

Planning for CHIP Monitoring and Evaluation

September 12, 2012

Dr. Byron Kennedy, Deputy Director

Anne Kern, Public Health Program Coordinator

Monroe County Health Dept., NY

Julia Joh Elligers, Director of Assessment, Planning, and Workforce

Development

NACCHO, Washington, D.C.

Webinar Logistics

- The lines are muted. If you wish to mute/unmute your line to ask/answer a question, please do the following:
 - To **unmute** your own line, **press *7**
 - To **mute** your own line, **press *6.**
- Throughout the presentation and during the Q&A session, if you have a question, please use ReadyTalk's 'raise your hand' feature or use the chat box to indicate you have a question. The facilitator will call your name and ask for your question.



PROJECT REQUIREMENTS & PHAB STANDARDS AND MEASURES: CHIP MONITORING AND EVALUATION



Project Requirements: CHIP Monitoring and Evaluation

Engage Community Members and LPHS Partners

“Community members must be engaged in a meaningful and substantive way throughout the CHA and CHIP processes, including indicator selection, data collection, data analysis, data presentation and distribution, issue prioritization, CHIP creation, implementation of CHIP, and **monitoring of results.**”

“Partners should be engaged in a strategic way **throughout the CHA and CHIP processes**, including gaining access to data, mobilizing community members, data collection, data review, issue prioritization, and CHIP implementation.”



Project Requirements: CHIP Monitoring and Evaluation

A CHIP implementation plan that does the following:

- Provides clear, specific, realistic, and action-oriented goals.
- Contains the following:
 - Goals, objectives, strategies, and **related performance measures** for determined priorities in the short-term (one to two years) and intermediate term (two to four years),
 - Realistic timelines for achieving goals and objectives.
 - Designation of lead roles in CHIP implementation for LPHS partners, including LHD role.
 - Formal presentation of the role of relevant LPHS partners in implementing the plan and a demonstration of the organization's commitment to these roles via letters of support or accountability.
 - Emphasis on evidence-based strategies.
 - **A general plan for sustaining action.**



Project Requirements: CHIP Monitoring and Evaluation

Community Health Improvement Process Report:

CHIP Overview:

- Describes how community members and LPHS partners were engaged in development of the CHIP, especially for issue prioritization and strategy development.
- Summarizes the top priorities for action and the process by which these were identified.
- Specifies how your strategy aimed at addressing a social or economic determinant of health/heath inequity was identified.
- Describes how the CHIP implementation plan was developed.
- Includes who was involved in the process.
- Describes the respective roles of all involved in the development process.
- Specifies which strategies are evidence-based, source of the evidence, and how these strategies were identified and selected. (Note: PHAB uses the terms “evidence-based or promising strategies” in the Standards and Measures Version 1.0)
- Describes how the CHIP and CHIP implementation plan was/will be distributed to the public.
- **Describes the plan for monitoring CHIP implementation progress and sustaining action beyond initial CHIP rollout, including reporting on progress to the public.**
- Describes how the QI or Quality Planning technique used in the community health improvement process was chosen and who was involved in applying the technique.
- Includes final CHA/CHIP Cost Report.



PHAB Requirements: CHIP Monitoring and Evaluation

**Be sure to review the standards listed below to identify the measures and required documentation that PHAB seeks related to developing a CHIP.*

Standard 5.2: Conduct a comprehensive planning process resulting in a tribal/state/community health improvement plan



PHAB Requirements: CHIP Monitoring and Evaluation

For example...

Measure 5.2.2L: Produce a community health improvement plan as a result of the community health improvement process. *Required documentation:* CHIP dated within the last five years that includes 1a: Community health priorities, measurable objectives, improvement strategies and performance measures with measurable and time-framed targets; 1b. Policy changes needed to accomplish health objectives; c. Individuals and organizations that have accepted responsibility for implementing strategies; 1d. Measurable health outcomes or indicators to monitor progress; and 1e. Alignment between the CHIP and the state and national priorities.



PHAB Requirements: CHIP Implementation

Measure 5.2.4A: Monitor progress on implementation of strategies in the CHIP in collaboration with broad participation from stakeholders and partners* *Required documentation:* 1. Evaluation reports on progress made in implementing strategies in the CHIP including: 1a. Monitoring of performance measures and 1b. Progress related to health improvement indicators [Guidance: Description of progress made on health indicators as defined in the plan...]; and 2. Revised health improvement plan based on evaluation results [Guidance: ...must show that the health improvement plan has been revised based on the evaluation listed in 1 above...]

* Not required as part of the CHA/CHIP Project



Learning Objectives

At the completion of the session participants will be able to:

1. Explain the relationship between key elements of the CHIP, quality improvement work, and evaluation.
2. Develop an evaluation plan based on CHIP goals, objectives, outcome, and performance indicators.
3. Understand methods for meaningfully monitoring and reporting progress of CHIP implementation.
4. Describe how monitoring and evaluation can support community and partner engagement in ongoing CHIP implementation.
5. Understand how to update the CHIP or work plans based on the results of monitoring and evaluation activities
6. Name the types of community and non-traditional resources that can support monitoring and evaluation activities.
7. Understand the importance of developing evaluation measures during the implementation planning activities.
8. Describe the project and PHAB documentation requirements for CHIP monitoring and evaluation.



Health Action: Priorities for Monroe County



Anne Kern
Public Health Program Coordinator
Office of Community Health Improvement

