

# Critical Components of Evaluation

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**National Rural Health Resource Center  
Evaluation Workshop**

The Walsh Center   
for Rural Health Analysis

NORC AT THE UNIVERSITY OF CHICAGO



UNIVERSITY OF MINNESOTA  
**RURAL HEALTH  
RESEARCH CENTER**

# 330A Grant Evaluation Partners

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## National Rural Health Resource Center

# Overview of 330A Grant Outreach Authority Grant Programs

## ORHP 330A Outreach Authority Grant Programs

- Created as part of the Public Health Service Act of 1991
  - Under the authority of section 301
- More than \$460 million awarded since program inception
- Nearly 900 consortia projects have participated and sought to:
  - Expand rural health care access
  - Coordinate resources
  - Improve rural health care service quality
- Seven grant programs operate under the authority of section 330A
  - Rural Health Care Services Outreach (Outreach)
  - Network Development Planning (Network Planning)
  - Rural Health Network Development (Network Development)
  - Small Health Care Provider Quality Improvement (Quality)
  - Delta States Rural Development Network (Delta)
  - Rural Health Workforce Development (Pilot Program)
  - Rural HIT Development (Pilot Program)

# What does evaluation mean to you?



# A famous evaluation quote...



Welcome to Lake Wobegon, where all the women are strong, all the men are good-looking, and all the children are above average.

(Garrison Keillor)

izquotes.com

# What is Program Evaluation?

- Program evaluation is the systematic collection of information about program activities, characteristics and outcomes.
- This information is collected in order to:
  - Make judgments about the program
    - Learn what works and what does not work
  - Improve program effectiveness and/or make midcourse adjustments
  - Inform decisions about future program development
  - Guide funding decisions

# Why is Evaluation Important?

## If you don't measure...

- You won't know if your program **WORKED**
- You won't know **WHICH PART** worked
- You could make things **WORSE**
- Others may **NOT BELIEVE** the program worked

## If you don't compare your results with results of similar programs...

- You may miss easy ways you can **IMPROVE** or **SHARE** best practices and lessons learned

# Why is evaluation important for FLEX and SORH?

- Demonstrate program effectiveness
- Guide resource allocation
- Inform program improvements
- Document and share lessons learned
- Document and share program accomplishments
- Engage staff
- Improve program implementation and effectiveness
- Increase stakeholder engagement
- Create awareness about impact of programs on rural communities



# Types of Evaluation

Process  
(Formative)

• How?

Impact/  
Outcome  
(Summative)

• What?

# Process Evaluations

- Was the program implemented as planned?
- Example data collection areas:
  - Number of people served
  - Number of trainings/workshops conducted
  - Number of staff involved
  - Quality of the service provided
  - Number of partnerships established
  - Implementation challenges and solutions
  - Exemplary practices and lessons learned
  - Social and cultural context in which the project is being conducted

# Impact/Outcome Evaluation

- What is the effect or impact of the program in the short-term, intermediate, and long-term?
- Example data collection areas:
  - Knowledge and attitudes about certain health issues
  - Health behaviors (e.g., # of people who receive health care after being identified with high blood pressure during health fair)
  - Policies and regulations implemented or changed
  - Social and cultural norm shifts (e.g., smoking ordinances)
  - Resources for addressing health issues
  - Reductions in health disparities
  - Shift trends in morbidity and mortality
  - Increase in quality of life scores

# How is an evaluation designed?

- An evaluation design is the structure that provides answers to the questions about the implementation of your program. Design elements to consider:
  - Why are you conducting an evaluation?
  - Who should be included in the evaluation?
  - What data will be collected?
    - How often will the data be collected?
    - What methods will be used to collect the data?
  - Will there be a comparison group used?
- The evaluation design you choose is dependent upon the kinds of questions you want answered.

# Evaluation Steps

1. Engage Stakeholders
2. Describe the Program
3. Focus on the Evaluation Design
4. Gather Credible Evidence (qualitative and quantitative)
5. Justify Conclusions
6. Ensure Use and Share Lessons Learned



# Before Collecting Data...

1. Clarify understanding of the program's goals and strategy.
2. Develop relevant and useful evaluation questions.
3. Select an appropriate evaluation approach or design for each evaluation question.
4. Identify data sources and collection procedures to obtain relevant, credible information.
5. Develop plans to analyze the data in ways that allow valid conclusions to be drawn from the evaluation questions.
6. Establish a baseline.

