Learning to be assertive without being obnoxious or a pushover. Learning to be respectful while firm at the same time.*

Some comments reflected new learning that emerged during simulation, stemming from its experiential nature:

> *I learned to not introduce myself to friends of the family and tell them I am from DCFS. That should be confidential for the family. I learned to always have a safety/exit plan.*
>
> *I've learned how to keep myself safe and observe the room/family interactions. I now understand the difference between risk and safety. Completing the safety checklist and underlying health assessments are a strength.*
>
> *I learned to be careful when checking out rooms where doors have been closed.*

Other essential skills learned that were highlighted by trainee comments included the ability to identify underlying conditions, de-escalation, and documentation as it occurs during an investigation:

> *[Learned to] address underlying conditions such as domestic violence, mental health, developmental disabilities.*
>
> *To try to maintain my composure in tough situations and use my knowledge to de-escalate a high-tension situation.*
>
> *[Learned to complete the] CERAP and how to offer and safety plan and what to do if there is no agreement. How to interview parents/APs and get around barriers that may arise.*

Participants also frequently commented on what they learned from the simulations that involve interviewing a medical professional and court testimony. Below are some quotes that are representative of areas of perceived skill acquisition:

> *I had never been in a court setting before, so it was nice to see generally what the format is like and learning smaller technical things like saying yes or no, limiting my movement, and making my statements more direct rather than put small phrases beforehand like "if I recall correctly."*

The importance of being direct and assertive when it comes to testifying and knowing all the facts of the case so that we can be credible in the court room.

Talking with a medical professional and being able to describe to them what was happening and how injuries could correlate.

Enhanced Self-Awareness and/or Self-Confidence for the Role

Another key area of learning noted by trainees was increased self-awareness. Many reflected on what they learned about themselves in the role; one person simply stated learning about "*where I need to grow.*" Others reflected on specific areas in which they gained increased awareness rooted in their simulation experience. For instance:

My use of certain minimizing words; [it is] something I didn't realize until it was pointed out. Looking forward to watching my video.

To watch my facial expressions and the tone of my voice.

The most helpful feedback was getting more knowledge about myself and how others perceive my style of interviewing and working with others.

Trainees also reflected on biases or new areas of understanding about working with people based on their experiences. One person wrote about learning "*how to be more open-minded. Learning to control biased emotions towards situations that I might have past experiences with."* Another person, while acknowledging the challenges of simulation training, also wrote of increased self-awareness saying, "*today was truly trying and very helpful because it caused me to dig deeper in my thought process."* Another individual noted a specific realization about the impact of language:

One take away was that I may have been a little too nice and said the word "she" which might imply the neighbor was the reporter.

In addition to reflecting on specific areas to improve or build upon, trainees also talked about emerging from simulation training with a better overall sense of themselves in the role:

That is okay to have my own style, learn how to feel comfortable, use follow-up questions to what clients answer to questions that need follow-up answers.

Lastly, as reflected below, some trainees reported greater self-confidence or recognition of their capacity for the role after simulation:

I was told by the family that I was quick with answers, had good energy and put them at ease. I believe that these are strengths I need to remember and play towards in the future.

That I know the job a little better than I was giving myself credit for.

Discussion

Each set of data taken separately provides insight into trainee experiences based on the unique sets of questions found in each instrument. Analyses of both the DEST and Post-Training Satisfaction Survey qualitative data also offer an even broader snapshot of participant perceptions of simulation training. From that view, we can derive findings in three areas of knowledge: perceptions of the simulation process (timing, length, instruction methods, tasks exposed to, group processes, etc.); perceived outcomes for trainees, including knowledge and skill acquisition; and trainee affective responses to simulation and its impact for professional role development, self-awareness, and confidence in their ability to do the job.

Table 1 shows these overarching themes and the related domains from each set of qualitative data. Though the analyses were conducted separately, using two sets of emergent codes the findings were further synthesized in an effort to glean additional meaning.

