Webinar Objectives

• Describe key evaluation principles that can apply to all public health programs.

• Describe how the CDC evaluation framework can be used to plan and implement program evaluations.

• Identify where your local programs/interventions are at in relation to evaluation readiness.
Webinar Objectives

• Identify appropriate types of evaluation to conduct for meaningful information based on the stage of the program/intervention.

• Describe evaluation standards and measures of the national Public Health Accreditation Board program.

• Identify processes and strategies to prepare a local public health agency to meet these standards and measures.
Presenters

Mary V. Davis, DrPH, MSPH
Director of Evaluation Services
North Carolina Institute for Public Health, Gillings School of Global Public Health

Deena Mosbarger, BS, PHR
HR / Special Projects Coordinator
Clay County Health Department
Mary V. Davis, DrPH, MSPH
Director of Evaluation Services
North Carolina Institute for Public Health,
Gillings School of Global Public Health
But First A Little Review

• **Evaluation** is the systematic investigation of the merit, worth, or significance of any “object”

  *Michael Scriven*

• **Program** is any organized public health action/activity implemented to achieve some result
“Research seeks to prove, evaluation seeks to improve...”

M.Q. Patton
Evaluation Purposes

• Focus on data for judgment/decision making
  – Program improvement
  – Program continuation
  – Program dissemination
  – Information/impact sharing
• Establish merit or worth
• Maximize context
Planning: Systematic Framework: CDC Evaluation Framework

[Diagram with steps: Engage stakeholders, Describe the program, Focus the evaluation design, Justify conclusions, Gather credible evidence, Ensure use and share lessons learned, Standards: Utility, Feasibility, Propriety, Accuracy]
Logic model and evaluation

Needs/asset assessment:
What are the characteristics, needs, priorities of target population?
What are potential barriers/facilitators?
What is most appropriate?

Process evaluation:
How is program implemented?
Fidelity of implementation?
Are activities delivered as intended?
Are participants being reached as intended?
What are participant reactions?

Outcome evaluation:
To what extent are desired changes occurring? For whom?
Is the program making a difference?
What seems to work? Not work?
What are unintended outcomes?

Evaluation

University of Wisconsin-Extension, Program Development and Evaluation
EVALUATION PRINCIPLES
Program Evaluation Standards

- Utility—ensures that an evaluation will meet information needs of intended users
- Feasibility—ensures that an evaluation will be realistic, prudent, diplomatic, and frugal
- Propriety—evaluation will be conducted legally, ethically, and with regard of stakeholders
- Accuracy—evaluation will reveal and convey technically adequate information about features that determine merit or worth of program
Feasibility: Resources

• Time
• Budget or available $
• Stakeholder interest and participation
• Program Staff
• Existing data
Evaluation Planning

1. Use CDC Evaluation Framework steps as a planning and implementation tool

ENGAGE STAKEHOLDERS
EARLY AND OFTEN

2. Use program logic model to understand program.
3. Be clear on the purpose of your evaluation.
4. Evaluation questions guide selection of methods.
5. Level of rigor should match level of *need for rigor*. 
Data Collection

Develop proposed indicators and data sources to answer evaluation questions

- What information can answer the evaluation questions?
- What is credible to important stakeholders?
- What data are already available?
- What is feasible to collect?
- What is the time frame for the evaluation?
- What resources are available (time, staff, money, expertise)?
Readiness for Evaluation

- Stakeholder interests
- Program maturation
- Previous evaluation
Stakeholder Interests

• Who are the stakeholders
  – Program
  – Evaluation

• What do they want to know from the evaluation?

• How will they use results
  – Decisions about the program?