Byron Kennedy, MD, PhD, MPH
Deputy Director of Health
Monroe County, NY

NACCHO
National Association of County & City Health Officials



Priorities for Monroe County

MISSION

To improve the health of Monroe
County residents

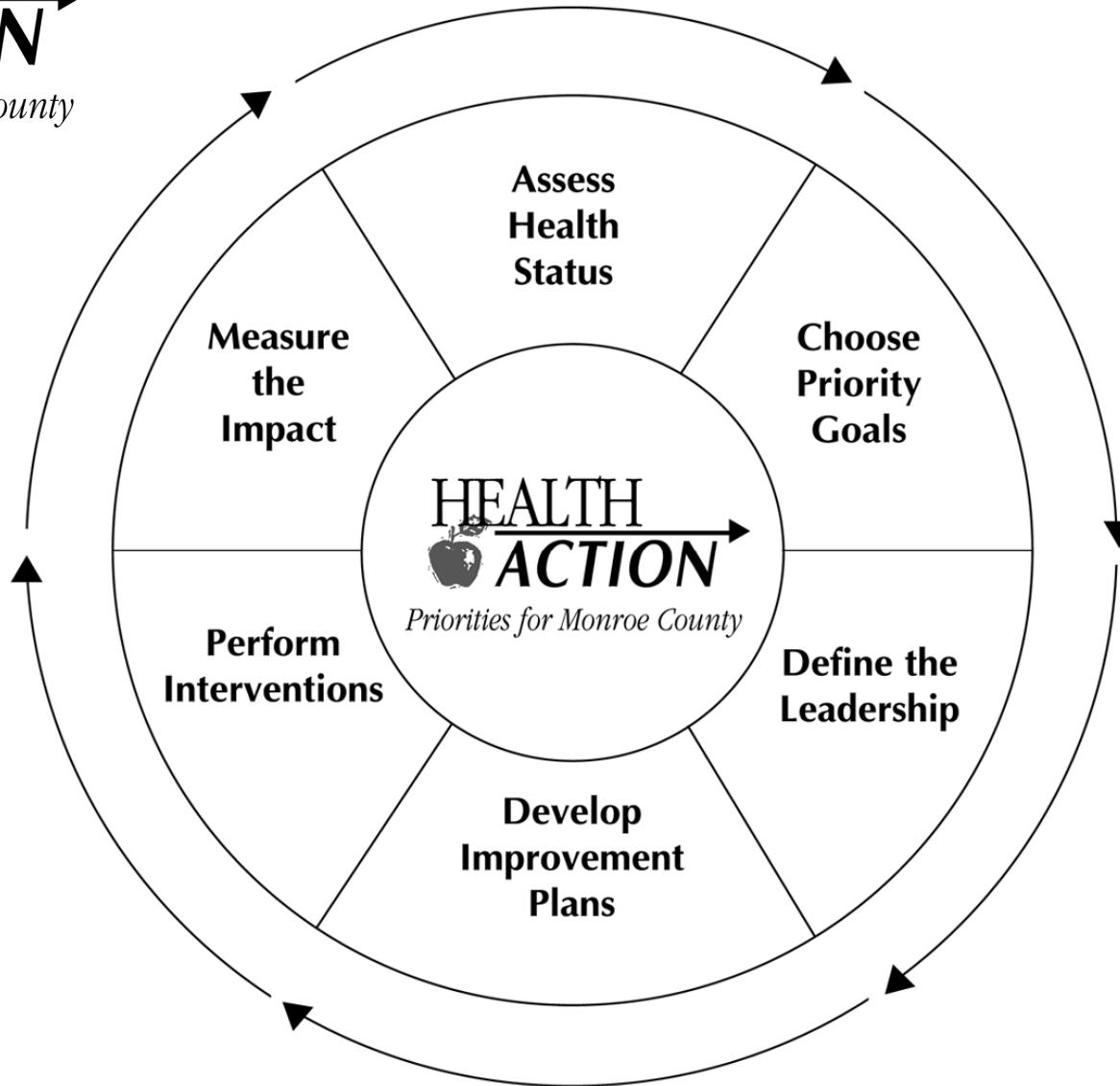
VISION

Continuous, measurable improvement
in health status in Monroe County





Priorities for Monroe County



HEALTH ACTION Process

Assess health status

Process guided by committee-community health experts

Collect and compile data

Identify health goals based on data

Findings published in report cards (healthaction.org)

Data used in report cards

- Birth and Death Certificates

- Registries (diseases, lead poisoning)

- Surveys/Monitoring systems

- YRBS

- Adult Health Survey

Choose priority goals

Report card presented to community to get feed back on priorities.

12 priorities selected for each lifecycle group



HEALTH ACTION Process

Define the Leadership

Identify an organization that will lead the community in addressing the priority area

Develop improvement plan

Based on local data

Evaluation

Perform the intervention

Often utilizing grant funding

Evaluate

Use data routinely collected for the report cards, but additional evaluation is often done





Priorities for Monroe County

Examples of Community Health Improvement:

Teen Smoking Reduction

Immunization Initiatives

Lead Poisoning Reduction



... Lead Poisoning is Health Problem with a Housing Solution



Problem Definition

In early 1990s, more than 3,000 childhood lead poisoning cases identified annually.

Prevalence more than 35% in several inner-city census tracts.

In the City of Rochester, 87% of housing stock built before 1950.

Most housing units in the City are rentals.

Lead abatement viewed as too expensive.



Next Steps

Vision

A community with healthy children free from lead poisoning.

Goal

Eliminate childhood lead poisoning

Objective

Reduce the number of children who are lead poisoned from 3,000 to **zero** by 2010.



Logic Model

Resources	Activities	Output	Outcomes	Goal
MCDPH UR CGR United Way Passionate Community Partners HUD Funding Funding from other sources	Awareness/ Media Engage new partners Research effective housing policies Advocate- policy changes Develop Lead Abatement Training/ Certification Apply for HUD funding Screening Events	Media contacts Media/ Educational materials Lead summit # Attended and who Housing policy passed and implemented # of houses inspected # Trained in lead abatement HUD funding received #Children screened	Decreased numbers of houses not passing inspection Increase screening among children Decreased number of children with EBLI	Eliminate lead poisoning



Coalition to Prevent Lead Poisoning

Science - Monitor data/latest research to ensure scientific basis for action – **Included experts in environmental health**

Housing - lead safe practices – homeowners, contractors, childcare providers

Education and Outreach – community educational activities, media

Screening/Professional Education – educate providers, work to increase screening

Government relations –translate work of committees into actionable legislative and regulatory initiatives



Boundary Networks

Boundary-Spanning Individuals

Negotiate the relationship between science and politics.

Negotiate the relationship between producers and consumers of information.

Provide technical expertise to local communities, particularly when resources are limited.

Represent diverse technical areas: health, housing, legal, academic, education, local government, national NGO's.



Sustaining Boundary Networks

Develop and nurture relationships.

Commitment to basing decisions on best available evidence/science.

Carefully tailored technical assistance requests given interests, expertise, and capacity.

Regularly give credit back to experts for their work/efforts.

Regularly give feedback to experts about their impact and making a difference.



