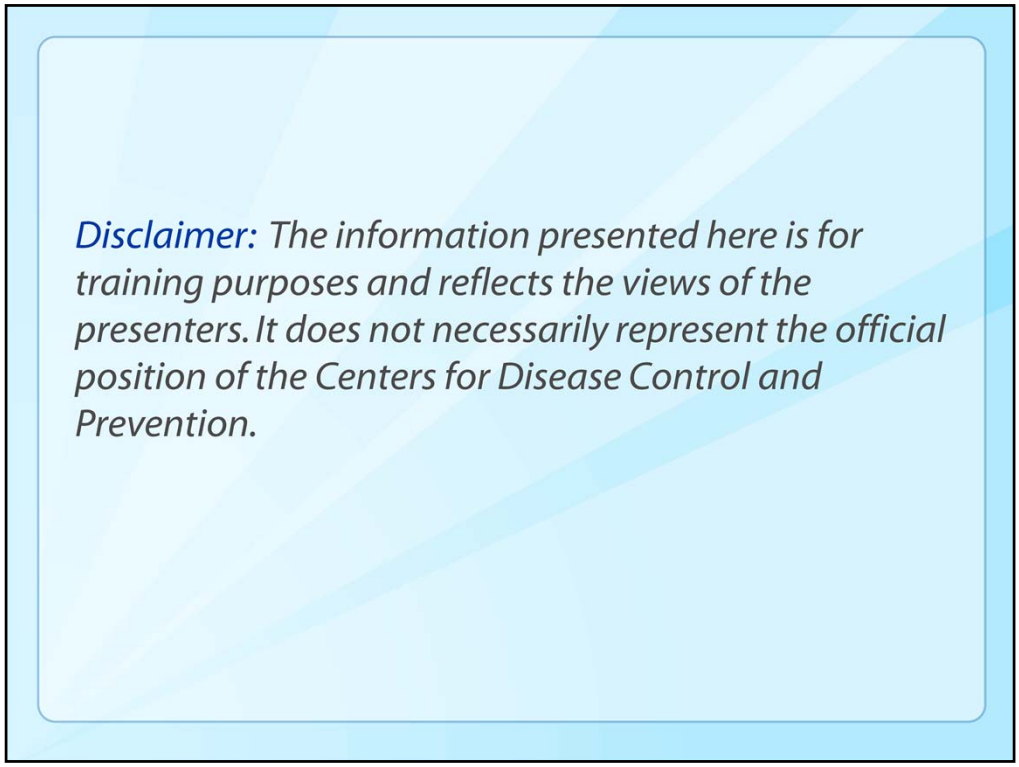
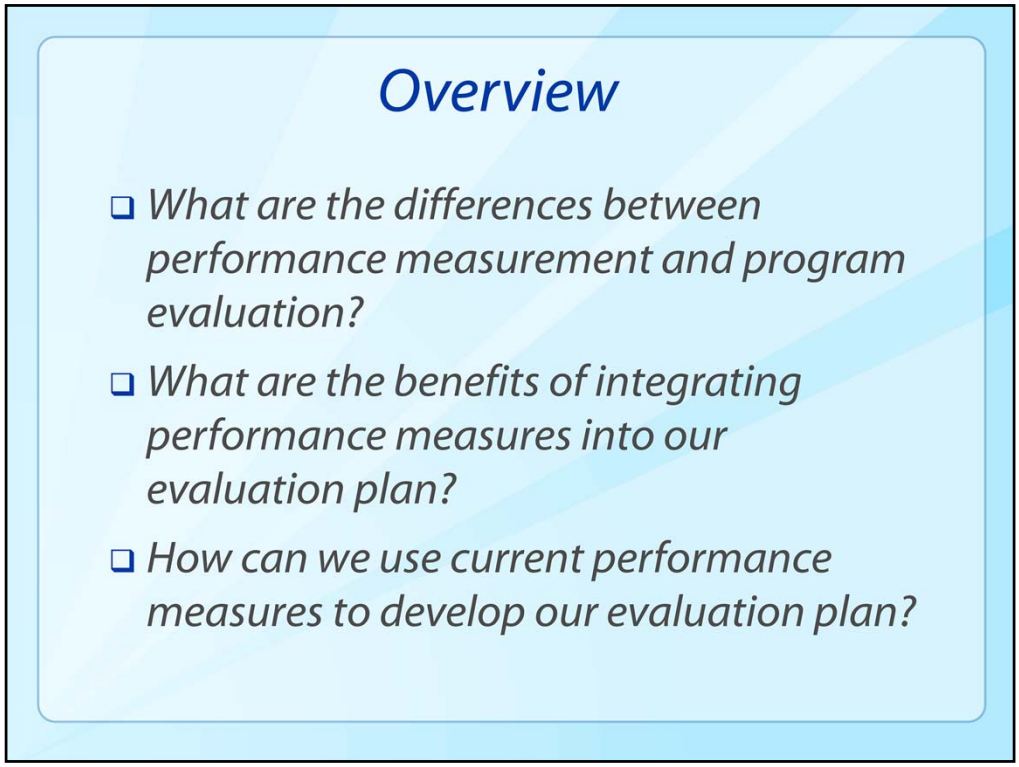
Welcome to today's Coffee Break, presented by the Evaluation and Program Effectiveness Team in the Division for Heart Disease and Stroke Prevention at the Centers for Disease Control and Prevention.