# Survey Data

freshspectrum.com

We surveyed our 3  
program participants...



% who think  
we're awesome  
**100%**

What about the  
96 families that  
left after the  
first week?



# How to Use Evaluation Data

- Analyze Program Trends
  - *Measure Performance Over Time*
  - *How Are We Doing Compared with Last Year?*
  - *What Goals Do We Want to Set for Next Year?*
- Benchmark
  - *Compare Individual Program Results to Aggregate Data*
  - *Are We In Line With Our Peers?*
- Educate and Engage Staff
  - *What Can We Realistically Achieve?*
  - *What Specific Areas Can We Improve?*
- Engage Stakeholders, Policy Makers and Funders
  - *Use Data to Tell the Story of How You are Making a Difference*
  - *What is the Impact of our Program?*

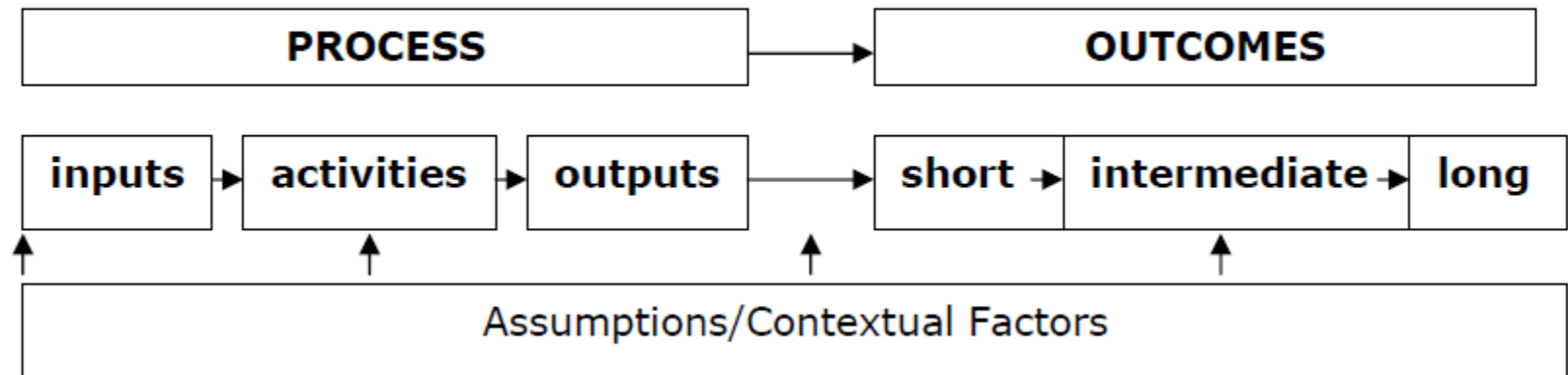


# Strategies for Improving the Quality of Your Evaluation

1. Create a Logic Model
2. Encourage Active Participation in the Evaluation
3. Identify and Engage Stakeholders Early in the Evaluation Process
4. Obtain Evaluation Expertise
5. State Project Objectives in Measurable Terms (see SMART)
6. Consider Multiple Evaluation Designs
7. Develop a Data Collection Plan
8. Request Progress Reports
9. Promote an Ethical and Culturally Competent Evaluation
10. Continually Assess the Evaluation Approach

# Generic Logic Model Components

**Figure 1.** Layout of a General Logic Model



**Source:** CDC Evaluation Guide: Developing and Using a Logic Model.

[http://www.cdc.gov/dhdsp/programs/nhdsp\\_program/evaluation\\_guides/docs/logic\\_model.pdf](http://www.cdc.gov/dhdsp/programs/nhdsp_program/evaluation_guides/docs/logic_model.pdf)

# Performance measurement

## Performance Measures

Indicators that assess the success of various aspects of the performance of a program.