Optimizing Boundary Networks

Gather relevant data (e.g., unpublished data from colleagues/contacts).

Perform new analyses with existing data.

Interpret and apply data to local conditions (e.g., current policy issue).

Communicate findings effectively to target audience (e.g., summary sheet, case study).

Avoid unnecessary costs (e.g., new data collection, extensive analyses, consultants).



Evaluation

MCDPH monitored main outcomes on an ongoing basis using existing data collection efforts (i.e., lead screening, EBLL and inspections)

Other partners completed additional evaluation

Evaluation of Lead Ordinance

Funded by Greater Rochester Health Foundation

Completed by CGR, University of Rochester

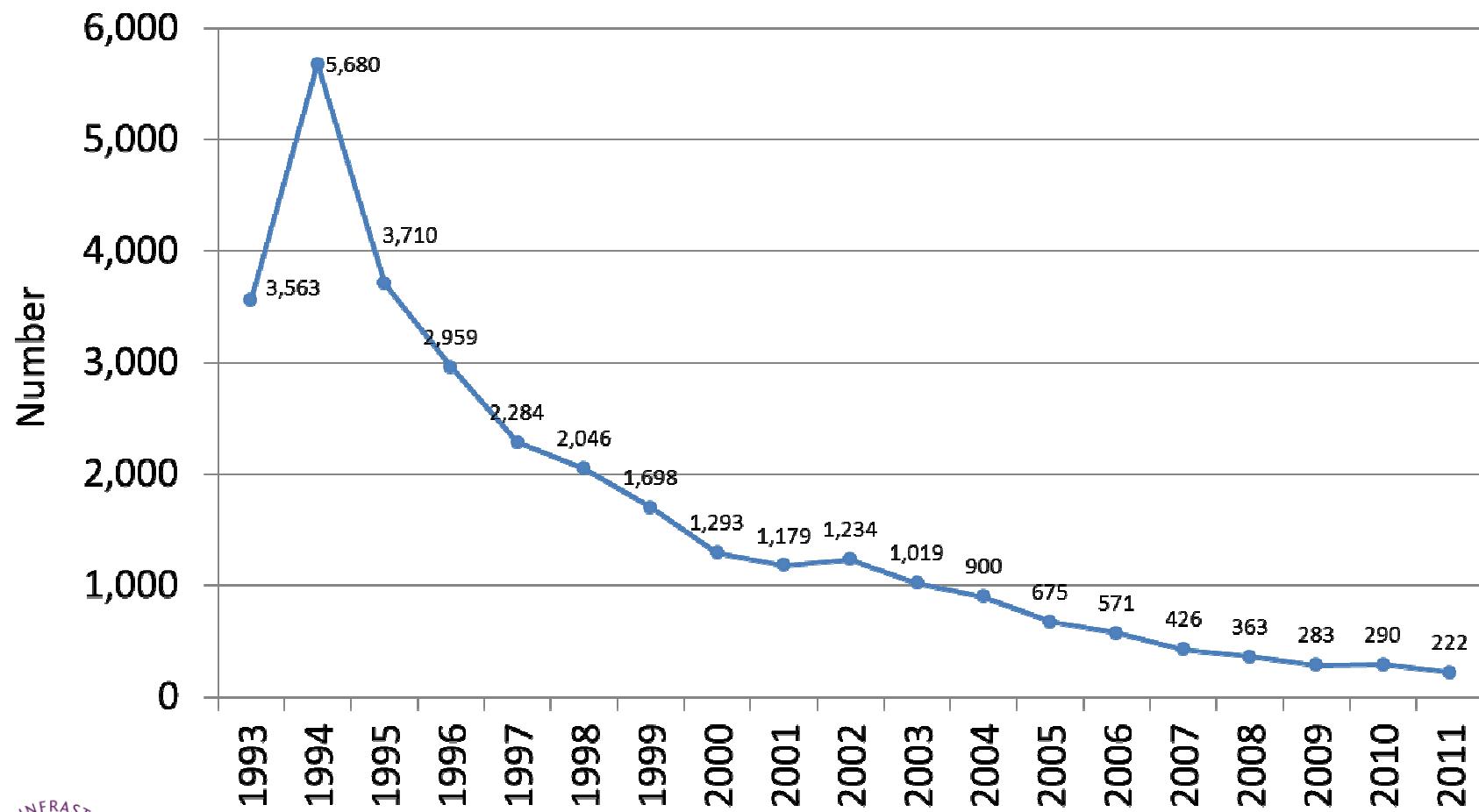
City of Rochester inspection data included

showed **90% of properties were passing City inspections**

(demonstrating that landlords were making pro-active improvements to their properties)