I am Derrick Gervin and I'm on the evaluation team here in the Division for Heart Disease and Stroke Prevention. I'm wearing two hats today in that I am serving as your moderator and one of your presenters. It is my pleasure to introduce my colleague and co-presenter Stephanie Rutledge. Stephanie is a health scientist on the evaluation team in the Division for Diabetes Translation. So, welcome Stephanie and welcome to all of you who have joined us today.

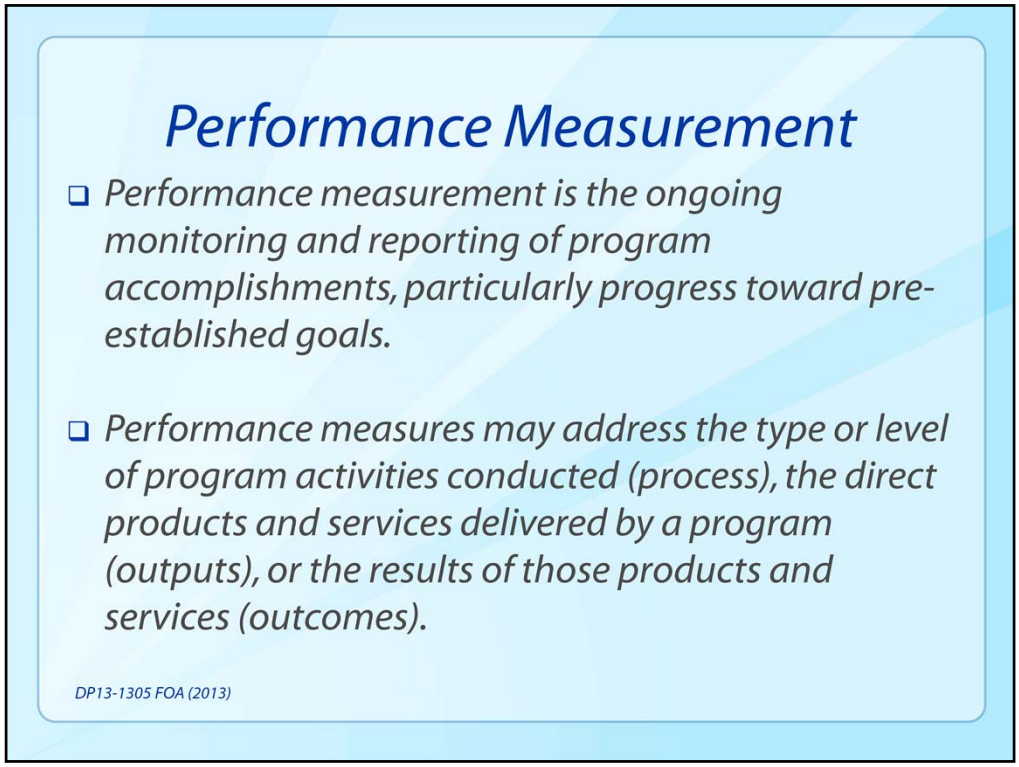


The information presented here is for training purposes and reflects the views of the presenters. It does not necessarily represent the official position of the Centers for Disease Control and Prevention.



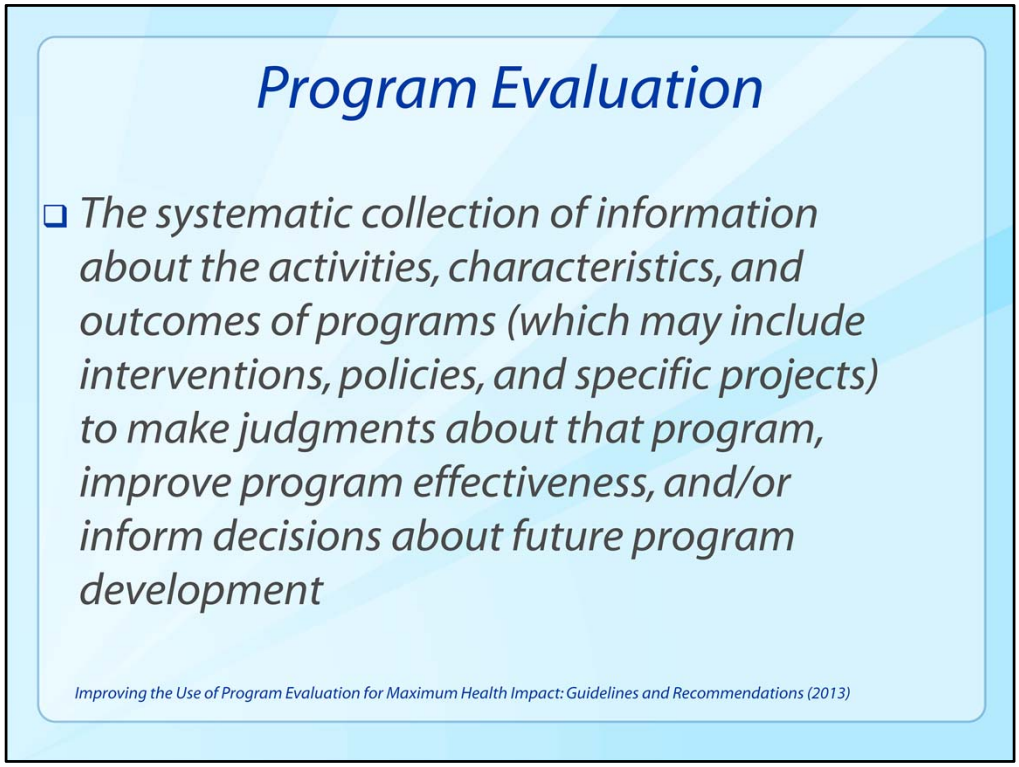
Today's Coffee Break is on "Integrating Performance Measures into Your Evaluation Plan." We will discuss the differences between performance measurement and program evaluation, the benefits of integrating performance measures into your evaluation plan, and some examples of what this integration might look like using performance measures from current CDC cooperative agreements. Then we'll wrap up with a few helpful resources and references.