## Performance Improvement Measurement System (PIMS)

- Streamlining PIMS, fewer measures to report next year
- Refining definitions
- Creating actionable reports

# Review of ORHP Performance Improvement and Measurement System (PIMS)

- ORHP began collecting grantee performance data through PIMS in 2009
- All grantees report on a comprehensive set of measures
- Data is submitted to PIMS through the HRSA Electronic Handbook (EHB)
- PIMS is used to develop baseline measurements, track progress, and develop an evidence base for effective rural health interventions

# PIMS Measures

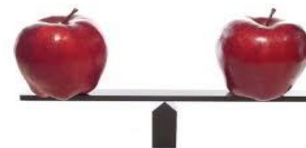
- Measures in the following domains are collected among grant programs:
  - Access to care
  - Population demographics
  - Number and types of organizations participating in the network
  - Workforce Recruitment & Retention/Staffing
  - Sustainability
  - Health information technology implemented or expanded through project
  - Integration of mental/behavioral health and oral health into primary care
  - Quality improvement
  - Pharmacy (prescription drug assistance, joint purchasing of drugs)
  - Health promotion and disease management
  - Clinical measures

# PIMS & Data Quality

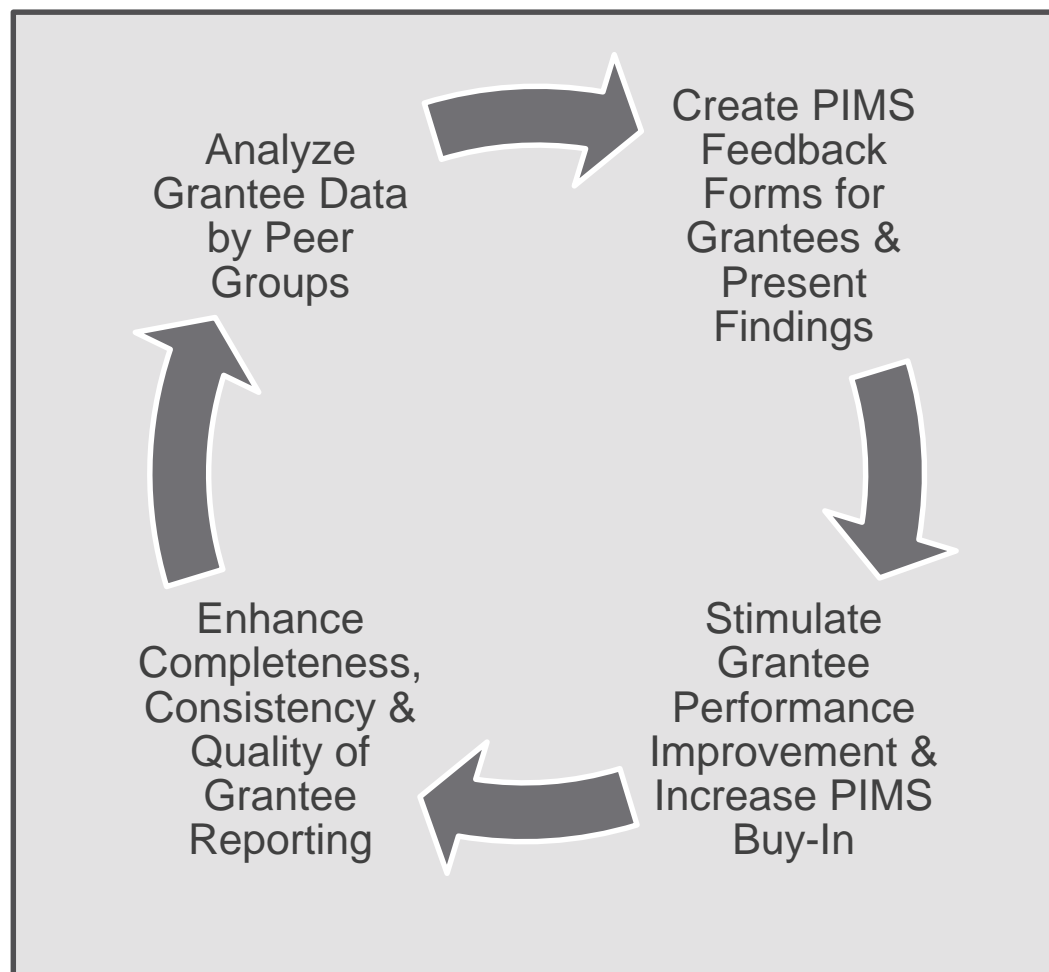
- Providing high quality data is important for both ORHP and for internal use.
- Recommendations for improving PIMS data quality:
  - Carefully review data reporting instruction and data definitions
  - Consider the denominator (e.g., Is the total number of people served always the same?)
  - Ensure common understanding of definitions
  - Report measures consistently over time
  - Seek technical assistance if you have questions