Table 1: Overall qualitative themes by data source and codes

Data source	Process-related domains	Skill-related domains	Domains related to the self
Post-Training Satisfaction Survey	Reflections on and suggestions related to the simulation training process Reflections on and suggestions related to instruction/the instructor(s)	Skills gained from training, perceived individual outcomes identified	Reflections on the felt experience and the value of experiential learning
DEST instrument	Reflections on the simulation training process	Perceived learning – knowledge Perceived learning – skills	Enhanced self-awareness and/or self-confidence for the role

Below is a brief summary based on this final synthesis.

Process-Related Findings and Implications

Across the qualitative data, trainees reported their perceptions of the simulation process. Key findings relate to the desire to have more time in simulation, to be exposed to more and more

varied scenarios and clients, to see more demonstration from trainers, and to move away from virtual or even hybrid models in favor of in-person sessions. Some participants offered other suggestions for use of limited training time, such as alternating classroom and simulation training for enhanced opportunity to apply knowledge and skills in an ongoing manner. Other data also point to simulation as a developmental process where competence builds through increasingly challenging learning exercises. For instance, trainees learn engagement and rapport-building as an essential skill, and then advance to learning engagement and rapport-building with resistant or hostile clients.

Findings related to the processes of facilitation, debriefing, trainee support, and communicating new knowledge are all connected to *how* staff train new investigators in the simulation setting. Primary to the instructional processes highlighted by trainees across the data was the trainers' ability to find and build on their strengths and to re-frame missteps as steppingstones of growth. Trainees noted that when trainer feedback was largely focused on what they did right, it cemented that learning and contributed to self-confidence. This finding indicates that the debriefing and feedback processes being employed by trainers are perceived as positive and effective. The expertise of the trainers is also highly valued by participants, such as demonstrating expertise to instill confidence in the training and providing useful and supportive feedback to new learners.

Many trainees noted that problem-based learning was an important element in their learning process in simulation. They also talked about it as a process in itself, which when applied in an investigation, promotes critical thinking and resistance to assumptions, blind spots, and biases. PBL served as an anchor as trainees move through the simulated investigation while tethered to DCFS procedure and foundational knowledge.

Another element that was widely evident in the data was the importance of group-based learning to respondents' experience in simulation. The opportunity to debrief with trainers and peers as well as court and medical personnel and the actors playing the family is effective in several ways, according to the findings: it increases knowledge of the perspectives and roles of multidisciplinary professionals; it gives insight into a parent perspective which supports critical thinking about the case; it demonstrates boundaries in professional role and practice when talking with reporters and collateral individuals involved in the case; and it offers a sort of a mirror for the investigator to better examine their own demeanor or language as experienced by others in the interaction. When done in a safe space, group processes like these are viewed as effective by trainees and important to their ability to then engage in an actual investigation process.

Skill-Related Findings and Implications

In the qualitative data, the trainees also reported on the professional knowledge and skills they learned in simulation training. Examples of skills discussed included:

- Engaging resistant clients

- De-escalation
- Use of appropriate tone of voice and terminology
- The ability to present oneself professionally
- Questioning skills
- Explaining DCFS policy and procedures to others
- Documentation
- Safety assessment of the child and the environment

Trainees also noted increased awareness of assessing one's own safety—what to be aware of and how to mitigate risk. Another type of outcome noted by trainees was new knowledge and skills in multidisciplinary settings, such as increased understanding of what kinds of questions to ask a medical professional for the investigation and how to give court testimony. These experiences, in particular going to court, are reported as overwhelming and anxiety-provoking for investigators in training and were very impactful to building competence.

Another outcome that trainees highlighted was increased understanding of identification and assessment of underlying conditions, such as domestic violence, which may impact the investigation. Though this is content that is covered in the classroom, finding the words and actions necessary to address it while out in the field is more complicated. Respondents also mentioned other concepts that are easy to grasp in the abstract but can be challenging to act on; for instance, the three key values of genuineness, empathy, and respect that are emphasized in DCFS training. Theoretical concepts are essential as foundational building blocks of practice but may need demonstration and simulation for trainees to learn what they actually look like in a given situation. Similarly, recognizing and reducing one's own bias is a critical skill for child welfare investigators; trainees mentioned that simulation training gave them concrete practice in applying this skill. This would also support the idea of providing more time in simulation to confront and work through scenarios that involve diverse people (e.g., demographic diversity such as race, ethnicity, gender identity) and situations (e.g., a sexual abuse allegation or a child interview).