• What resources will stakeholders contribute/provide to evaluation?
The Evaluation Hierarchy

Program Maturity & Previous Evaluation

- Assessment of Cost and Efficiency
- Assessment of Program Outcome/Impact
- Assessment of Program Process and Implementation
- Assessment of Program Design and Theory
- Assessment of Need for the Program

Evaluation Design Options

• Observational/Nonexperimental/Case Study
• Intervention (single group)
  – Pretest/Posttest
  – Time Series
• Quasi-Experimental (comparison group)
  – Pre/Post test
  – Time Series
• Experimental (control group—randomization)
  – Post Only
  – Pre/Post
  – Time Series
Prerequisites for Impact Designs

• Must build on earlier evaluations
  – Adequacy of program theory
  – Process evaluation demonstrating adequacy of implementation

• Adequate technical and managerial skills

• Adequate resources and program support for intense evaluation
EXAMPLE:
CDC FRAMEWORK APPLICATION

North Carolina
LOCAL HEALTH DEPARTMENT ACCREDITATION
NC LHD Accreditation

- Designed to improve capacity and consistency of LHD services
  - IOM report
  - NC Local Health Directors and DPH
- Developed through 2 pilot phases
- 50/85 NC LHDs now accredited
Planning: Systematic Framework:
CDC Evaluation Framework

Steps
- Engage stakeholders
- Ensure use and share lessons learned
- Justify conclusions
- Gather credible evidence
- Describe the program
- Focus the evaluation design

Standards
- Utility
- Feasibility
- Propriety
- Accuracy
Stakeholder Engagement

- Program Personnel
- Division of Public Health Personnel
- Agency Personnel
- Site Visitors
- Accreditation Board
- NC Legislature
INPUTS
- Funding Legislation Commission Rules
- Partnership NCALHD DPH NCIPH
- Accreditation Board Accreditation Administrator
- Site Visitors Consultants
- LHDs Pilot Study Findings NC Task Force Reports

ACTIVITIES
- Participant Training
- Technical Assistance to LHDs
- HDSAI Submission Site Visits Site Visit Reports
- Accreditation Board Deliberations Appeals Process Evaluation

PROCESS OUTPUT:
- System Performance Improvement
- Accreditation Benefits Accreditation Costs

AGENCY OUTPUT:
- LHDs New policies, procedures, practices Performance improvement
- LHDs Accredited: Standards Met Agency budgets or funding eligibility Improved partnerships

IMPACT:
- Increased effectiveness of delivery of 10 essential services
- Assurance of LHD capacity to provide essential services on a statewide basis

CONTEXT: Improved Health Outcomes
Focus the Evaluation: Pilot Evaluation

- Do the program activities work as intended, how well does each of the activities work?
  - Does training adequately prepare agency staff and site visitors for their roles?

- How do the activities need to be improved?
  - In what specific ways do training for agency staff and site visitors need to be improved?

- What are the benefits and costs of going through accreditation?
  - How many hours of staff time are needed to prepare an agency for accreditation?
Focus Evaluation Design: Implementation Evaluation

1. Process Outputs--Cont’d monitoring of system activities and identifying areas for program QI

2. Agency Outputs
   - How many LHDs accredited, what are the common standards missed by LHDs?
   - What improvements do agencies make in policies and practices to prepare for and following accreditation?
   - Do agencies experience improvements in partnerships?
INPUTS
- Funding Legislation
- Commission Rules
- Partnership
- NCALHD
- DPH
- NCIPH

ACTIVITIES
- Participant Training
- Technical Assistance to LHDs
- HDSAI Submission
- Site Visits
- Site Visit Reports
- Accreditation Board Deliberations
- Appeals Process
- Evaluation

PROCESS OUTPUT:
- System Performance Improvement
- Accreditation Benefits
- Accreditation Costs

AGENCY OUTPUT:
- LHDs Accredited Standards Performance
- LHDs New policies, procedures, practices
- Performance improvement
- Agency budgets or funding eligibility
- Improved partnerships

CONTEXT: Improved Health Outcomes
The Evaluation Hierarchy

Program Maturity & Previous Evaluation

- Assessment of Need for the Program
- Assessment of Program Design and Theory
- Assessment of Program Process and Implementation
- Assessment of Program Outcome/Impact
- Assessment of Cost and Efficiency

# Gather Evidence: Data Collection

**Participants**
- Agency Personnel
- Site Visitors
- Program Personnel
- DPH Partners
- Accreditation Board

**Methods**
- Surveys
- Interviews
- Document Review
- Focus Groups (Pilot)
Justify Conclusions: Analysis and Reports

• Descriptive Statistics
• Presentation of data by evaluation question and respondent