Children with Elevated Blood Lead Levels $\geq 10 \mu\text{g}/\text{dL}$



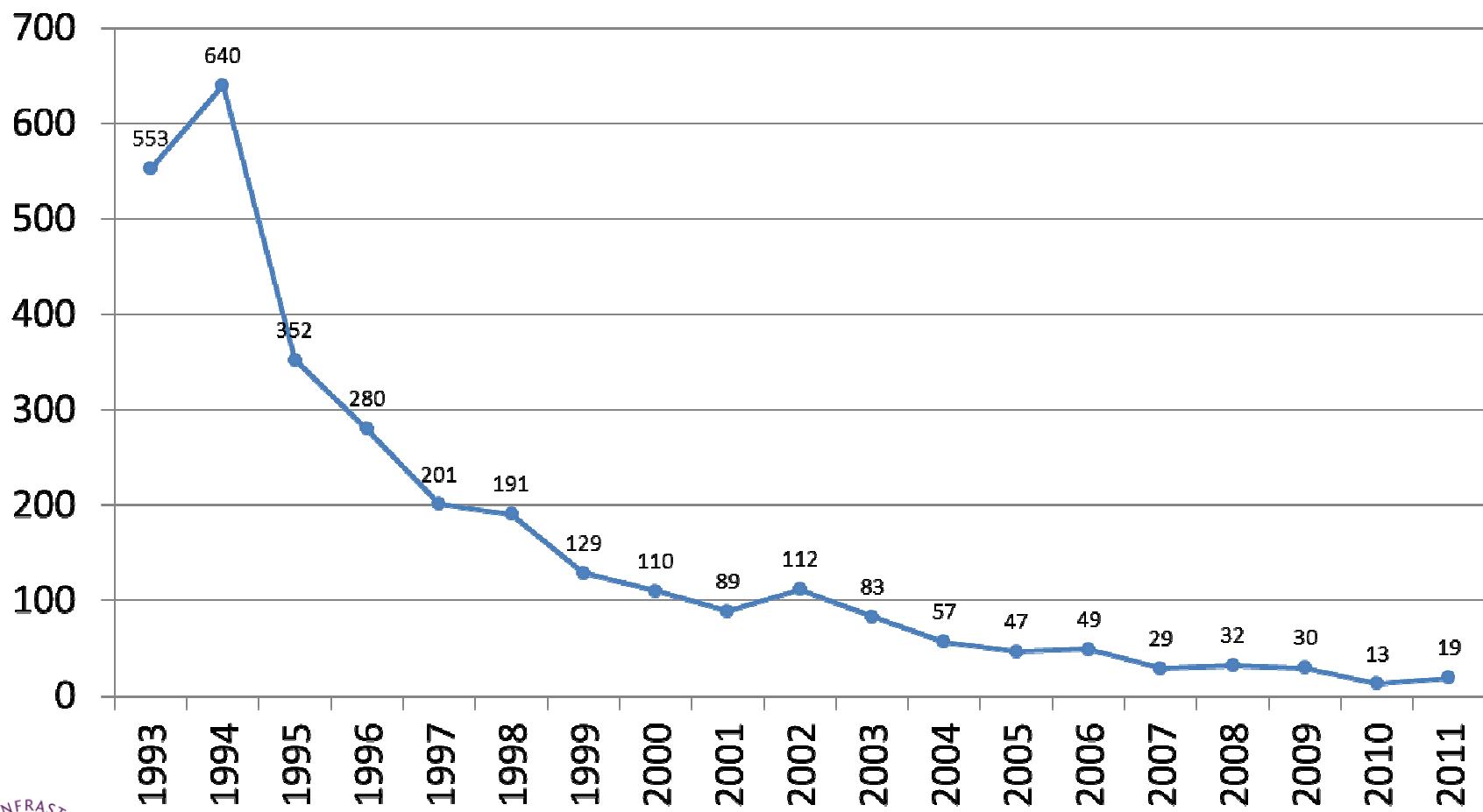
Source: Monroe County Department of Public Health

26

NACCHO
National Association of County & City Health Officials

26

Children with Confirmed Blood Lead Levels $\geq 20 \mu\text{g}/\text{dL}$



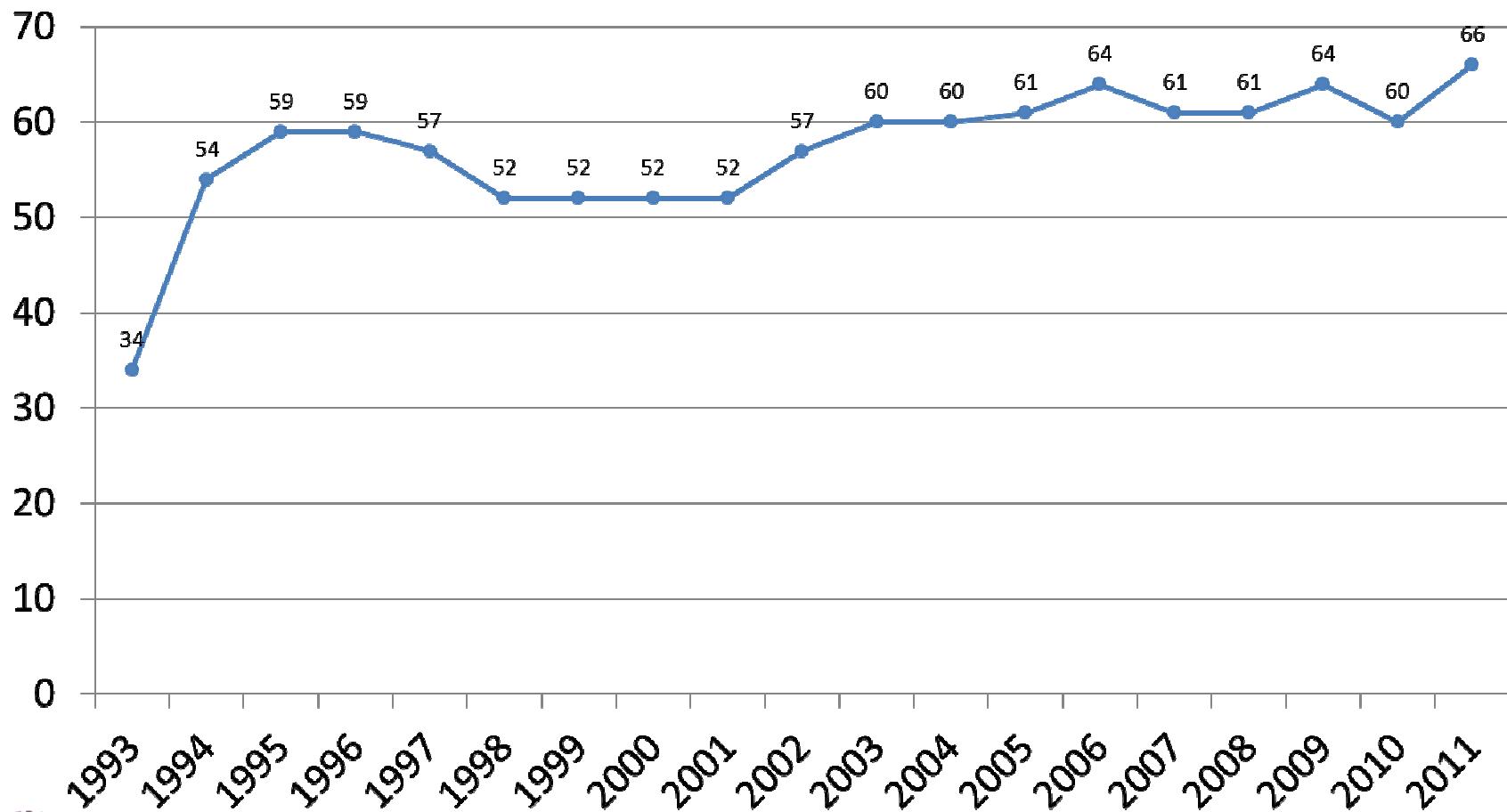
Source: Monroe County Department of Public Health