Findings and Implications Related to Self as Investigator

The third overarching finding of our analysis of qualitative data is related to the impact of simulation on trainees' sense of self in the role of investigator, on self-awareness, and on confidence in one's ability to conduct effective and ethical investigations. Many respondents reflected on the internal challenges of simulation learning, describing it as overwhelming, trying, shocking, difficult, exhausting, and anxiety-provoking. At the same time, many trainees talked about the importance of going through that shock or discomfort. They recognize the value of simulating a difficult scenario and working through it in a safe place where real clients are not impacted and where they can practice applying knowledge and skills. In addition to the safe practice element of simulation, the data also revealed the importance of doing it as a pathway to seeing one's capacities and strengths. As one trainee noted, being recognized for what was done right was encouraging and cemented learning. The impact on participants'

ability to self-reflect and the increase in self-awareness and self-confidence for the role was evident across the qualitative responses.

Chapter 5: Conclusion

In FY2023, the Child Protection Training Academy is again providing live training, both at its Chicago laboratory and a new laboratory at Northern Illinois University in Dekalb. CPTA is providing live training in a new way. It employs a hybrid model in which simulation training is provided live on two days but virtually for three days during the simulation training week. The two live days involve two simulations in which learning to interact live with a family in their home is paramount. These are the "Knock on the Door" simulation in which investigators first engage the family and enter the home, and the "Scene Investigation" simulation in which trainees look carefully at every room in the house and examine an infant's body (simulated by a doll). The three virtual days involve communicating over the telephone ("Call the Reporter", Day 1), interviewing parents and a medical professional (Day 4), and providing court testimony (Day 5) – all simulations in which the surrounding environment is less salient, and it is more feasible to use Zoom. The hybrid model reduced the travel demands of the full simulation week, while still providing live simulations when they are most needed.

The positive results for simulation training despite changes in the model are encouraging. As in previous years, trainees completing the Daily Experience of Simulation Training (DEST) measure demonstrated significant increases in their confidence in 13 child protection skills over the course of their simulation training experience. Each time trainees answered questions about the quality of the feedback they received, 95% or more reported that the feedback was helpful or very helpful. Over 77% of respondents rated the effectiveness of group debriefing at 5 or above, on a scale from 1-extremely ineffective to 7-extremely effective. On the post-training survey, majorities of respondents ranging from 75.2% to 91.1% agreed or strongly agreed with positive statements about the simulation training.

Qualitative findings from the DEST and the Post-Training Satisfaction Survey provide insight into the experience of trainees and the specific elements of the simulation training they found valuable. Many trainees found simulation training emotionally challenging, but recognized the value of going through it and found the training environment a safe place to do so. Among the specific benefits of simulation training that we identified in the text from the trainees were:

- finding the words and actions to explore underlying conditions, such as domestic violence, that may impact the investigation
- practicing the three key values of genuineness, empathy, and respect that are emphasized in DCFS training
- recognizing and reducing one's own bias
- increasing participants' ability to self-reflect
- increasing participants' self-awareness and self-confidence.

As a result of their positive experience, many trainees advocated for expanding simulation training. They wanted to have more time in simulation, to participate in simulations with more varied scenarios and clients, and to see more demonstration from trainers.

Comparison of FY2023 with FY2022

Moreover, results were more positive in FY2023 than in FY2022. Ratings on the post-training survey of the quality of simulation training were significantly more positive on average in FY2023 than in FY2022, for every question about quality. Although we did not do a formal statistical test, ratings of feedback and debriefings on the DEST were also more positive in FY2023.