• Current Reporting
  – Brief report (10-20pp)
  – Presentation to program personnel
  – Presentation to Accreditation Board
Ensuring Use

• Reports identify specific suggestions for program improvement
• Program staff review and identify specific changes
• Changes are reported back
  – Evaluation Reports
  – Reports to Board
• Example: Need for Additional Board Procedures
PILOT 1
Jan-April 2004

Key Issues
1. Assessment Instrument duplicative, standards unclear
2. Site Visitor Selection
3. Timeline for assessment too short
4. Accreditation Board Selection and Process
5. Inadequate Training

Program Solutions
1. Revised, revamped instrument
2. Revised site visitor selection criteria, expanded pool
3. Lengthened timeline for assessment to 3 months
4. Updated Accreditation Board member selection criteria and processes
5. Modified Training

PILOT 2
FY 04-05

Key Issues
1. Assessment instrument governance section did not meet all models.
2. Need for more specific site visit policies
3. Need for enhanced communication methods

Program Solutions
1. Convened committee to improve governance activities
2. Updated site visit policies, e.g. requests for additional documentation and exit interview
3. Created program website with FAQs, resources for health departments, etc

Evaluation Results and Opportunities for Quality Improvement
• Focus on program evaluation—improving the accreditation program
  – Needs assessment
  – Program theory and design
  – Process evaluation
• Moving to outcome evaluation
INPUTS
- Funding
- Legislation
- Commission Rules
- Partnership
- NCALHD
- DPH
- NCIPH
- Accreditation Board
- Accreditation Administrator
- Site Visitors
- Consultants
- LHDs
- Pilot Study Findings
- NC Task Force Reports

ACTIVITIES
- Participant Training
- Technical Assistance to LHDs
- HDSAI Submission
- Site Visits
- Site Visit Reports
- Accreditation Board Deliberations
- Appeals Process
- Evaluation

PROCESS OUTPUT:
- System Performance Improvement
- Accreditation Benefits
- Accreditation Costs

AGENCY OUTPUT:
- LHDs
  - New policies, procedures, practices
  - Performance improvement
  - Accredited Standards Met
  - Agency budgets or funding eligibility
  - Improved partnerships

IMPEAC:
- Increased effectiveness of delivery of 10 essential services
- Assurance of LHD capacity to provide essential services on a statewide basis

CONTEXT: Improved Health Outcomes
Outcome Questions

• Does accreditation lead to improvements in performance of 10 essential services
  – Preparedness functions
  – Service indicators
  – Community Partnerships
  – Leadership
  – Policy development and implementation

• Quasi-experimental studies comparing performance of accredited to non-accredited agencies
Getting to Outcomes

• Well-established program
  – Pilot and process evaluation
  – Built in quality improvement processes

• In place for 4 years
• More than ½ agencies are accredited
• Exploring the “right” outcome measures
EXAMPLE 2: PEER POWER
# Example: Peer Power

<table>
<thead>
<tr>
<th>RESOURCES</th>
<th>ACTIVITIES</th>
<th>OUTPUTS</th>
<th>OUTCOMES</th>
<th>IMPACT</th>
</tr>
</thead>
<tbody>
<tr>
<td>HD Resources</td>
<td>Create Curriculum</td>
<td>HS students successfully Teach classes</td>
<td>Healthier Nutrition, Physical Activity Behaviors</td>
<td>HS student Teachers are New positive Community Role models</td>
</tr>
<tr>
<td>School Cooperation</td>
<td>Recruit and train HS Students</td>
<td>MS students Participate in active Health Education classes</td>
<td>Tobacco Avoidance</td>
<td>Positive Culture of Healthy behaviors In community</td>
</tr>
<tr>
<td>Foundation Funding</td>
<td>Teach Curriculum to MS students</td>
<td></td>
<td></td>
<td>Active HD School Partnership</td>
</tr>
<tr>
<td>Curriculum Ideas</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Measuring and Documenting Program Effectiveness
April 27, 2010
Identify Areas for Evaluation

- Influences
- Activities
- Outputs
- Outcomes (Short-term, Intermediate)
- Impacts

