

DP18-1815 CATEGORY A AND B OVERARCHING FEEDBACK ON EVALUATION AND PERFORMANCE MEASUREMENT PLANS (EPMP)

JUNE 20, 2019




NATIONAL CENTER FOR CHRONIC DISEASE PREVENTION AND HEALTH PROMOTION

Division of Diabetes Translation (DDT) and Division for Heart Disease and Stroke Prevention (DHDSP)



AGENDA

-
- ❖ Feedback on recipient-led evaluation plans
 - EPMP Good Practices
 - Category A Reminders
 - Category B Reminders
-
- ❖ Performance measurement plan reminders
-
- ❖ What's next
-
- ❖ Question and answer session
-
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1815 OVERARCHING EVALUATION QUESTIONS

Evaluation Core Area	Overarching Evaluation Questions
Approach	1. To what extent has the recipient's implementation approach resulted in achieving the desired outcomes?
Efficiency	2. To what extent has the NOFO affected efficiencies with regard to infrastructure, management, partners, and financial resources?
Effectiveness	3.1 To what extent has the recipient increased the reach of Category A and B strategies to prevent and control diabetes and cardiovascular disease? 3.2 To what extent has implementation of Category A and B strategies led to improved health outcomes among the identified priority population(s)? 3.3 What factors were associated with effective implementation of Category A and B strategies?
Sustainability/Data Driven Decision Making	4. To what extent can the strategies implemented be sustained after the NOFO ends?
Impact	5. To what extent have the strategies implemented contributed to a measurable change in health, behavior, or environment in a defined community, population, organization, or system?

1815 EVALUATION PLAN GOOD PRACTICES

GOOD PRACTICE #1: ENSURE ALIGNMENT



1815 EVALUATION PLAN GOOD PRACTICES

EVALUATION ALIGNMENT

Year 1 deliverable
and evaluation
questions

Evaluation
questions and
indicators

Evaluation
questions and
data collection
methods

Data collection
methods and data
analysis

1815 EVALUATION PLAN GOOD PRACTICES

EVALUATION ALIGNMENT

Year 1 deliverable
and evaluation
questions

Ensure that evaluation questions
will provide the data needed for
the Year 1 deliverable

1815 EVALUATION PLAN GOOD PRACTICES

EVALUATION ALIGNMENT

Evaluation questions
and indicators

Align indicators to ensure the
data reported will answer your
evaluation questions