In FY2022, some trainees completing the post-training survey said in their text comments that they had a negative experience. This minority of trainees in FY2022 perceived that they were disrespected and/or reported feeling appalled. In contrast, negative comments in FY2023 were rare and minor. Only a few participants in FY2023 found fault with the use of virtual methods for part of the training. One possible explanation for this improvement was the transition that occurred in FY2022 from an entirely virtual training to models that once again featured live training. Trainees who experienced the hybrid training reported greater satisfaction across items than trainees who experienced virtual-only training, and higher even than in-person training on two satisfaction items. It is somewhat difficult to interpret the higher satisfaction scores for hybrid training, because hybrid training is the most recent model, and implementing it may have coincided with other program changes over time. But the data are clear enough to conclude that hybrid training appears to be viable.

Upcoming Research

One of the limitations of most of our program evaluation of CPTA is that it only concerns the immediate effect of simulation training. We typically do not have data on how simulation training is related to investigators' experience on the job. The FY2018 evaluation did survey 259 working DCFS investigators.[23] Investigators who had received simulation training reported greater ease in acquiring the skills of evidence-based documentation and testifying in court. Sim-trained investigators also valued the contribution of different simulations preparing them for their job. The program evaluation team has received approval to conduct a new survey of working DCFS investigators in FY2024. This will provide updated information the following topics:

- trainees' current satisfaction with the simulation training they received when they started their job.

[23] Cross, T. P. & Chiu, Y. (2018). *FY2018 Program Evaluation of Child Protection Training Academy for New DCFS Investigators*. Urbana, IL: Children and Family Research Center, University of Illinois at Urbana-Champaign. https://www.cfrc.illinois.edu/pubs/rp_20181016_FY2018ProgramEvaluationoftheChildProtectionTrainingAcademyforNewDCFSInvestigators.pdf; Cross, T. P., Chiu, Y. L., Havig, K., Lee, L., & Tran, S. P. (2021). Evaluation of a simulation training program for new child protection investigators: A survey of investigators in the field. *Children and Youth Services Review*, *131*. DOI:10.1016/j.childyouth.2021.106295.

- their self-appraisal of the skills they learned in simulation training, including *meta-competence* skills we discuss in Chapter 4 of this report and discussed in Chapter 3 of last year's report.[24]
- their current confidence in their skills in child protection work.
- their description of the impact of their simulation training on their current work
- their suggestions about how simulation training can be improved.

Final Words

The program of simulation training for DCFS child protection specialists has emerged from the difficulties of the COVID-19 era with a hybrid model combining live and virtual learning, skills in conducting the training that it developed both before and during the pandemic. Trainees continue to report significant increases in confidence in during the simulation training week. They report high levels of satisfaction with the training, levels that were significantly higher in FY2023 than they were in FY2022. Several trainees recommended expanding simulation training in several different ways. The biggest challenge for the program is developing the capacity to provide the training to the scores of new investigators that enter DCFS every year. Developing this capacity is also necessary if the CPTA seeks to expand simulation training to a wider range of workers and skills. Clearly more resources, attention, and program development are needed for the new laboratory at the University of Northern Illinois and other laboratories that are planned, to relieve some of the burden on the Chicago laboratory, which has a limited number of experienced trainers.

[24] Cross, T.P. Chiu, Y., Havig, K. & Tran, S. (2022). *FY2022 program evaluation of the Child Protection Training Academy for new DCFS investigators*. Urbana, IL: Children and Family Research Center, University of Illinois at Urbana-Champaign. https://cfrc.illinois.edu/pubs/rp_20220912_FY2022ProgramEvaluationOfTheChildProtectionTrainingAcademyForNewDCFSInvestigators.pdf

Appendix: An Overview of Previous Program Evaluation Results

FY2017 Evaluation[25]

The FY2017 evaluation used qualitative methods (observation and interviews) to describe the development of the CPTA and develop a logic model for the program. It also analyzed data from a post-training satisfaction survey (N=154) of program graduates. Respondents were asked a series of questions about whether simulation training had been effective. On every item except "feeling prepared for simulation training" 76% to 84% of respondents strongly agreed with the positive statements about the program in the items. Across seven evaluative questions on simulation training, there were 1,052 positive ratings (99.3%) and only seven negative ratings (0.7%). Content analysis of open-ended survey items showed that trainees frequently volunteered positive comments on the value of simulation training. Survey respondents recommended extending simulation training to a wider range of topics, professionals, and locations.