27

NACCHO
National Association of County & City Health Officials

27

Children aged 1 & 2 years old screened as a percentage of births the previous two years



Source: Monroe County Department of Public Health

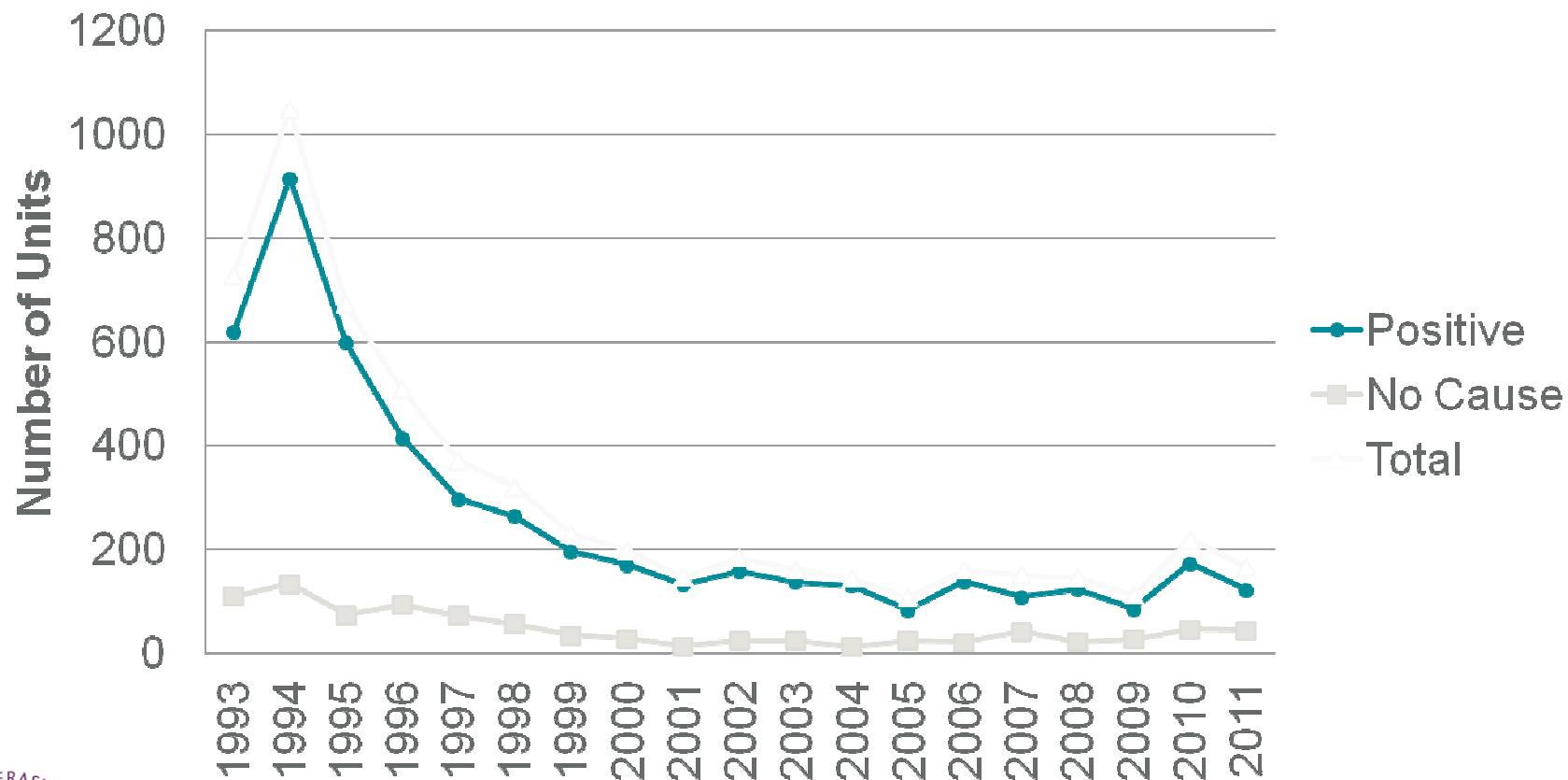
28

28

NACCHO
National Association of County & City Health Officials

Monroe County Department of Public Health Housing Inspections

Time Trends in Lead Housing Inspections



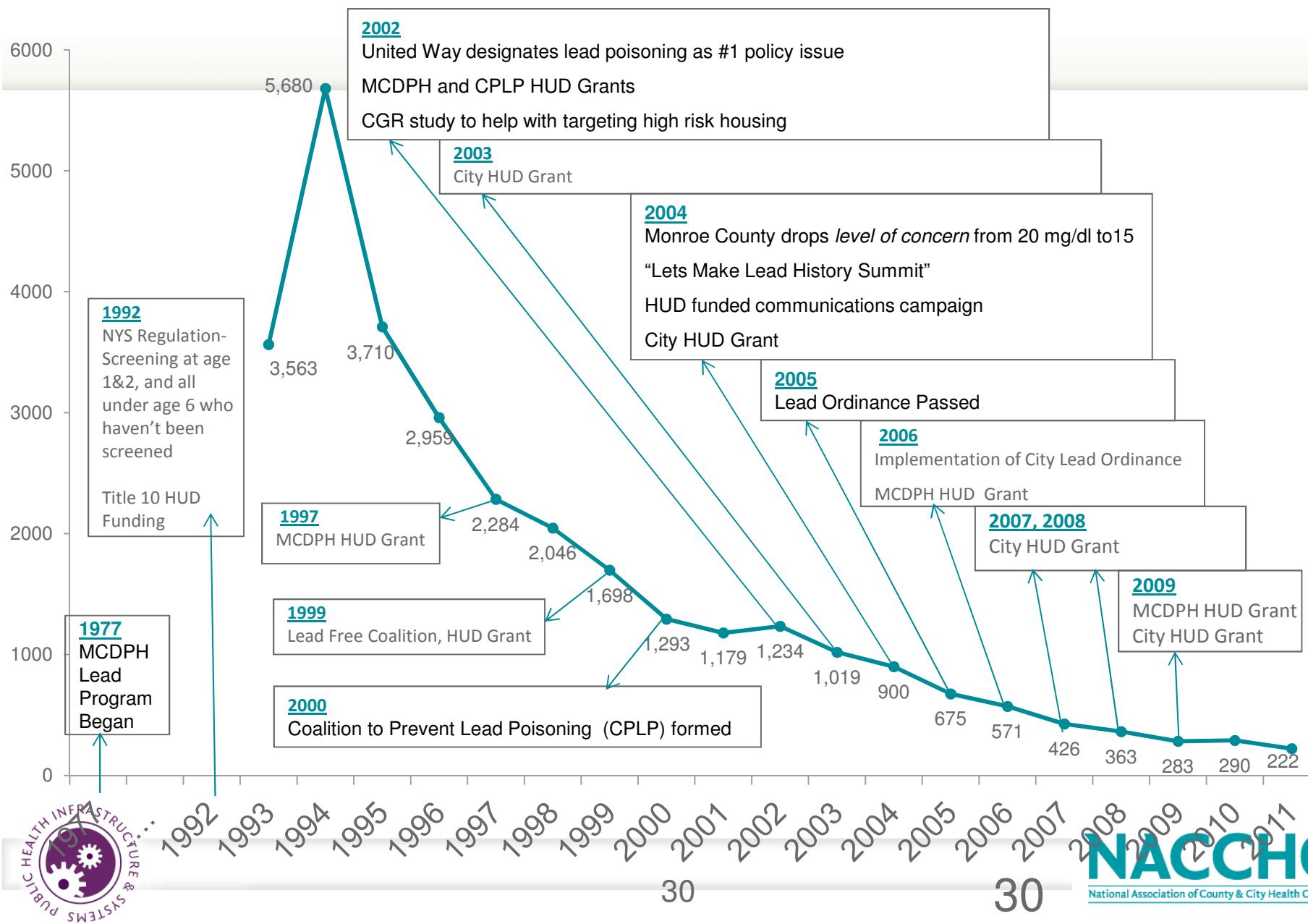
Source: Monroe County Department of Public Health

29

NACCHO
National Association of County & City Health Officials

29

Timeline: Childhood EBLL ($\geq 10 \mu\text{g/dL}$) Trends & Major Events



NACCHO
National Association of County & City Health Officials

Lessons Learned

Data collected routinely can be utilized to mobilize community to action and for evaluation.

Important to have passionate community partners (e.g., funding for coalitions, and evaluation).

Partnerships with universities helpful in doing more complex analyses.



Q & A



32

32

NACCHO
National Association of County & City Health Officials

Thank You



Planning for CHIP Monitoring and Evaluation

Julia Joh Elligers, Director of Assessment, Planning, and Workforce
Development
NACCHO, Washington, D.C.

Share: Why CHIP evaluation?

What do you see as the benefits of CHIP evaluation?



Why CHIP evaluation?

Evaluation can measure how well you implement actions (process evaluation) and whether your actions have an impact (outcome evaluation).

When evaluating your CHIP, you are measuring how well you implemented your plan (process evaluation) and whether your actions improved health in your community (outcome evaluation).



Community Health Improvement Plan



What evaluation aims to answer?



What evaluation aims to answer?



Vision: A community where people are mentally and physically healthy throughout the life cycle.

Strategic Issue: How can we ensure that our youth reach their full potential in life?

Goal: Reduce the use of marijuana and alcohol use by youth.

Objectives:

- a) Decrease the percentage of youth using marijuana from 20% to 15% by 2014.
- b) Decrease the percentage of youth drinking alcohol from 50% to 30% by 2014.