1815 EVALUATION PLAN GOOD PRACTICES

EVALUATION ALIGNMENT

Evaluation questions
and data collection
methods

Remember that the evaluation
question always determines the
methods

1815 EVALUATION PLAN GOOD PRACTICES

EVALUATION ALIGNMENT

Data collection
methods and data
analysis

Tailor analysis methods to the
type of data you are collecting

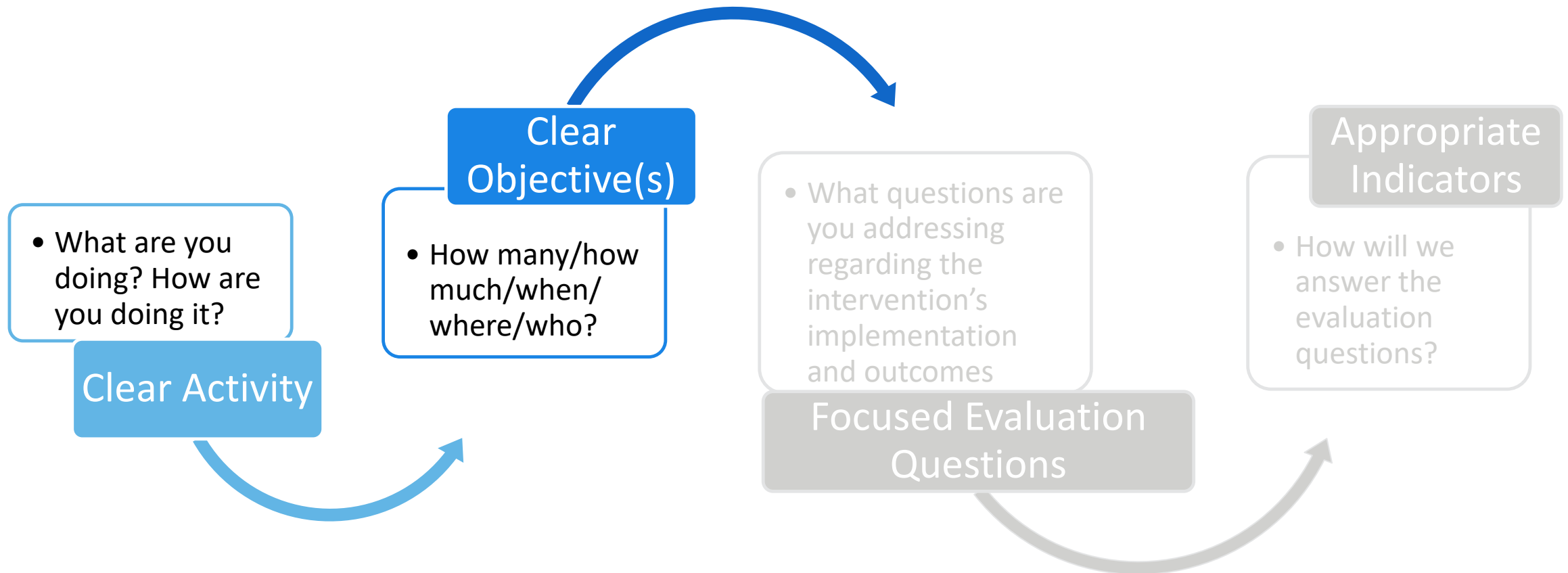
1815 EVALUATION PLAN GOOD PRACTICES

GOOD PRACTICE #2 ENSURE CLARITY AND SPECIFICITY

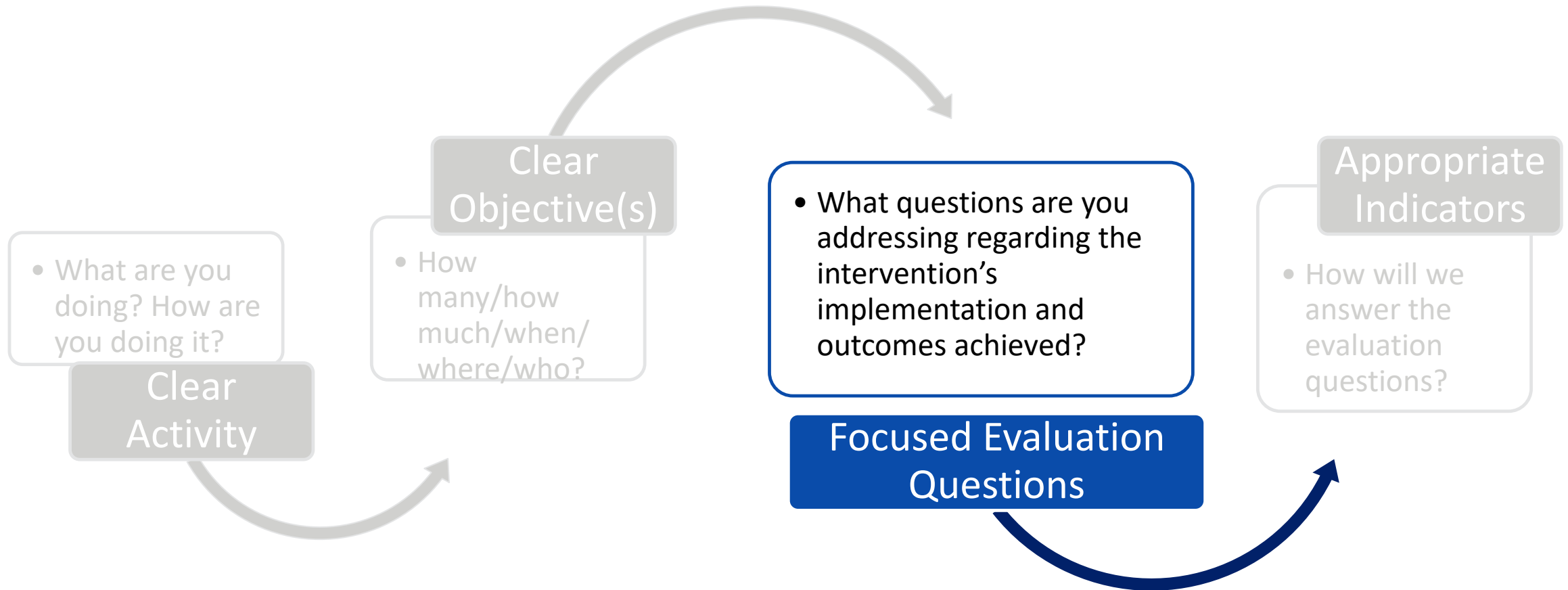


1815 EVALUATION PLAN GOOD PRACTICES

CLARITY AND SPECIFICITY

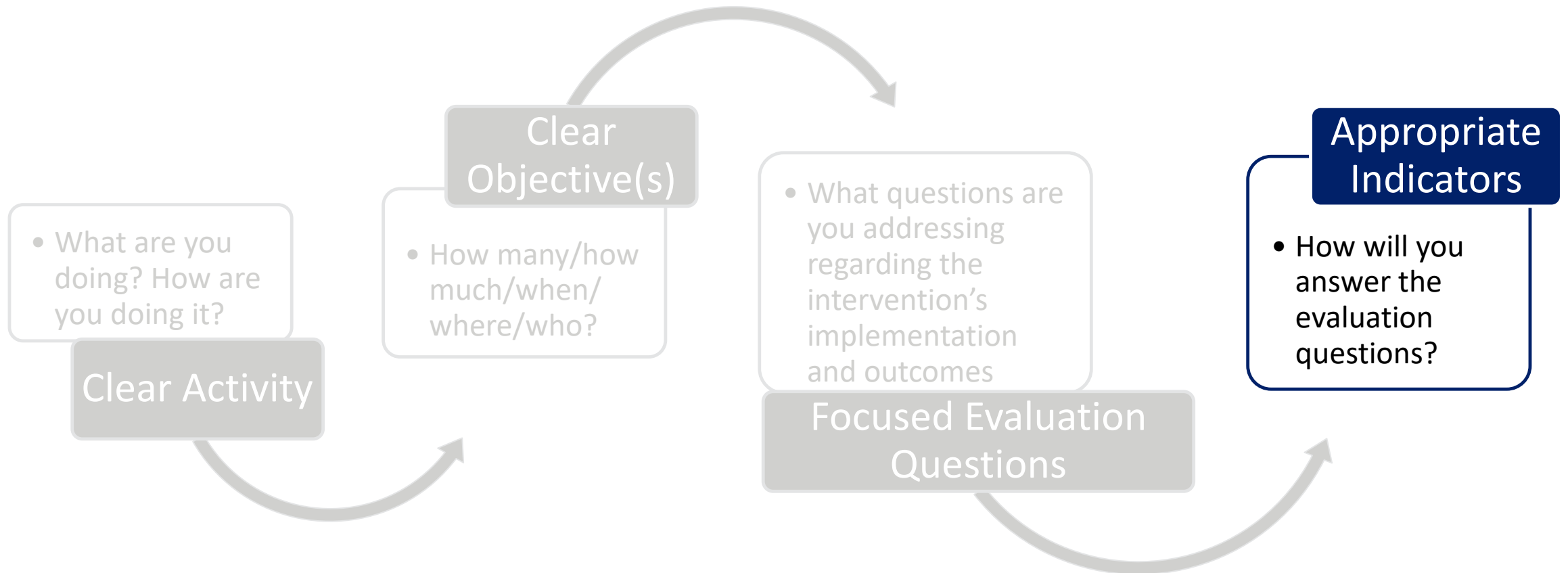


1815 EVALUATION PLAN GOOD PRACTICES CLARITY AND SPECIFICITY



1815 EVALUATION PLAN GOOD PRACTICES

CLARITY AND SPECIFICITY



1815 EVALUATION PLAN GOOD PRACTICES

CLARITY AND SPECIFICITY

Appropriate Indicators

- Indicators are signs of progress and are used to determine if a program is meeting its objectives and goals
- Indicators should be specific, measurable, attributable, relevant, and time-bound (SMART)
- Quantitative indicators typically begin with a # or %
- Qualitative indicators typically begin with “Description of...”

EXAMPLE OF A CLEAR AND SPECIFIC EVALUATION PLAN

CLEAR DESCRIPTION OF ACTIVITIES

Clear Description of Activities

Under strategy B.2., state X will expand existing partnerships with 12 Rural Health Centers (RHCs) in Washington, Marrion, and Fuller counties within the first year of the award period to:

- Provide technical assistance for the implementation of CQI measures and data dashboards to track disparities in hypertension control and cholesterol management (activity B.2.1)
- Provide training for IT/data staff to integrate data elements into EHR (activity B.2.2)

EXAMPLE OF A CLEAR AND SPECIFIC EVALUATION PLAN

CLEAR DESCRIPTION OF ACTIVITIES

Clear Description of Activities

When?