FY2018 Evaluation[26]

The FY2018 evaluation included a qualitative component that examined in greater depth the process of developing the training. Interviews and focus groups with 32 stakeholders explored how the abilities of the CPTA team drive simulation training. The simulation trainer had a blend of numerous skills that facilitated simulation training. The standardized patients combined abilities to stay in character and provide feedback and have an effective partnership with the simulation trainer. Legal professionals in the courtroom roles were motivated to help DCFS workers improve their skills and emphasized collecting the necessary information, communicating information clearly and accurately, and presenting in a professional manner.

In addition, the FY2018 evaluation surveyed 259 current DCFS investigators; about half of those had received simulation training (sim group) and half had not, because they were hired before simulation training was offered (non-sim group).[27] The sim group reported greater ease in acquiring the skills of evidence-based documentation and testifying in court. Sim-trained investigators also valued the contribution of different simulations preparing them for their job. The survey also found differences between sim-trained and non-sim trained investigators on their thoughts about leaving their job. Non-sim investigators had four times greater odds of

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[25] Cross, T. P., Tittle, G., & Chiu, Y. (2018). *Program Evaluation of Child Protection Training Academy for New DCFS Investigators: Initial Report*. Urbana, IL: Children and Family Research Center, University of Illinois at Urbana-Champaign. Chiu, Y. L. & Cross, T. P. (2020). How a training team delivers simulation training of child protection investigators. *Children and Youth Services Review, 118*(1), 9p. DOI:10.1016/j.childyouth.2020.105390. https://www.cfrc.illinois.edu/pubs/rp_20180131_ProgramEvaluationofChildProtectionTrainingAcademyforNewDCFSInvestigators:InitialReport.pdf

[26] Cross, T. P. & Chiu, Y. (2018). *FY2018 Program Evaluation of Child Protection Training Academy for New DCFS Investigators*. Urbana, IL: Children and Family Research Center, University of Illinois at Urbana-Champaign. https://www.cfrc.illinois.edu/pubs/rp_20181016_FY2018ProgramEvaluationoftheChildProtectionTrainingAcademyforNewDCFSInvestigators.pdf

[27] Cross, T. P., Chiu, Y. L., Havig, K., Lee, L., & Tran, S. P. (2021). Evaluation of a simulation training program for new child protection investigators: A survey of investigators in the field. *Children and Youth Services Review, 131*. DOI:10.1016/j.childyouth.2021.106295.

reporting that they were actively looking for a position at another department of DCFS. Non-sim investigators also had more than three times greater odds of reporting that they would leave DCFS as soon as they found another job, once age and experience were statistically controlled. The simulation training "era" at DCFS could differ in many ways from the era before simulation training began, so there could be other explanations for differences between non-sim trained investigators (hired before February 2016) and sim-trained investigators (hired after February 2016).

FY2019 Evaluation[28]

The FY2019 evaluation included multiple sub studies to examine the implementation and outcomes of simulation training. The CPTA made significant changes to their training model and implemented them on August 20, 2018, and the program evaluation team conducted a qualitative study of the new training model. The evaluation team also implemented a method called the Daily Experience of Simulation Training (DEST) to examine trainees' experience of change over the course of the simulation training week.[29] The analyses indicated that trainees' confidence level for 13 skills significantly increased over the course of the simulation training week. Confidence levels were measured on a 7-point scale, with 7 representing maximum confidence. Confidence levels on the last day ranged from an average of 5.7 (work as a DCFS investigator, testify in court) to an average of 5.9 (engage families, assess safety, integrate compassion and investigative skill). Effect size statistics indicate that the increases were large for every confidence item. The program evaluation team also conducted an updated analysis of the post-training satisfaction data. DCFS provided the evaluation team with data from the post-training survey between February 2016 and April 2019. Although the ratings of simulation training were consistently positive across the past four years, the ratings of simulation training decreased somewhat from FY2016 to FY2019. On the other hand, the mean satisfaction score for simulation training was higher than the mean for classroom training by one-fifth of a point on the 5-point scale, a difference that was small but statistically significant.