We chose to focus on this particular topic as a Coffee Break because we've heard from several programs that either expressed an interest in integrating performance measures with their evaluation plan or wanted to better understand the relationship between their performance measures and evaluation activities. One word of caution, however: this Coffee Break presentation is a brief introduction to integrating performance measures into evaluation plans and not a "how-to" training.



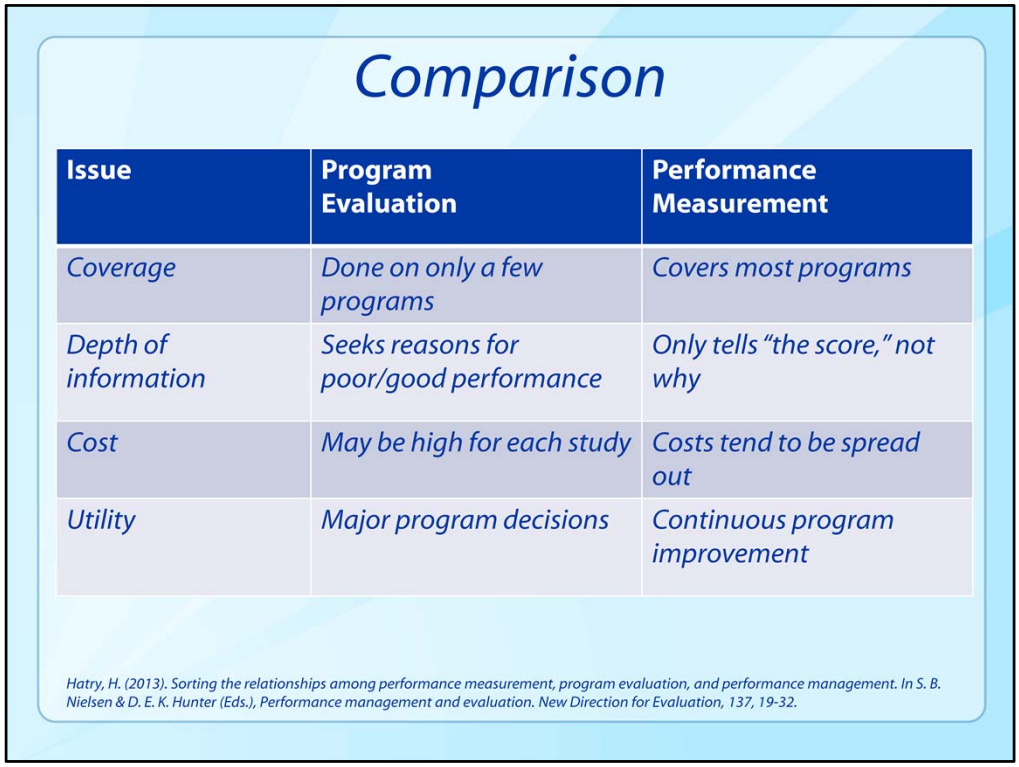
We thought it was important to start with some common definitions so that we all are on the same page.

When we talk about performance measurement, we are referring to the ongoing monitoring and reporting of program accomplishments, particularly progress towards any pre-established goals. And performance measures can help address the type or level of program activities conducted, the direct products and services delivered by a program, or the results of those products and services.



And of course program evaluation is the systematic collection of information about the activities, characeristics, and outcomes of programs to make judgments about that program, improve program effectiveness, and/or inform decisions about future program development.

Some types of program evaluations include process (or implementation) evaluation, outcome evaluation, impact evaluation, and cost-benefit/cost-effectiveness analysis.