Under strategy B.2., state X will expand existing partnerships with 12 Rural Health Centers (RHCs) in Washington, Marrion, and Fuller counties within the first year of the award period to:

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- Provide training for IT/data staff to integrate data elements into EHR (activity B.2.2)

EXAMPLE OF A CLEAR AND SPECIFIC EVALUATION PLAN

CLEAR DESCRIPTION OF ACTIVITIES

Clear Description of Activities

Who?

Under strategy B.2., state X will expand existing partnerships with 12 Rural Health Centers (RHCs) in Washington, Marrion, and Fuller counties within the first year of the award period to:

- Provide technical assistance for the implementation of CQI measures and data dashboards to track disparities in hypertension control and cholesterol management (activity B.2.1)
- Provide training for IT/data staff to integrate data elements into EHR (activity B.2.2)

EXAMPLE OF A CLEAR AND SPECIFIC EVALUATION PLAN

CLEAR DESCRIPTION OF ACTIVITIES

Clear Description of Activities

What?

Under strategy B.2., state X will expand existing partnerships with 12 Rural Health Centers (RHCs) in Washington, Marrion, and Fuller counties within the first year of the award period to:

- Provide technical assistance for the implementation of CQI measures and data dashboards to track disparities in hypertension control and cholesterol management (activity B.2.1)
- Provide training for IT/data staff to integrate data elements into EHR (activity B.2.2)

EXAMPLE OF A CLEAR AND SPECIFIC EVALUATION PLAN

CLEAR DESCRIPTION OF ACTIVITIES

Clear Description of Activities

How?

Under strategy B.2., state X will expand existing partnerships with 12 Rural Health Centers (RHCs) in Washington, Marrion, and Fuller counties within the first year of the award period to:

- Provide technical assistance for the implementation of CQI measures and data dashboards to track disparities in hypertension control and cholesterol management (activity B.2.1)
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EXAMPLE OF A CLEAR AND SPECIFIC EVALUATION PLAN

CLEAR DESCRIPTION OF ACTIVITIES

Clear Description of Activities

How many?

Under strategy B.2., state X will expand existing partnerships with 12 Rural Health Centers (RHCs) in Washington, Marrion, and Fuller counties within the first year of the award period to:

- Provide technical assistance for the implementation of CQI measures and data dashboards to track disparities in hypertension control and cholesterol management (activity B.2.1)
- Provide training for IT/data staff to integrate data elements into EHR (activity B.2.2)

EXAMPLE OF A CLEAR AND SPECIFIC EVALUATION PLAN

FOCUSED EVALUATION QUESTIONS

Clear Description of Activities

Under strategy B.2., state X will expand existing partnerships with 12 Rural Health Centers (RHCs) in Washington, Marrion, and Fuller counties within the first year of the award period to:

- Provide technical assistance for the implementation of CQI measures and data dashboards to track disparities in hypertension control and cholesterol management (activity B.2.1)
- Provide training for IT/data staff to integrate data elements into EHR (activity B.2.2)

Focused Evaluation Questions

- 2.1 What percent of the year 1 planned activities have been implemented under strategy B.2.?
- 2.2 What were the facilitators and barriers to the implementation of the CQI measures and dashboards and the EHR integration activity?

EXAMPLE OF A CLEAR AND SPECIFIC EVALUATION PLAN APPROPRIATE INDICATORS

Appropriate Indicators

- 2.1 What percent of the year 1 planned activities have been implemented under strategy B.2?
 - 2.1.a. % of RHCs that have CQI measures and dashboards fully implemented in the first 9 months
 - 2.1.b. % of RHCs that have integrated data elements into EHR in the first 9 months
 - 2.1.c. # of RHCs that state X has provided training to for IT/data staff in the first 9 months
- 2.2 What were the facilitators and barriers to the implementation of the Rural Health Center (RHC) dashboard and EHR integration activity?
 - 2.2.a. Description of facilitators and barriers to implementation of the CQI measures and dashboards that RHC staff encountered in the first 9 months
 - 2.2.b. Description of facilitators and barriers to integration of the data elements into EHR that RHC IT/ data staff encountered in the first 9 months

EXAMPLE OF A CLEAR AND SPECIFIC EVALUATION PLAN APPROPRIATE INDICATORS

Appropriate Indicators

2.1 What percent of the year 1 planned activities have been implemented under strategy B.2.?

2.1.a. % of RHCs that have CQI measures and dashboards fully implemented in the first 9 months of the program

2.1.b. % of RHCs that have integrated data elements into EHR in the first 9 months

2.1.c. # of RHCs that state x has provided training to for IT/data staff in the first 9 months

2.2 What were the facilitators and barriers to the implementation of the Rural Health Center (RHC) dashboard and EHR integration activity?