Employee turnover has historically been a problem in child welfare and the quality of training may be one important way of addressing turnover. Using employment data from DCFS Division of Budget and Finance, the evaluation team examined whether DCFS investigators who had received simulation training tend to remain in their jobs longer than DCFS investigators who joined DCFS before simulation training was available and did not receive simulation training. Results using the statistical method of survival analysis indicated that investigators in the non-sim group were significantly more likely to leave their job than those in the sim group in their first two years. At Month 18, 37% of non-sim group had left their job compared to 20% of sim group. At Month 23, the turnover rates for the two groups almost converge. The odds of leaving their job for the non-sim group were 1.8 times greater than the odds of leaving for the

[28] Chiu, Y. & Cross, T. P. (2019). *FY2019 Program Evaluation of Child Protection Training Academy for New DCFS Investigators*. Urbana, IL: Children and Family Research Center, University of Illinois at Urbana-Champaign. https://www.cfrc.illinois.edu/pubs/rp_20190903_FY2019ProgramEvaluationoftheChildProtectionTraining AcademyforNewDCFSInvestigators.pdf

[29] Chiu, Y. L., Cross, T. P., Wheeler, A. B. Evans, S. M. & Goulet, B. P. (2021). Development and Application of a Self-Report Measure for Measuring Change During Simulation Training in Child Protection, *Journal of Public Child Welfare*, DOI: 10.1080/15548732.2021.2016546

sim group, after controlling for other variables. The reduction in turnover during investigators' first two years could reflect the impact of simulation training. The caveat, however, is that the simulation training "era" at DCFS could differ in many ways from the era before simulation training began, so there could be other explanations for differences between non-sim trained investigators (hired before February 2016) and sim-trained investigators (hired after February 2016).

FY2020 Evaluation[30]

Among the components of the FY2020 evaluation was a qualitative assessment of the implementation of a second simulation laboratory for new investigators that opened in Chicago in April 2019. This component used data from observations of the Chicago laboratory, interviews with key stakeholders of the laboratory and document review. Our report described the history of the implementation in Chicago, and explored how the three key players—simulation facilitators, the actors, and courtroom professionals—have implemented simulation training to provide effective learning experiences to trainees. Our comparison suggested that that the Chicago laboratory is a modest re-invention of the Springfield laboratory, using Rogers'[31] terminology on diffusion of innovations. The experience with the Chicago laboratory suggests that expansion can be successful while still needing to deal with challenges to maintain the capacity and quality of the simulation training program.

As in previous years, the Daily Experience of Simulation Training (DEST) measure in FY2020 shows that the confidence that trainees report increased substantially from the beginning to the end of the simulation training week. The DEST analysis by cohort suggests that the increase in confidence measured by the DEST was very consistent across cohorts. The post-training survey showed considerable trainee satisfaction with simulation training and indicated that many trainees want more time in simulation training. However, the program needs to be aware of the trainees who have a negative experience, which was a small percentage in FY2020.

FY2021 Evaluation[32]

In FY2021, in addition to repeating the DEST and post-training satisfaction survey analyses, the evaluation team updated the turnover study and conducted a maltreatment re-report study. The program evaluation provides data supporting the value of simulation training even when delivered virtually. Trainees' reports from the Daily Experience of Simulation Training (DEST) measure showed increases in confidence in child protection skills during the virtual simulation training weeks. On the post-training survey, a majority of respondents agreed or strongly agreed with the items indicating satisfaction with simulation training. Yet some results suggest that trainees did not respond as positively to the virtual simulation training as previous trainees responded to in-person simulation training. In the turnover study, despite using sophisticated

[30] Chiu, Y., Lee, L. & Cross, T.P. (2020). *FY2020 program evaluation of the Child Protection Training Academy for new DCFS investigators*. Urbana, IL: Children and Family Research Center, University of Illinois at Urbana-Champaign.