Context
Implementation

Formative Evaluation
Summative Evaluation

Measuring and Documenting Program Effectiveness
April 27, 2010
<table>
<thead>
<tr>
<th>Evaluation Type</th>
<th>Stakeholder</th>
<th>Question</th>
<th>Use</th>
</tr>
</thead>
<tbody>
<tr>
<td>Outcome</td>
<td>Funding Agency</td>
<td>How effective was the program in changing MS student health behaviors?</td>
<td>Demonstrate program effectiveness Identify best practices for other grantees</td>
</tr>
<tr>
<td>Impact</td>
<td>Health Department</td>
<td>How did the program impact the community?</td>
<td>Provide information to county agencies to gain sustainability funding</td>
</tr>
</tbody>
</table>
Indicators: Peer Power

- **Context**—Expenditures of external funding
- **Implementation**
  - Activities—Number of HS students trained to be teachers
  - Output—Number of classes taught by HS students
- **Outcomes**
  - Short-term—Increase in number of MS students self-reporting physical activity 3 days a week
### Peer Power Indicators

<table>
<thead>
<tr>
<th>Question</th>
<th>Indicators</th>
<th>Instrument</th>
</tr>
</thead>
<tbody>
<tr>
<td>How did the program impact the community?</td>
<td>HS student attitude about teaching as career choice</td>
<td>Focus groups with HS students</td>
</tr>
<tr>
<td></td>
<td>HS student parent opinions about how program impacted his/her Child</td>
<td>Structured interviews with parents</td>
</tr>
</tbody>
</table>
Program Readiness for Evaluation

- Match evaluation questions to program maturity
- Stakeholder engagement and commitment
- Available resources to conduct the evaluation
- Clear plan for using results
Program Readiness for Evaluation

- Match evaluation questions to program maturity
- Stakeholder engagement and commitment
- Available resources to conduct the evaluation
- Clear plan for using results
PHAB: WHAT IS IT AND HOW DOES IT RELATE TO EVALUATION
Voluntary Accreditation Goal

The goal of a voluntary national accreditation program is to improve and protect the health of the public by advancing the quality and performance of state and local public health departments.

Source: PHAB
## PHAB Timeline

<table>
<thead>
<tr>
<th>Year</th>
<th>2007</th>
<th>2008</th>
<th>2009</th>
<th>2010</th>
<th>2011</th>
</tr>
</thead>
<tbody>
<tr>
<td>Q1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Q2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Q3</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Q4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Q1</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Q2</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Q3</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Q4</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- **Internal Operations**
- **Standards and Measures**
- **Assessment Process**
- **18 Month Beta Test**

Source: PHAB
### PHAB Assessment Process Overview

1. **Pre-application**
   Applicant prepares and assesses readiness, informs PHAB of its intent to apply, and receives training.

2. **Application**
   Applicant submits application form.

3. **Self-assessment**
   Applicant gathers documentation.

4. **Site Visit**
   Site visit is conducted and report developed.

5. **Accreditation Decisions**
   PHAB Board will award accreditation status.

6. **Appeals**
   Procedure for appeals and complaints.

7. **Reports & Reaccreditation**
   Department reports progress and reapplies.

*Source: PHAB*
Three required components:

- Community health assessment
- Community health improvement plan
- Agency strategic plan

Source: PHAB
What Does My Health Department Need to be Doing?

- Review Standards
- Review Assessment Process
- Strategic Plan
- Community health assessment
- Community health improvement plan
- Organize your health department (governance to staff)

Source: PHAB
Evaluation Domain 9

Domain: Evaluate and continuously improve processes, programs, and interventions

Standard 9.1 B: Evaluate public health processes, programs, and interventions provided by the agency and its contractors.