# Using PIMS Data for Performance Improvement

- Performance Improvement (PI) is a continuous, systematic process for improving program operations and outcomes.
- PIMS data is a rich source of information to allow 330A grantees to compare their performance against peers (benchmarking) and to track their progress over time.
- Analyzing grantee data becomes more meaningful when comparisons are to similar programs
- Sharing PIMS data findings enhances grantee participation and buy-in for PIMS reporting.



# Continuous Cycle of Performance Improvement





# Outreach Grantees PIMS Data Analysis

- Purpose

- To provide Outreach grantees with a tool that can be used for benchmarking and tracking performance over time.

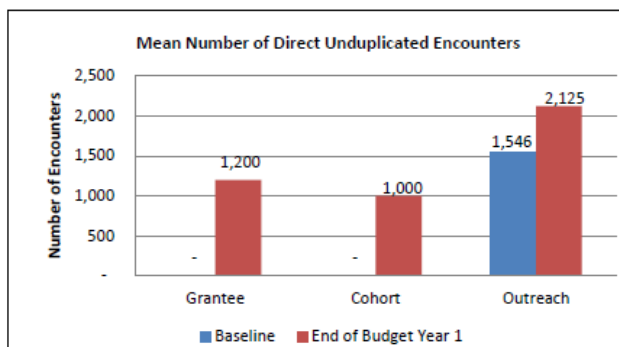
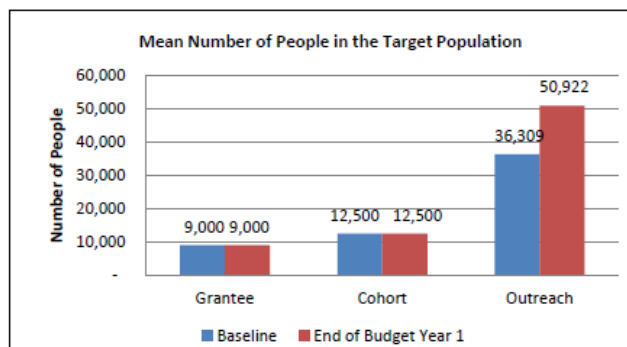
- Structure of Analysis

- Analyzed PIMS variables most relevant for peer comparisons
- Analyzed data between baseline and the first reporting period to track changes over time.
- Included comparisons to peer group aggregate and Outreach aggregate.
- Created individual program handouts to allow for data comparison.