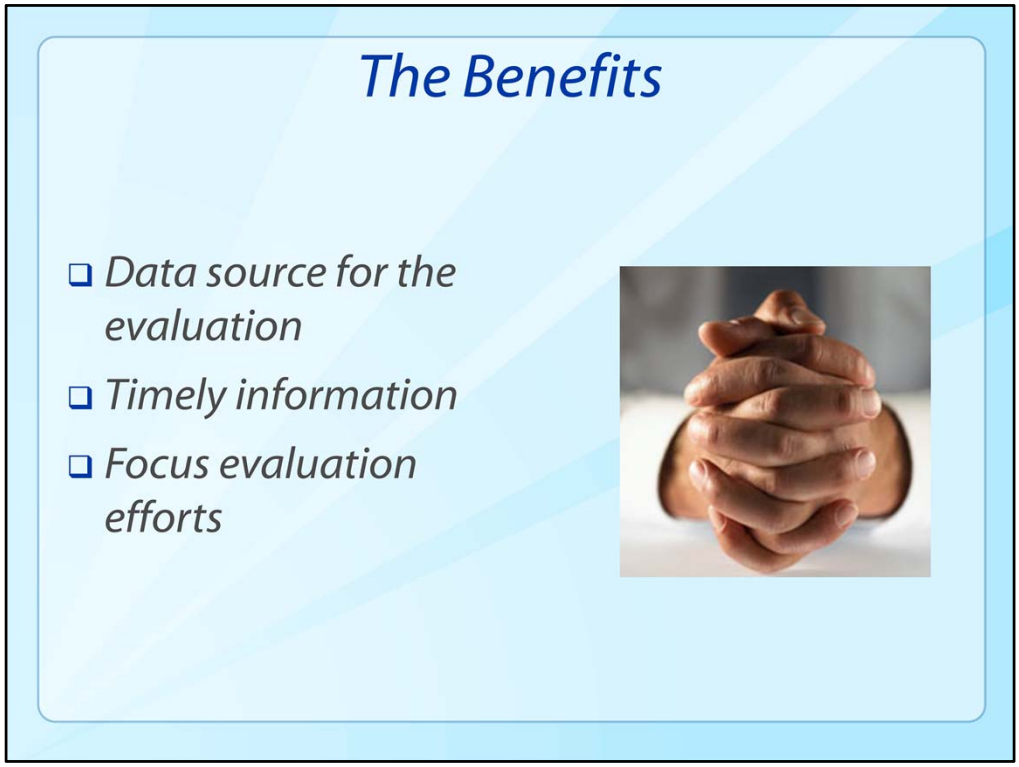
In this table we highlight some of the differences between program evaluation and performance measurement when considering issues of coverage, depth of information, cost, and utility. These are general descriptions of differences and are not meant to indicate that this is always the case.

- In terms of coverage, evaluations are often done on only a few programs or certain program components, while performance measurement can cover more aspects of a program.

- The depth of information for evaluations is greater since the focus is often on gaining a better understanding of a process or determining the reasons for poor/good performance. Performance measures only help to tell "the score" and not why you're seeing the results that you're seeing.

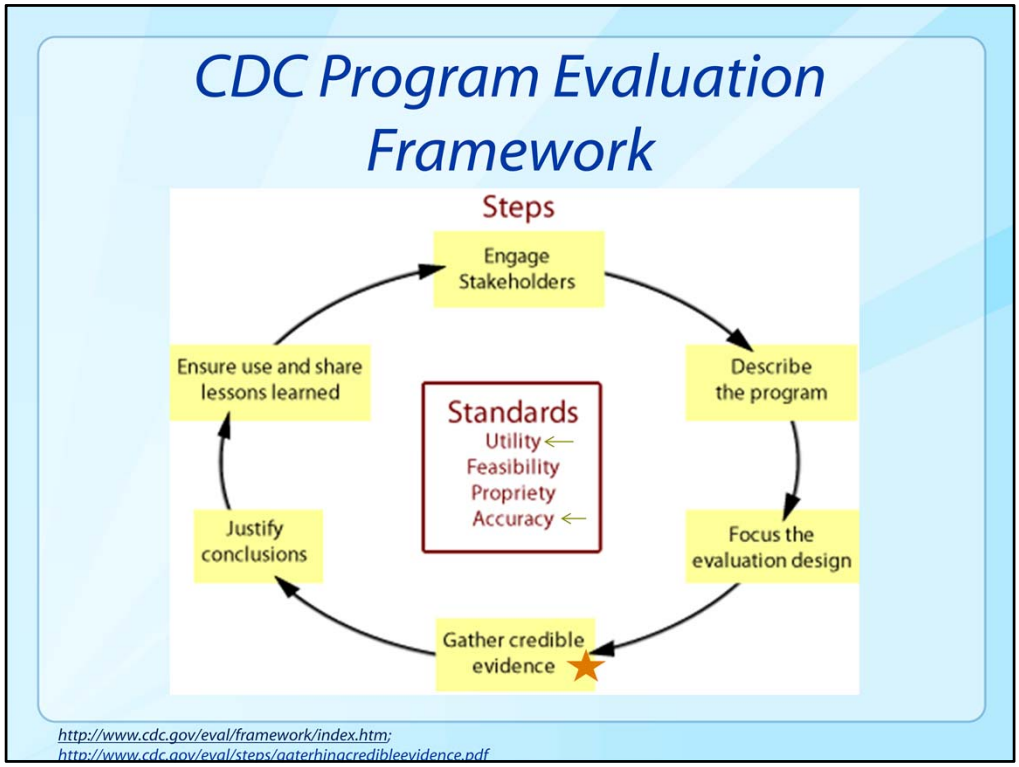
- Costs for evaluations may be high for each study while performance measurement costs tend to be spread out over time.

- And finally, when looking at the issue of utility – program evaluations contribute to major program decisions while performance measurement is used for continuous program improvement.