2.2.a. Description of facilitators and barriers to implementation of the CQI measures and dashboards that RHC staff encountered in the first 9 months

2.2.b. Description of facilitators and barriers to integration of the data elements into EHR that RHC IT/ data staff encountered in the first 9 months

EXAMPLE OF A CLEAR AND SPECIFIC EVALUATION PLAN DATA COLLECTION SOURCE, METHODS, ANALYSIS

Evaluation Questions	2.1 What percent of the year 1 planned activities have been implemented under strategy B.2.?
Appropriate Indicators	2.1.a. % of RHCs that have CQI measures and dashboards fully implemented in the first 9 months 2.1.b. % of RHCs that have integrated data elements into EHR in the first 9 months 2.1.c. # of RHCs that state x has provided training to for IT/data staff in the first 9 months
Data Source	Program Records - HDSP Activity and Output Tracking Workbook
Data Collection Methods	Data abstraction from program records (or document review)
Data Analysis	Descriptive statistics

EXAMPLE OF A CLEAR AND SPECIFIC EVALUATION PLAN

DATA COLLECTION SOURCE, METHODS, ANALYSIS

Evaluation Questions	2.2. What were the facilitators and barriers to the implementation of the CQI measures and dashboards and the EHR integration activity?
Indicators	2.2.a. Description of facilitators and barriers to implementation of the dashboards that RHC staff encountered in the first 9 months 2.2.b. Description of facilitators and barriers to integration of the data elements into EHR that RHC IT/ data staff encountered in the first 9 months
Data Source	Interview Notes
Data Collection Methods	Key informant semi-structured phone interviews with 6 CQI measure coordinators from 6 different RHCs (2.2a) and IT/data staff members from 6 different RHCs (2.2b)
Data Analysis	Thematic analysis

1815 CATEGORY-SPECIFIC EPMP REMINDERS





EPMP GUIDANCE CATEGORIES A & B

Category A

Comprehensive evaluation each year:

States will evaluate the core areas of approach, efficiency, effectiveness, and sustainability every award year and turn in a comprehensive evaluation report each year. The final deliverable is a Health Impact Statement in year 5.

Category B

Stepwise evaluation:

States can add a new core area to evaluate each year using a stepwise approach and will turn in an evaluation deliverable focused on a specific core area each year.

States may incorporate any or all of the core areas in their evaluation in any year, but the only required deliverable will focus on the specific core area highlighted for that year. The final deliverable is a Health Impact Statement in year 5.

1815 CATEGORY A

YEAR 1 EVALUATION DELIVERABLE

Year	Core Areas	Recipient Deliverables
1	<i>Approach, Efficiency, Effectiveness, Sustainability</i>	<i>Evaluation Report</i>
2	Approach, Efficiency, Effectiveness, Sustainability	Evaluation Report
3	Approach, Efficiency, Effectiveness, Sustainability	Evaluation Report
4	Approach, Efficiency, Effectiveness, Sustainability	Evaluation Report
5	Health Impact	Health Impact Statement

You will need evaluation data to report on the following:

- Detailed description of how activities were implemented under selected strategy
- Measureable outputs and conclusions
- Facilitators and barriers to implementing the selected strategy
- Plans for communicating/sharing your findings
- Plans to incorporate evaluation findings for program improvement

1815 CATEGORY **B**

YEAR 1 EVALUATION DELIVERABLE

Year	Core Area	Recipient Deliverables
1	<i>Approach</i>	<i>Implementation Brief</i>
2	Efficiency	Efficiency/Strategy Mapping
3	Effectiveness	Effectiveness Brief or Manuscript
4	Sustainability	Sustainability and Action Report
5	Health Impact	Health Impact Statement per strategy evaluated

You will need evaluation data to report on the following:

- Detailed description of how activities were implemented under selected strategy
- Measureable outputs and accomplishments related to activity
- Facilitators and barriers for implementing activities under selected strategies
- Plans to incorporate evaluation findings for program improvement

1815 CATEGORY A AND B PERFORMANCE MEASUREMENT REMINDERS



PERFORMANCE MEASUREMENT REMINDERS

- ❑ “Zero” should **not** be used as a placeholder for unknown or unavailable data.
- ❑ Use the performance measure definitions as a resource to determine the appropriate data source and reporting format for each measure.
- ❑ Data reported should reflect the priority populations and settings identified in your work plan.
- ❑ Performance measure narratives can provide context around your performance measure data and Measure Notes should provide detailed information about efforts to obtain data and the anticipated timeline for obtaining data for measures that are currently unknown, unavailable or estimated.