Source: PHAB
Specific Measures

• 9.1.3 B: Establish goals, objectives and performance measures for processes, programs and interventions

• 9.1.4 B: Monitor performance measures for processes, programs and interventions

• 9.1.5 B: Evaluate the effectiveness of processes, programs, and interventions and identify needs for improvement

• 9.1.7 L: Require staff participation in evaluation methods and tools training

Source: PHAB
Intention of the Measures

• That key processes and all programs and interventions have:
  – Goals
  – Objectives
  – Measures (process/health outcomes)

• That achievement of goals, objectives, and measures are monitored

• That monitoring results in identified areas for improvement that are acted upon

Source: PHAB
Preparing for Accreditation Evaluation Standards

For key processes, programs, and interventions

- Use CDC Framework and Evaluation Principles
- Identify and engage appropriate stakeholders
- Create logic models
- Ensure each has appropriate goals, objectives, measures

Source: PHAB
Accreditation Evaluation Standards

• Review each process or program for maturity—ready to be monitored or evaluated?

• Conduct appropriate evaluations per CDC Evaluation Framework

• Identify and implement areas for improvement based on evaluation results
Readiness Points of Emphasis

- Program Maturity
- Evaluation Designs
- Evaluation Standards
  - Utility
  - Feasibility
  - Accuracy
  - Propriety
- Use evaluation findings to improve programs

Source: PHAB
The Evaluation Hierarchy

Program Maturity & Previous Evaluation

- Assessment of Need for the Program
- Assessment of Program Design and Theory
- Assessment of Program Process and Implementation
- Assessment of Program Outcome/Impact
- Assessment of Cost and Efficiency

Logic model and evaluation

Inputs → Outputs (Activities, Participation) → Outcomes - Impact (Short Term, Medium Term, Long Term)

Assumptions → External Factors

NEEDS → PROCESS → OUTCOMES → IMPACT

Evaluation

Needs/asset assessment:
What are the characteristics, needs, priorities of target population?
What are potential barriers/facilitators?
What is most appropriate?

Process evaluation:
How is program implemented?
Fidelity of implementation?
Are activities delivered as intended?
Are participants being reached as intended?
What are participant reactions?

Outcome evaluation:
To what extent are desired changes occurring? For whom?
Is the program making a difference?
What seems to work? Not work?
What are unintended outcomes?

University of Wisconsin-Extension, Program Development and Evaluation
North Carolina
LOCAL HEALTH DEPARTMENT ACCREDITATION

PILOT 1
Jan-April 2004

**Key Issues**
1. Assessment Instrument duplicative, standards unclear
2. Site Visitor Selection
3. Timeline for assessment too short
4. Accreditation Board Selection and Process
5. Inadequate Training

**Program Solutions**
1. Revised, revamped instrument
2. Revised site visitor selection criteria, expanded pool
3. Lengthened timeline for assessment to 3 months
4. Updated Accreditation Board member selection criteria and processes
5. Modified Training

PILOT 2
FY 04-05

**Key Issues**
1. Assessment instrument governance section did not meet all models.
2. Need for more specific site visit policies
3. Need for enhanced communication methods

**Program Solutions**
1. Convened committee to improve governance activities
2. Updated site visit policies, e.g. requests for additional documentation and exit interview
3. Created program website with FAQs, resources for health departments, etc

**Evaluation Results and Opportunities for Quality Improvement**
QUESTIONS?
LHD Evaluation Challenges

Deena Mosbarger, BS, PHR

HR / Special Projects Coordinator
Clay County Health Department
LHD Evaluation Challenges: #1 Data Issues

• \_bs\_nc\_ of Data
• Small Sample Sizes
• Timeliness of Data
LHD Evaluation Challenges: 
#2  Data Expertise
LHD Evaluation Challenges: #3 Documentation

Create a trail – “If it’s not documented, it didn’t happen.”
Accreditation Preparedness

“A wise man proportions his belief to the evidence.”

David Hume
18-Century Scottish Philosopher
Feedback

- Please complete the online feedback survey following this session
- Your input is used to plan future offerings.
- Check your email for a link to the survey or you will find it on the IPLAN website where you downloaded this Webinar.
Join us for a live Q and A session with the presenters on April 27th from 2:30 – 3:00 PM.

Dial – 1 (877) 411-9748
Enter Passcode – 3467868#
If you have training or technical assistance follow-up needs, contact:

Laurie Call, Director
Center for Community Capacity Development, IPHI
Laurie.Call@iphionline.org