The benefits of integrating performance measures into your evaluation plan include:

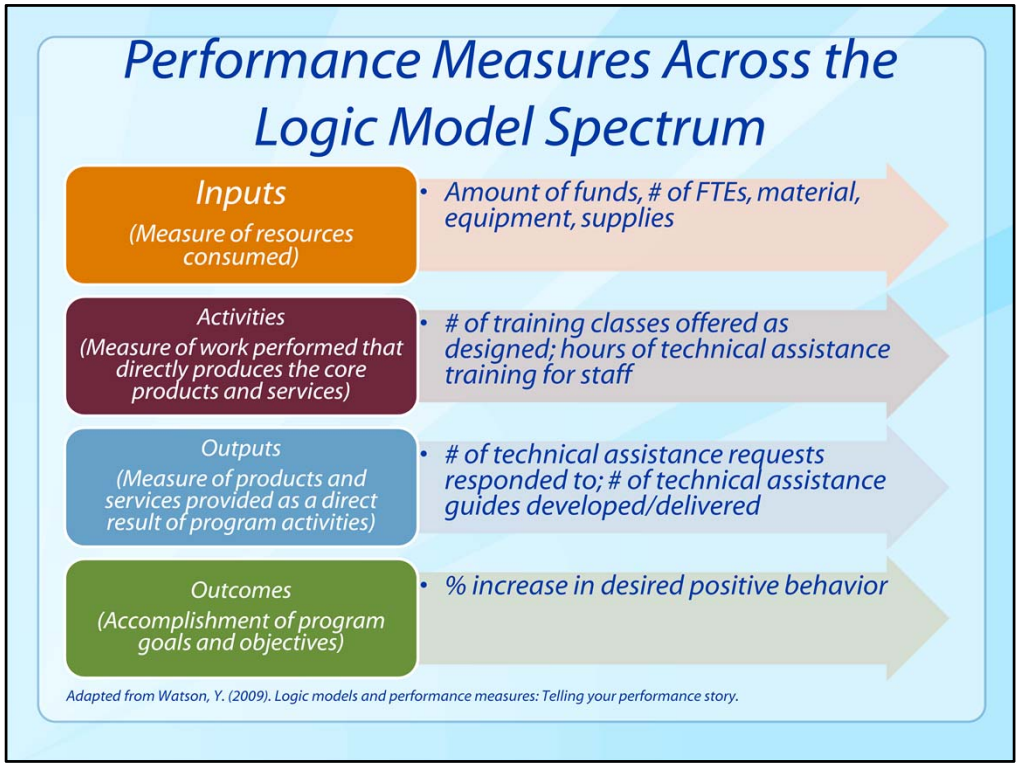
- The ability to use information from the performance measurement process to serve as an important data source for the evaluation.
- Performance measures can provide timely information on program outcomes that can keep program managers better informed.
- Performance measures can help program evaluation efforts through the identification of performance problems that may be identified prior to an evaluation.



The CDC framework for program evaluation in public health reminds us of the importance of compiling information that stakeholders perceive as trustworthy and relevant to answering their questions. Integrating performance measures and evaluation fits into Step 4 of the framework and emphasizes the standards of utility and accuracy.

Gathering credible evidence enhances the evaluation's utility and accuracy; guides the scope and selection of information and gives priority to the most defensible information sources; and promotes the collection of valid, reliable, and systematic information that is the foundation of any effective evaluation.

As a final reminder: Utility standards ensure that an evaluation will serve the information needs of intended users. Accuracy standards ensure that an evaluation will reveal and convey technically adequate information about the features that determine worth or merit of the program being evaluated.



Another way to conceptualize how performance measures can support our evaluation work is to consider where performance measures might be embedded across a logic model spectrum.

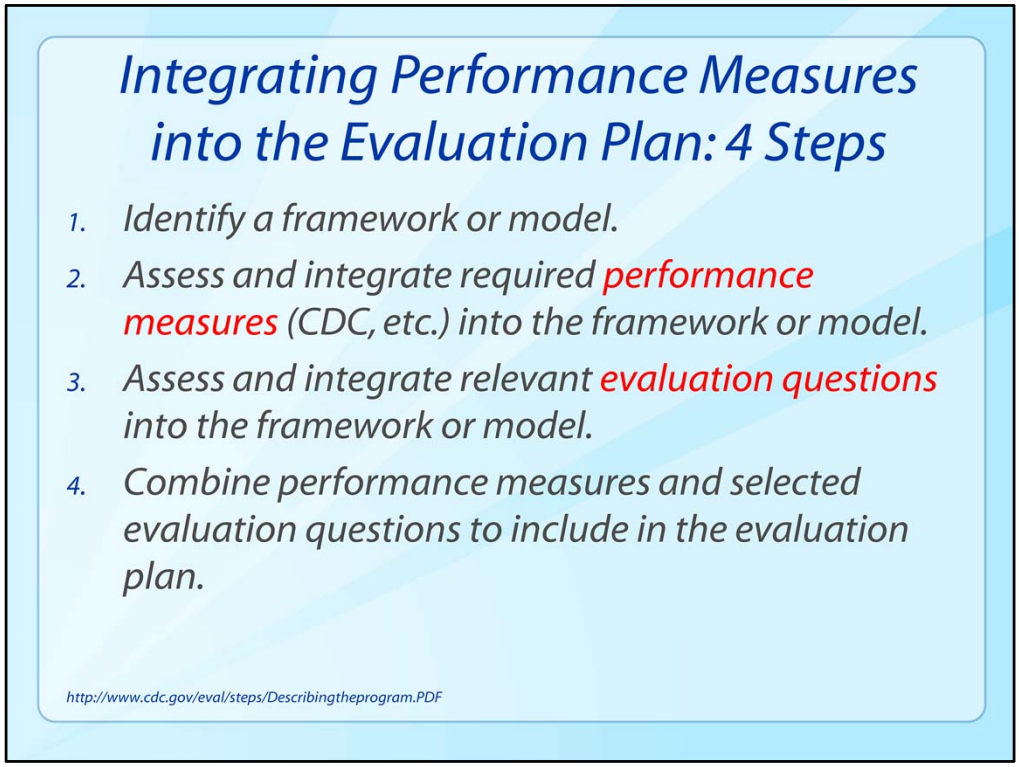
For example, performance measures that focus on program inputs may measure resources consumed – like the amount of funds used; the number of full-time employees required; or the material, equipment, and supplies needed.