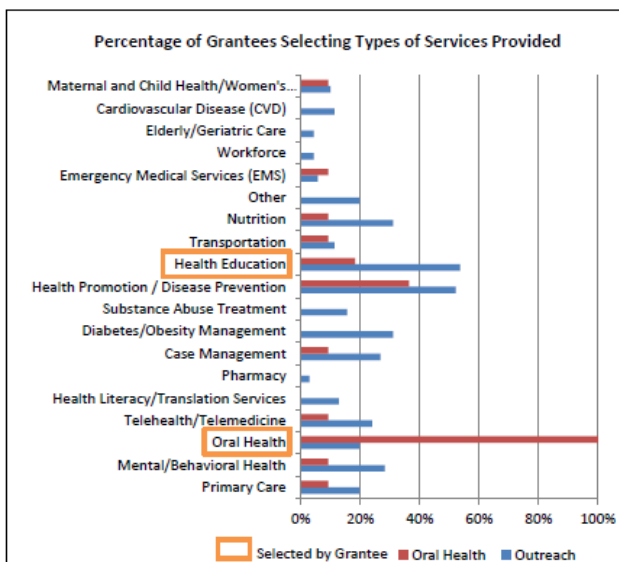
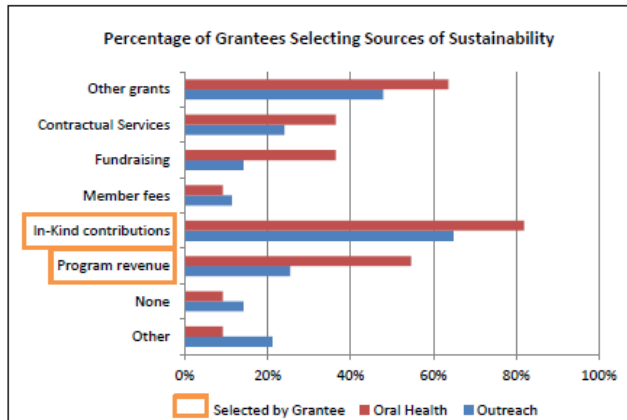
# Peer Groups

- Peer groups were based on the primary goal of the network.
- The Outreach (n=71) peer groups are:
  - Access to Care (n=20)
  - Chronic Disease/Health Promotion (23)
  - Mental Health (n=17)
  - Oral Health (n=11)
- Some grantees could fit into more than one of these categories.

# Sample Grantee Snapshot



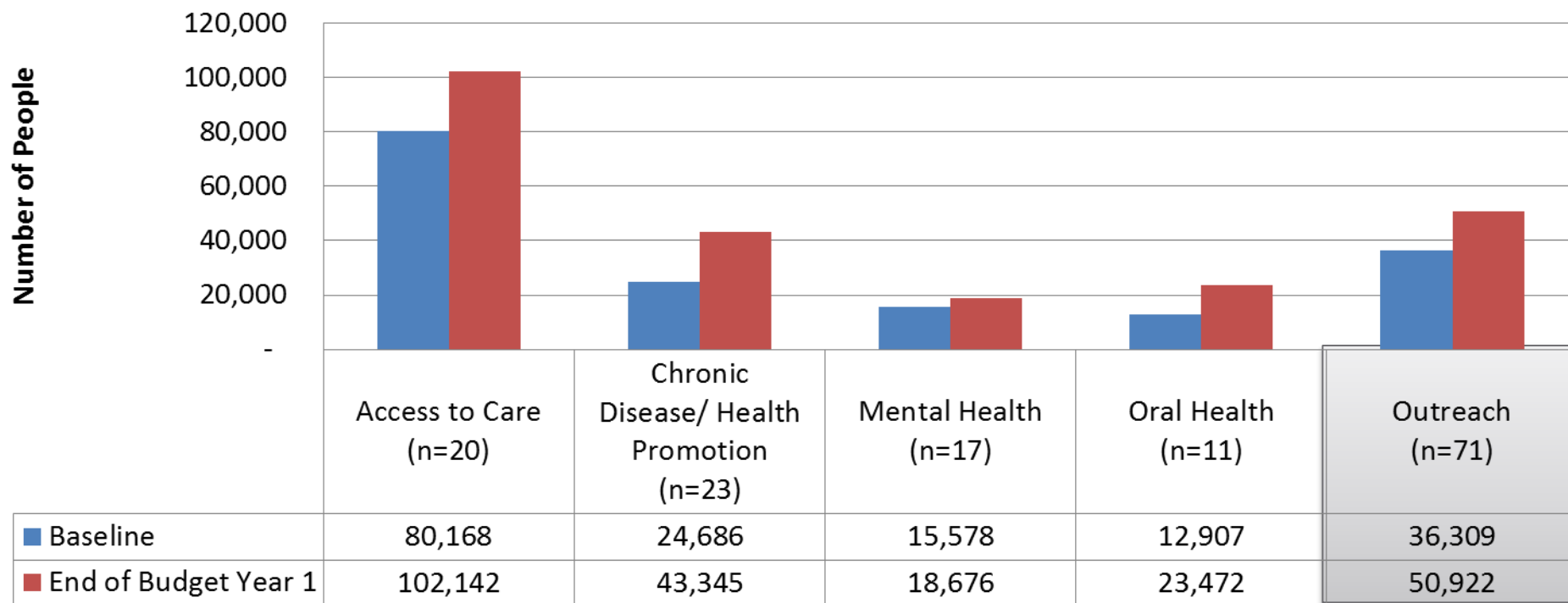
## Grantee (Cohort)