[31] Rogers, E. M. (2003). *Diffusion of innovations* (5th Ed.). New York: Free Press.

[32] Cross, T.P., Chiu, L., Wang, S., Lee, L., Tran, S., & Havig, K. (2021). *FY2021 program evaluation of the Child Protection Training Academy for new DCFS investigators*. Urbana, IL: Children and Family Research Center, University of Illinois at Urbana-Champaign.

statistical methods, the evaluation team was unable to estimate clearly the effect of simulation training on turnover. There was no way, statistically or otherwise, to disentangle the effect of introducing simulation training from the effects of other historical changes that coincided with simulation training. The results of the maltreatment re-report study showed that investigations by sim-trained investigators were slightly more likely to result in a re-report than investigations by investigators who lacked sim training but had equivalent experience, but the difference was small and cannot be separated from historical change in re-report rates. There was no difference between sim-trained and non-sim-trained investigators from the same historical period. In total, we do not have evidence to support the supposition in the CPTA simulation training logic model that simulation training reduces re-reporting.

FY2022 Evaluation[33]

FY2022 has been a time of transition for the simulation training program. Because of the Covid-19 pandemic, the training laboratories continued to offer simulation training virtually in both the Chicago and Springfield laboratories for most of FY2022, but then resumed live training in May 2022. Northern Illinois University became a partner in FY2022. On the other hand, DCFS and UIS did not renew their contract for FY2023. This is a momentous change. UIS originated the idea of simulation training for DCFS workers, founded the program together with DCFS, delivered all the simulation training during its early years, and provided leadership for the program for its entire six-year history.

The analysis of the Daily Experience of Simulation Training (DEST) continued to indicate a significant linear increase in confidence over the course of the simulation-training week for all 13 skills. Moreover, the cohort analysis shows that most cohorts, on average, experienced meaningful increases in confidence during virtual simulation training. Applying a metacompetence framework,[34] we analyzed the data from the open-ended questions of DEST and identified three themes that described the effects of simulation training: 1) skills in action: the ability to interpret and apply policy, to translate theoretical knowledge to real-world situations, to take the abstract of didactic learning to the concrete context of practice in dynamic environments, and to engage informed decision-making in a wide range of situations; 2) self-awareness: the ability to engage in sensitive and effective interactions with diverse individuals is self-awareness; 3) managing emotional intensity: the ability to accurately assess and effectively respond to resistance, anger, fear, confusion, and other client emotions.

We also continued to request and analyze the data of the post Certification Training satisfaction survey administrated by DCFS. The FY2022 data suggested that there was no typical reaction to simulation training in the CPTA. Many respondents had a positive experience and some of them enthusiastically endorsed the training. Some had a negative experience without expressing

[33] Cross, T.P., Chiu, L., Havig, K., & Tran, S., (2022). *FY2022 program evaluation of the Child Protection Training Academy for new DCFS investigators*. Urbana, IL: Children and Family Research Center, University of Illinois at Urbana-Champaign.

[34] Bogo, M., Katz, E., Regehr, C., Logie, C., Mylopoulos, M., & Tufford, L. (2013). Toward understanding meta-competence: An analysis of students' reflection on their simulated interviews. *Social Work Education, 32*(2), 259-273. Tufford, L., Bogo, M., & Katz, E. (2017). Examining metacompetence in graduating BSW students. *Journal of Baccalaureate Social Work*, *22*(1), 93-110.

negative affect. Some had a negative experience and reported noticeable negative feelings about it, perceiving that they were disrespected or feeling appalled. The historical analysis of post Certification Training satisfaction survey from FY2016 to FY2022 showed three periods of time that differed significantly: 1) FY2016-FY2017: the average satisfaction over simulation training were close to the highest positive rating (5.0 = strongly agree with the positive statements); 2) FY2018-FY2020: the average satisfaction ratings dropped but were still above 4 (4.0 = agree with the positive statements); 3) FY2021-FY2022: the average satisfaction ratings fell below 4.