Performance measures that focus on program activities measure work performed that directly produces the core products and services such as the number of training classes offered or hours of technical assistance training provided to staff.

Performance measures that focus on outputs measure the products and services provided as a direct result of program activities – like the number of technical assistance requests responded to or the number of technical assistance guides developed.

Outcome-oriented performance measures focus on the accomplishment of program goals and objectives, such as the percent increase in a desired positive behavior like physical activity or nutrition.

Stephanie will now share with you an approach that can be used to integrate performance measures into your evaluation plan.



To illustrate integrating performance measurement and evaluation, we identify four basic steps:

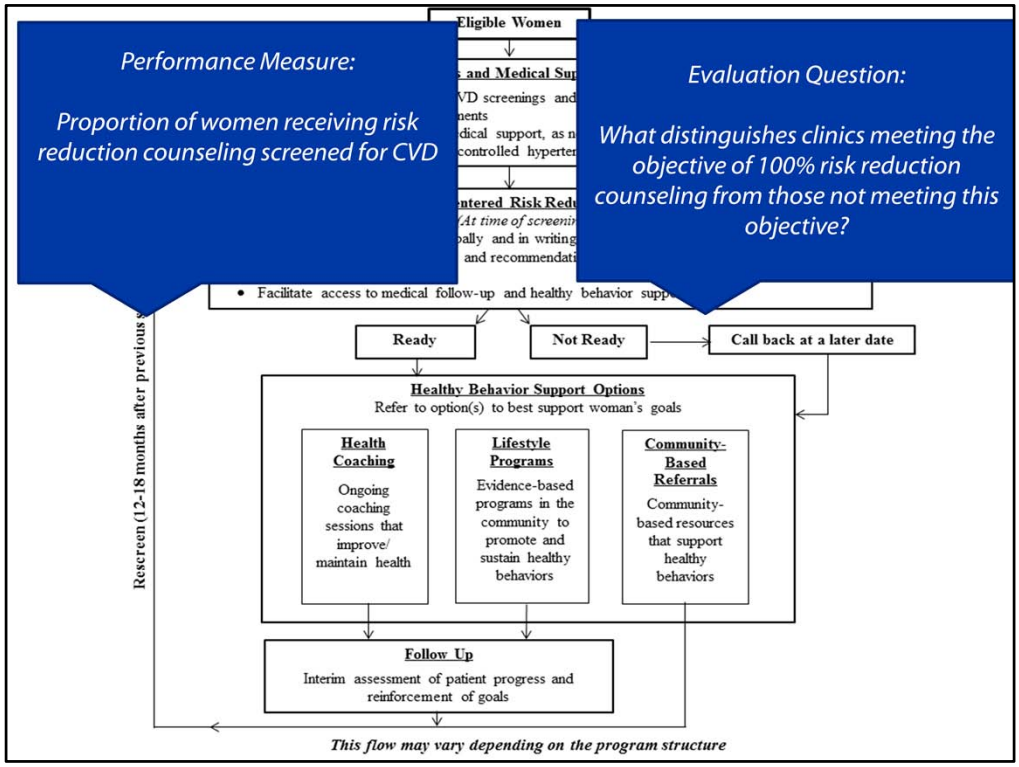
Firstly, identify a framework or model from the FOA or other relevant sources. The framework describes the logic or evidence of a program and the goals and objectives; and it helps with scrutinizing the features of the program being evaluated, including its purpose and place in a larger public health context. The description may include detailed information regarding the way the program was intended to function.

Secondly, after identifying a framework, integrate the required performance measures from CDC and other stakeholders into the framework. For instance, the FOA "State Public Actions Program," hereafter referred to as "1305," includes required performance measures by domain strategies.

Thirdly, assess and integrate other relevant evaluation questions into the framework not addressed by the required performance measures. This step returns us to Step 1 of the CDC Program Evaluation Framework, "Engaging Stakeholders," to determine relevant questions from the stakeholder perspective and to Step 2, "Describe the Program," where we examine purpose, goals, and objectives. We include a performance and evaluation checklist at the end of the presentation that you might find useful for this step in addition to the CDC Program Evaluation Framework.