# People in the Target Population

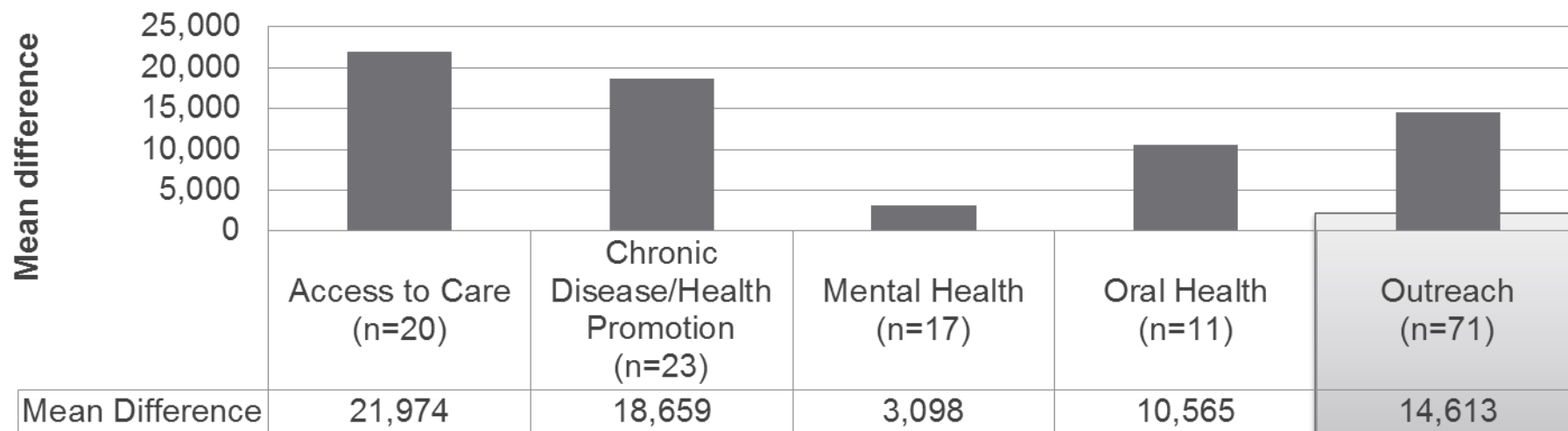
- Increases in target population for all peer groups (Baseline - Budget Year 1)
- Wide range and differentiation between peer groups (12K-102K)

**Mean Number of People in the Target Population**



# People in the Target Population

**Mean Difference in the Number of People in the Target Population from Baseline to the End of Year 1**



Group	Range of differences		Number of grantees with a decrease from Baseline to End of Year 1
	Min	Max	
Access to Care (n=20)	-181,186	522,351	4
Chronic Disease/Health Promotion (n=23)	-14,232	212,997	3
Mental Health (n=17)	-91	52,384	2
Oral Health (n=11)	-11	90,000	1
Outreach (n=71)	-181,186	522,351	10

# **ORHP Leading the Way in Establishing an Evidence Base of Effective Rural Health Programs**

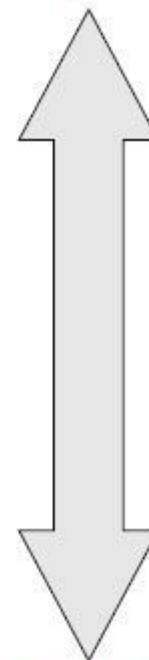
# Who is interested in Evidence- Based Practice?