Outcome Indicators:

- a) Percentage of middle and high school students indicating that they use marijuana.
- b) Percentage of middle and high school students indicating that they drink alcohol.

Strategies:

- a) Provide information to youth about the dangers and consequences of using marijuana and alcohol.
- b) Build the skills of parents and other adults to talk with their children about the dangers and consequences of using marijuana and alcohol.
- c) Reduce the access of marijuana and alcohol in the community.

Tactics:

- a) Provide marijuana and alcohol awareness programs to youth in middle and high schools.
- b) Provide workshops for parents and create parent chat groups
- c) Work with law enforcement to do local vendor compliance checks on alcohol sales to minors.
- d) Set up a tip line on marijuana sales.

Performance Indicators:

- a) Pre- and post test results of youth participating in awareness programs.
- b) Number of parents attending workshops.
- c) Number of parents participating in chat groups.
- d) Number of vendors who pass alcohol compliance checks.
- e) Number of calls to the tip line.

Share: Methods for process evaluation

Strategies:

- a) Provide information to youth about the dangers and consequences of using marijuana and alcohol.
- b) Build the skills of parents and other adults to talk with their children about the dangers and consequences of using marijuana and alcohol.
- c) Reduce the access of marijuana and alcohol in the community.

Tactics:

- a) Provide marijuana and alcohol awareness programs to youth in middle and high schools.
- b) Provide workshops for parents and create parent chat groups
- c) Work with law enforcement to do local vendor compliance checks on alcohol sales to minors.
- d) Set up a tip line on marijuana sales.

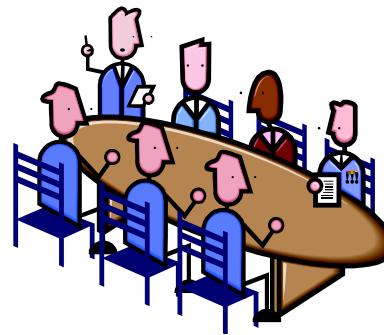
Performance Indicators:

- a) Pre- and post test results of youth participating in awareness programs.
- b) Number of parents attending workshops.
- c) Number of parents participating in chat groups.
- d) Number of vendors who pass alcohol compliance checks.
- e) Number of calls to the tip line.