For the final step, combine your performance measures with selected evaluation questions into your framework for a summary overview of what to evaluate; use this overview to prioritize evaluation questions for the evaluation plan. You might find Step 3 of the CDC Program Evaluation Framework – "Focus the Evaluation Design"– useful here.

Source link: http://www.cdc.gov/eval/steps/Describingtheprogram.PDF



Now, we will illustrate with a couple of examples.

This framework is a flow diagram describing WISEWOMAN cardiovascular screening and referral to various services by health care providers based on risk factors and motivation to change.

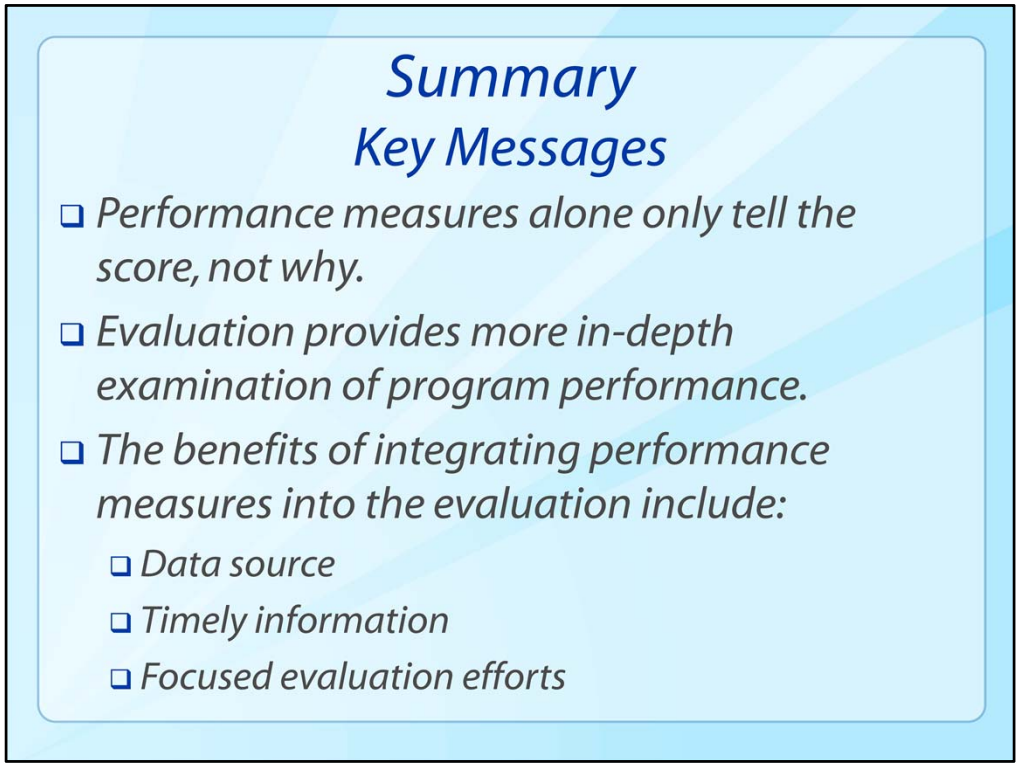
One of the performance measures associated with this framework – and specifically the output component "Patient-centered Risk Reduction Counseling" – is the performance measure "Proportion of women receiving risk reduction counseling screened for CVD." The objective of this component of the framework is to provide risk reduction counseling to 100% of women screened for CVD. Thus this measure can serve as an ongoing measure to monitor the rate of counseling and the progress towards the objective of counseling all women screened.

Not answered by this performance measure, for instance, is what distinguishes clinics meeting the objective of 100% risk reduction counseling from those not meeting this objective. As mentioned, evaluation in contrast to performance measurement occurs with less regularity, covers fewer programs, and seeks explanations for high or poor performance. For this evaluation question then, a grantee might conduct periodic surveys, interviews, or focus groups with a small number of clinics participating in screening for WISEWOMAN to improve service delivery for this screening and counseling program.

Domain 4: Community-Clinical Linkages			
Strategy 1: Increase use of diabetes self-management programs in community settings			
Key drivers (without these, there is no intervention)	*Startup Phase* *To what extent do these drivers exist?*	*Implementation Phase* *To what extent do these drivers need improvement?*	*Sustainability Phase* *To what extent would these drivers be sustained without 1305 funds?*
DSME Programs	*How were programs increased?* **What were the barriers to establishing new programs?**		
	# of DSME programs (PM) *Proportion of counties with DSME programs (PM)*	*# programs under-utilized* *Proportion of counties with under-utilized programs*	*Closure rates for programs* *Tenure of programs* *Trends in utilization of programs* *Types of programs (full-service, etc.)*
Payers and payment mechanisms	*How was Medicaid coverage obtained for DSME?* *What were the barriers to obtaining Medicaid coverage for DSME?*		
	# of Medicaid recipients with DSME coverage (PM)	*# of DSME encounters reimbursed by Medicaid*	*# of DSME encounters reimbursed by Medicaid by county*

The second example uses a 1305 domain 4 strategy designed to increase the use of diabetes self-management programs. In this example we used drivers and phases as a framework to determine key evaluation questions at different phases for different drivers of this strategy. For the two drivers that appear here, we identified three CDC 1305 performance measures for this strategy at the "Startup Phase" that we highlight. Two of the performance measures highlighted – number of DSME programs and proportion of counties with a DSME program – grantees can use to monitor progress towards the objectives of increasing the number and distribution of DSME programs across a state.

