Data and Evidence on Residential Outcomes: How do we gather what is essential for practice, evaluation and policy goals?

How do we make use of data in the most meaningful way? How can we evidence that TRC has a role and purpose in our child welfare systems? In this session we will draw on a case study example of a residential programme in England (No Wrong Door) which has been driven by the generation of meaningful data and evidence. No Wrong Door was first introduced in one area in England in 2015. Since the start detailed child level data in the form of a ‘tracker’ has been gathered. Throughout the data has been collated and analysed and has been used in the form of summary reports and data dashboard for practitioners, and for strategic leads. The data has also been analysed and compared with other cohorts for external evaluation and to inform national policy to support the scale and spread of No Wrong Door into new areas in England. In this session we will outline how the ‘tracker’ was co-produced by those working and managing TRC in partnership with external researchers. We will also explain how data and evidence has been used to develop positive feedback practices that have informed TRC practice, and subsequently improved data quality. We will explore the learning and applicability for other TRC programmes and provide top tips based on the learning from the past five years.

Presenters:

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**Lisa Holmes** is an Associate Professor and Director of the Rees Centre, University of Oxford. Over the past 20 years Lisa has undertaken a range of research projects to inform child welfare policy and practice. Lisa has actively disseminated her research with a particular focus on ensuring impact and knowledge transfer across children’s social care policy and practice. She has presented papers at numerous national and international conferences, seminars and workshops.

![Lisa Holmes](image)

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**Dr. Christopher Bellonci** brings 25+ years of experience as a Board Certified Child, Adolescent and Adult Psychiatrist working directly with children and families in outpatient, inpatient and residential settings. He has consulted with state and federal child welfare and mental health agencies helping those agencies develop best practices and service systems to identify, prevent, treat and support children with behavioral health needs and their families.