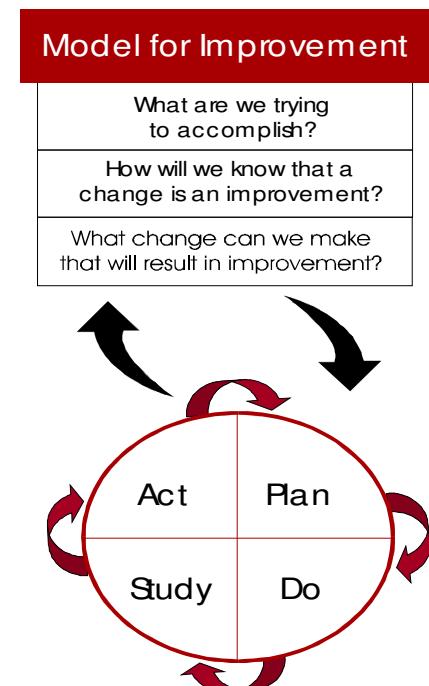
Example process evaluation methods

- Checklist
- Meeting minutes
- Dashboards
- QI techniques
- Logs
- Conversation with participants
- Steering committee confirmation
- Documentation
- Observation
- Customer satisfaction inquiry
- Surveys
- Focus groups
- Interviews



Evaluation ≠ Quality Improvement

- There are different methods you can use to evaluate your CHIP. Quality improvement techniques provide *methods* for evaluating CHIP activities.
- However, QI may not be the best approach for all types of evaluation.
- The benefit of QI is that it is cyclical by design.
- QI is also good for studying well-defined processes.
- A limitation of QI is that it isn't always good at measuring outcomes that do not have clear numerical values or that have multi-factorial causes.



What evaluation aims to answer?



Vision: A community where people are mentally and physically healthy throughout the life cycle.

Strategic Issue: How can we ensure that our youth reach their full potential in life?

Goal: Reduce the use of marijuana and alcohol use by youth.

Objectives: a) Decrease the percentage of youth using marijuana from 20% to 15% by 2014.
b) Decrease the percentage of youth drinking alcohol from 50% to 30% by 2014.

Outcome Indicators: a) Percentage of middle and high school students indicating that they use marijuana.
b) Percentage of middle and high school students indicating that they drink alcohol.

Strategies: a) Provide information to youth about the dangers and consequences of using marijuana and alcohol.
b) Build the skills of parents and other adults to talk with their children about the dangers and consequences of using marijuana and alcohol.
c) Reduce the access of marijuana and alcohol in the community.

Tactics: a) Provide marijuana and alcohol awareness programs to youth in middle and high schools.
b) Provide workshops for parents and create parent chat groups
c) Work with law enforcement to do local vendor compliance checks on alcohol sales to minors.
d) Set up a tip line on marijuana sales.

Performance Indicators: a) Pre- and post test results of youth participating in awareness programs.
b) Number of parents attending workshops.
c) Number of parents participating in chat groups.
d) Number of vendors who pass alcohol compliance checks.
e) Number of calls to the tip line.

Share: Methods for outcome evaluation

Goal: Reduce the use of marijuana and alcohol use by youth.

Objectives:

- a) Decrease the percentage of youth using marijuana from 20% to 15% by 2014.
- b) Decrease the percentage of youth drinking alcohol from 50% to 30% by 2014.

Outcome Indicators:

- a) Percentage of middle and high school students indicating that they use marijuana.
- b) Percentage of middle and high school students indicating that they drink alcohol.



Example outcome evaluation methods

- Assessment data collection methods
- Qualitative methods to measure relationship between activities and outcomes
 - Surveys, focus groups, interviews, ethnographic study
- Statistical modeling to measure relationship between activities and outcomes
 - Cross tabs
 - Multivariate regression
 - Experiments



What evaluation aims to answer?

Is the achievement
of our goals
addressing our
strategic issues?

Is the achievement of
our strategic issues
leading to our vision?



Vision: A community where people are mentally and physically healthy throughout the life cycle.

Strategic Issue: How can we ensure that our youth reach their full potential in life?

Goal: Reduce the use of marijuana and alcohol use by youth.

Objectives:

- a) Decrease the percentage of youth using marijuana from 20% to 15% by 2014.
- b) Decrease the percentage of youth drinking alcohol from 50% to 30% by 2014.

Outcome Indicators:

- a) Percentage of middle and high school students indicating that they use marijuana.
- b) Percentage of middle and high school students indicating that they drink alcohol.

Strategies:

- a) Provide information to youth about the dangers and consequences of using marijuana and alcohol.
- b) Build the skills of parents and other adults to talk with their children about the dangers and consequences of using marijuana and alcohol.
- c) Reduce the access of marijuana and alcohol in the community.

Tactics:

- a) Provide marijuana and alcohol awareness programs to youth in middle and high schools.
- b) Provide workshops for parents and create parent chat groups
- c) Work with law enforcement to do local vendor compliance checks on alcohol sales to minors.
- d) Set up a tip line on marijuana sales.

Performance Indicators:

- a) Pre- and post test results of youth participating in awareness programs.
- b) Number of parents attending workshops.
- c) Number of parents participating in chat groups.
- d) Number of vendors who pass alcohol compliance checks.
- e) Number of calls to the tip line.

Share: Methods for evaluating strategic issues & visions

Vision: A community where people are mentally and physically healthy throughout the life cycle.

Strategic Issue: How can we ensure that our youth reach their full potential in life?



Evaluating Strategic Issues & Vision

- In next iteration of the community health improvement process, compare vision statements and strategic issues. Have things improved in your community?
- Solicit feedback from partners and community residents



Creating an Evaluation Plan

- Purpose and focus of evaluation (should be practical, doable, and reflect evaluation priorities)
- Evaluation questions
- Schematic (e.g. logic model)
- Methods
- Workplan & timeline
- Participants
- Resources
- Methods for monitoring results
- How and when information will be applied

Remember:

- ✓ You don't have to evaluate everything.
- ✓ A subcommittee can take on this task.
- ✓ Enlist students to help create a plan.
- ✓ Identify a partner who can take ownership of activities

PHAB Documentation

- Evaluation reports that include
 - Description of stakeholder and partner participation
 - Status with respect to performance measures and health indicators
- Evaluation-informed revised CHIP



Developing a monitoring & updating system

- Identify roles and responsibilities of partners in monitoring and updating system
- Identify frequency of monitoring and updating activities
- Identify methods for monitoring and updating
 - Documentation
 - Spreadsheets
 - Dashboards
 - Balanced Score Cards
 - Assessment data collection system



Leveraging your monitoring and evaluation efforts

- To apply for funding
- To engage partners and leaders
- To increase political support
- To engage community residents
- To learn how to continually improve future CHA/CHIP work
- To celebrate your accomplishments



Discussion: Revising your CHIP

- Scenario 1: The number of vendors who pass alcohol compliance checks goes down.