Not answered by this performance measure are the specific barriers or facilitators to establishing new DSME programs, thus the evaluation question in blue under "Startup Phase": "What were the barriers to establishing new programs?" As with the previous WISEWOMAN example, a grantee might periodically assess this question using a survey or other data collection methods, selecting a smaller sample of FQHCs and rural clinics demonstrating limited success in establishing new DSME programs, for instance.

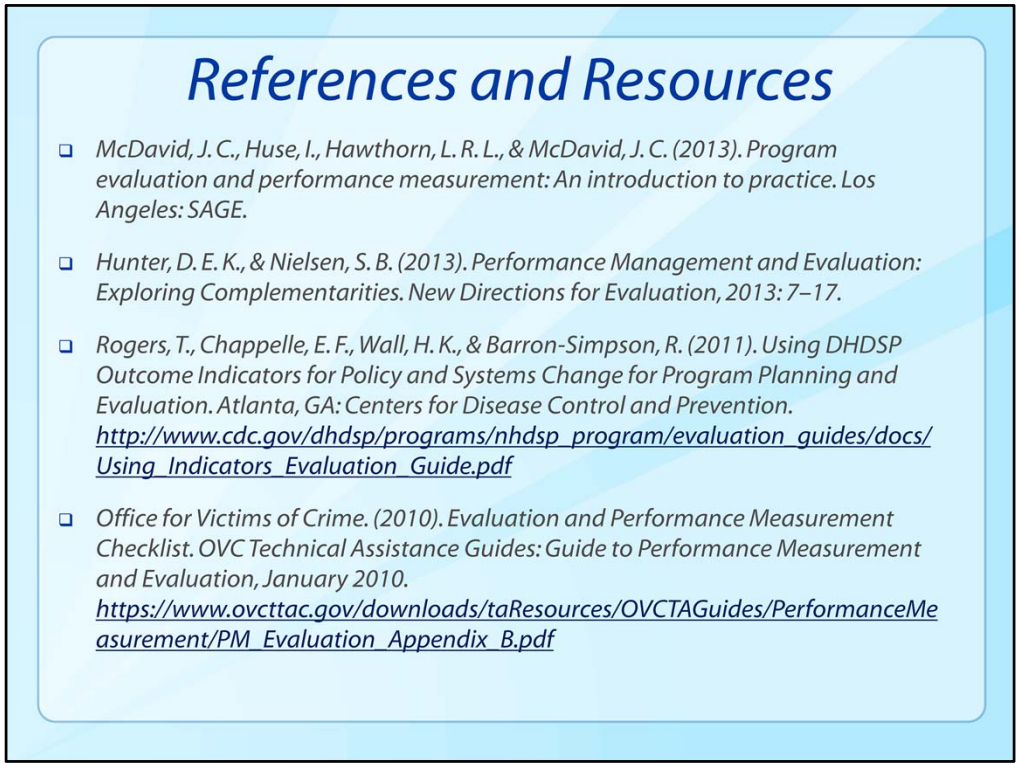


In summary:

Performance measures tell us "the score," that is, whether the program is achieving defined objectives, using ongoing regular monitoring for continuous program improvement.

Evaluations, on the other hand, provide periodic, in-depth examinations of the program to assess overall performance and opportunities for improvement not captured by the performance measures.

And integrating performance measures into program evaluation provides the benefits of both: a data source for ongoing monitoring, timely information on program outcomes that can keep program managers better informed, and focused and systematic evaluations to assess overall program performance and benefits of the program to stakeholders.



The references and resources on this slide provide additional information for further review, with a couple of tools mentioned earlier that you might find useful.

- McDavid, J. C., Huse, I., Hawthorn, L. R. L., & McDavid, J. C. (2013). *Program evaluation and performance measurement: An introduction to practice*. Los Angeles: SAGE.

- Hunter, D. E. K., & Nielsen, S. B. (2013). Performance Management and Evaluation: Exploring Complementarities. *New Directions for Evaluation, 2013*: 7–17.

- Rogers, T., Chappelle, E. F., Wall, H. K., & Barron-Simpson, R. (2011). *Using DHDSP Outcome Indicators for Policy and Systems Change for Program Planning and Evaluation.* Atlanta, GA: Centers for Disease Control and Prevention. http://www.cdc.gov/dhdsp/programs/nhdsp_program/evaluation_guides/docs/Using_Indicators_Evaluation_Guide.pdf

- Office for Victims of Crime. (2010). Evaluation and Performance Measurement Checklist. *OVC Technical Assistance Guides: Guide to Performance Measurement and Evaluation, January 2010*. https://www.ovcttac.gov/downloads/taResources/OVCTAGuides/PerformanceMeasurement/PM_Evaluation_Appendix_B.pdf

If you have any ideas for future topics or questions, please contact us at **AREBheartinfo@cdc.gov**.