- Administrators
- Program Directors
- Policy Makers
  - Local, State, Tribal, Federal and International
- Stakeholders
- Researchers
- ORHP, HRSA, and HHS

# Different Forms of Evidence

- Scientific literature in systematic reviews
- Scientific literature in one or more journal articles
- Public health surveillance data
- Program evaluations
- Qualitative data
  - Community members
  - Other stakeholders
- Media/marketing data
- Word of mouth
- Personal experience

Objective



Subjective

**Figure 2**

Different forms of evidence. Adapted from Chambers & Kerner (37).



# Classifying Interventions

Category	How Established
Evidence-based	Peer review via systematic or narrative review
Effective	Peer review
Promising	Written program evaluation without formal peer review
Emerging	Ongoing work, practice-based summaries, or evaluation in process

# RAC's Rural Community Health Gateway

## Rural Health Models and Innovations Hub

[Browse by Level of Evidence](#)

[Browse by Topic](#)

[Browse by State](#)

[Browse by Source](#)

[Share Your Stories](#)

[Criteria & Evidence-Base for Inclusion](#)

[Other Collections of Program Examples](#)

[Home](#) > [Tools for](#)

## Rural Project

### Evidence-Based

#### Fit & Strong!

Updated/reviewed

- **Need:** Osteoporosis among older adults
- **Intervention:** Program
- **Results:** Increased exercise and lower extr

### Effective Ex

#### Livingston Cou

Updated/reviewed

- **Need:** Older adults and treating health issues, as well as preventive services
- **Intervention:** The program developed curricula to train EMS how to care for older adults as well as screen older adults and provide further interventions as needed
- **Result:** The program screened 1,231 individuals and identified various risks amongst the population, in addition to developing a successful model for educating EMS personnel

## **Rural Health Models and Innovations Hub**

- Browse by Level of Evidence
- Browse by Topic
- Browse by State
- Browse by Source
- Share Your Stories

## **Demonstrating Need & Impact**

- Am I Rural?
- RAC Custom Mapping
- Economic Impact Analysis
- Planning for Sustainability

## **What Works**

- Rural Community Health Gateway
  - Community Health Workers Toolkit
  - Obesity Prevention Toolkit
  - Oral Health Toolkit
- Health Information Technology Toolkit
- Rural Training Track Technical Assistance Program

## **Testing New Approaches**

- Frontier Extended Stay Clinics
- Frontier Community Health Integration Program

## Rural Community Health Gateway



### Build What Works

The Rural Community Health Gateway can help you build effective community health programs and improve services you offer. Resources and examples in this Gateway are chosen for effectiveness and adaptability and drawn from programs with a strong history of service and community success. By starting from approaches that are known to be effective, you can make the best use of limited funding and resources.

### Evidence-Based Toolkits

- [Care Coordination Toolkit](#)  
Resources and best practices to help you identify and implement a care coordination program.
- [Community Health Workers Toolkit](#)  
Resources to help you develop a community health worker (CHW) program to reach underserved populations, using evidence-based approaches from other rural communities.
- [Mental Health and Substance Abuse Toolkit](#)  
Resources to develop and implement programs to improve community mental health using proven approaches and strategies.
- [Obesity Prevention Toolkit](#)  
Resources to help you develop an obesity prevention program, building on best practices of successful obesity prevention programs.
- [Oral Health Toolkit](#)  
Resources and best practices to help you develop and implement a program to address oral health disparities in your community.

*Future Toolkits:* Health Promotion and Education

### Evidence-Based Program Examples

The Rural Health Models and Innovations Hub provides access to program models that have been shown to be effective:

- [Browse for programs by level of evidence](#)
- Learn about the [criteria and evidence-base](#) for included programs

You may also be interested in [other collections of program examples](#) from reputable sources, each of which use their own criteria for what types of programs are included.

### About the Rural Community Health Gateway

The Rural Community Health Gateway showcases program approaches that you can adapt to fit your community and the people you serve, allowing you to:

- Research approaches to featured community health programs
- Discover what works and why
- Learn about common obstacles
- Connect with program experts
- Evaluate your program to show impact

Gateway resources are made available through the NORC Walsh Center for Rural Health Analysis and the University of Minnesota Rural Health Research Center in collaboration with the Rural Assistance Center. Funding is provided by the Office of Rural Health Policy (ORHP), Health Resources and Services Administration.