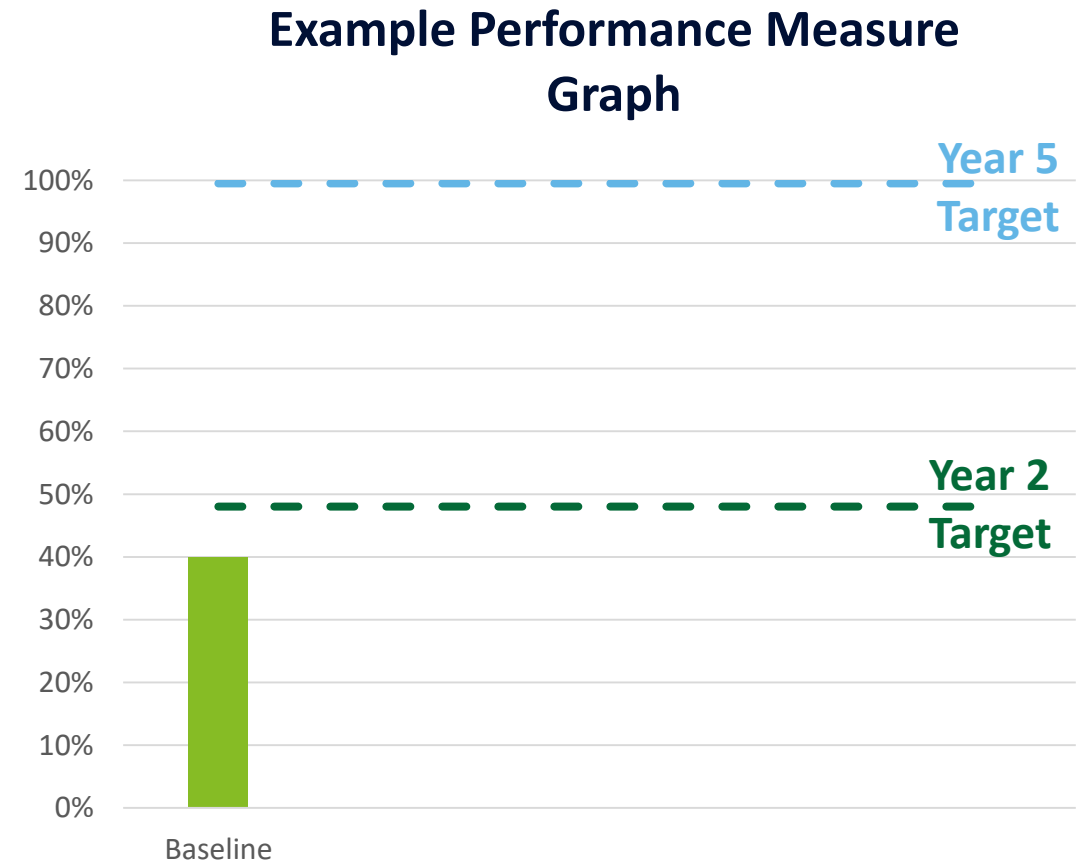
SETTING BASELINES AND TARGETS

1. Determine your baseline

- Current measure of where you are before the program started
- In Year 1, set baselines for all performance measures corresponding to strategies selected for implementation

2. Set your Year 2 and Year 5 targets

- Consider: past performance, agency goals, and benchmarks from similar programs



1815 CAT A AND CAT B CATEGORY A AND B EVALUATION REPORTING REQUIREMENTS IN 2019

Reports	Due
Revised Evaluation and Performance Measurement Plans	July 31 st in Grant Solutions
Annual Evaluation Reporting Deliverables	September 30 th
Annual Performance Measurement Reports	September 30 th
Year 2 Evaluation Plans (any updates to overarching evaluation plans)	September 30 th



THANK YOU!



NATIONAL CENTER FOR CHRONIC DISEASE PREVENTION AND HEALTH PROMOTION

The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.