### More Useful Tools

#### [Economic Impact Analysis](#)

Show how your program's grant funding affects your community's economic well-being and share this information with sponsors, funders and your community

#### [Planning for Sustainability](#)

Tools to help you plan and position your grant-funded projects so that services can be sustained over the long term.

#### [Rural Health Models and Innovations Hub](#)

Find examples of approaches you can adapt for your program, including models shown to be effective, as well as new and emerging ideas.

# Share Your Story...

[Home](#) > [Tools for Success](#) > Models and Innovations

## Rural Health Models and Innovations Hub



### Browse Rural Project Examples

- [Browse by Level of Evidence](#)
- [Browse by Topic](#)
- [Browse by State](#)
- [Browse by Source](#)

### Recently Added

- [High Plains Community Health Center Care Teams](#)
- [Rapid HCV Testing as an HIV Testing Strategy in Rural Areas](#)
- [Chronic Disease Self-Management Program \(CDSMP\)](#)

### More Resources

Many organizations, including federal agencies and national organizations, curate lists of effective programs. Some may have sections specific to rural and many have approaches that could be adapted to rural:

- [Other Collections of Program Examples](#)



### Share Your Story

RAC is looking for project examples to share with rural service providers. Tell us about:

- Your program's successes
- Program results demonstrated in formal program evaluations or research studies
- Best practices and processes you're using
- Innovative solutions to problems
- What does and doesn't work in your program
- Things you wish you'd known before starting your program

[Share Your Story](#)

### About the *Rural Health Models and Innovations Hub*

The Rural Assistance Center collects and shares stories about rural health and human services programs and interventions. This collection includes approaches that have demonstrated success in research studies and program evaluations, as well as anecdotal accounts.

Read about the [criteria and evidence-base](#) for programs included in the *Rural Health Models and Innovations Hub*.

### Using and Adapting Program Examples

Each rural community should consider whether a particular project or approach is a good match for their community's needs and capacity. While it is sometimes possible to adapt program components to match your resources, keep in mind that changes to the program design may impact results. Programs listed in this section are not endorsed by the Rural Assistance Center or the Office of Rural Health Policy.

### More Useful Tools

[Rural Community Health Gateway](#) - Features evidence-based approaches that can be adapted to fit your community.

# Building the Evidence...

[Home](#) > [Tools for Success](#) > [Models and Innovations](#) >  
By Level of Evidence

## Rural Health Models and Innovations by Level of Evidence



- [Evidence-Based](#) (4)  
The highest level of evidence included. A review study of the approach has been published.
- [Effective](#) (4)  
The second highest level of evidence. The approach has been reported in a peer-reviewed publication.
- [Promising](#) (3)  
A program evaluation of this approach showed positive results.
- Other Project Examples (424)  
Please browse by [topic](#), [state](#), or [source](#) for these examples, which have anecdotal accounts of positive results.

### About Evidence-Level Criteria

Read about the [criteria and evidence-base](#) for programs included in the *Rural Health Models and Innovations Hub*.

# Additional Resources

- Flex Program Evaluation Toolkit
  - [http://www.ruralcenter.org/sites/default/files/Flex%20Program%20Evaluation%20Toolkit\\_0.pdf](http://www.ruralcenter.org/sites/default/files/Flex%20Program%20Evaluation%20Toolkit_0.pdf)
- The Community Toolbox (University of Kansas)
  - <http://ctb.ku.edu/en/evaluating-initiative>
- Designing Evaluations (GAO)
  - [http://www.gao.gov/special.pubs/10\\_1\\_4.pdf](http://www.gao.gov/special.pubs/10_1_4.pdf)
- The Program Manager's Guide to Evaluation (ACF)
  - [http://www.acf.hhs.gov/sites/default/files/opre/program\\_managers\\_guide\\_to\\_eval2010.pdf](http://www.acf.hhs.gov/sites/default/files/opre/program_managers_guide_to_eval2010.pdf)
- Evaluating Your Community-Based Program (American Academy of Pediatrics)
  - <https://www2.aap.org/compeds/httpcp/resources.html>

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**Thank You!**

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