Goal: Reduce the use of marijuana and alcohol use by youth.

Objectives: a) Decrease the percentage of youth using marijuana from 20% to 15% by 2014.
b) Decrease the percentage of youth drinking alcohol from 50% to 30% by 2014.

Outcome Indicators: a) Percentage of middle and high school students indicating that they use marijuana.
b) Percentage of middle and high school students indicating that they drink alcohol.

Strategies: a) Provide information to youth about the dangers and consequences of using marijuana and alcohol.
b) Build the skills of parents and other adults to talk with their children about the dangers and consequences of using marijuana and alcohol.
c) Reduce the access of marijuana and alcohol in the community.

Tactics: a) Provide marijuana and alcohol awareness programs to youth in middle and high schools.
b) Provide workshops for parents and create parent chat groups
c) Work with law enforcement to do local vendor compliance checks on alcohol sales to minors.
d) Set up a tip line on marijuana sales.

Performance Indicators: a) Pre- and post test results of youth participating in awareness programs.
b) Number of parents attending workshops.
~~c) Number of parents participating in chat groups.~~
d) Number of vendors who pass alcohol compliance checks.



Discussion: Revising your CHIP

- Scenario 2: Percentage of middle and high school students indicating that they use marijuana goes up.

Goal: Reduce the use of marijuana and alcohol use by youth.

Objectives: a) Decrease the percentage of youth using marijuana from 20% to 15% by 2014.
b) Decrease the percentage of youth drinking alcohol from 50% to 30% by 2014.

Outcome Indicators: a) Percentage of middle and high school students indicating that they use marijuana.
b) Percentage of middle and high school students indicating that they drink alcohol.

Strategies: a) Provide information to youth about the dangers and consequences of using marijuana and alcohol.
b) Build the skills of parents and other adults to talk with their children about the dangers and consequences of using marijuana and alcohol.
c) Reduce the access of marijuana and alcohol in the community.

Tactics: a) Provide marijuana and alcohol awareness programs to youth in middle and high schools.
b) Provide workshops for parents and create parent chat groups
c) Work with law enforcement to do local vendor compliance checks on alcohol sales to minors.
d) Set up a tip line on marijuana sales.

Performance Indicators: a) Pre- and post test results of youth participating in awareness programs.
b) Number of parents attending workshops.
c) Number of parents participating in chat groups.
d) Number of vendors who pass alcohol compliance checks.



Discussion: Revising your CHIP

- Scenario 3: You've exceeded your outcome objective to decrease the percentage of youth drinking alcohol from 50% to 30% by 2014. The percentage of youth drinking alcohol is now 5%.

Goal: Reduce the use of marijuana and alcohol use by youth.

Objectives: a) Decrease the percentage of youth using marijuana from 20% to 15% by 2014.
b) Decrease the percentage of youth drinking alcohol from 50% to 30% by 2014.

Outcome Indicators: a) Percentage of middle and high school students indicating that they use marijuana.
b) Percentage of middle and high school students indicating that they drink alcohol.

Strategies: a) Provide information to youth about the dangers and consequences of using marijuana and alcohol.
b) Build the skills of parents and other adults to talk with their children about the dangers and consequences of using marijuana and alcohol.
c) Reduce the access of marijuana and alcohol in the community.

Tactics: a) Provide marijuana and alcohol awareness programs to youth in middle and high schools.
b) Provide workshops for parents and create parent chat groups
c) Work with law enforcement to do local vendor compliance checks on alcohol sales to minors.
d) Set up a tip line on marijuana sales.

Performance Indicators: a) Pre- and post test results of youth participating in awareness programs.
b) Number of parents attending workshops.
c) Number of parents participating in chat groups.
d) Number of vendors who pass alcohol compliance checks.



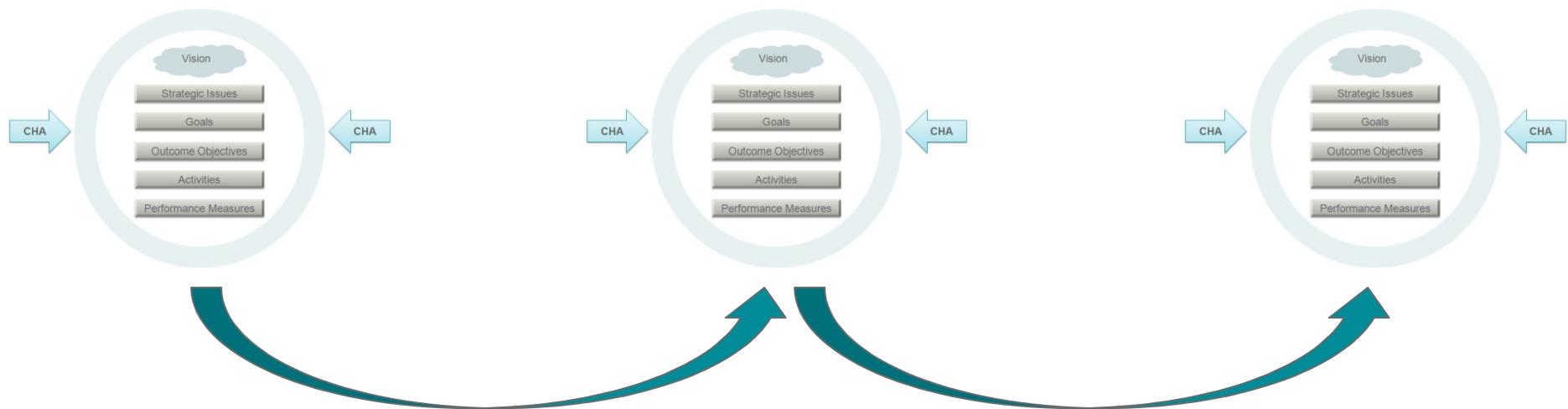
Share: Evaluation Resources

What types of evaluation resources *do you have?*

What types of evaluation resources *do you need?*



Community Health Improvement Plan



Final Thoughts

- ✓ You don't have to evaluate everything.
- ✓ Start with something that is doable.
- ✓ Don't have to be a data person. People who are good at tracking and observing can be valuable evaluation resources.
- ✓ Remember, evaluation is about telling and learning from your story.



Questions and Discussion



Evaluation Resources

- CDC's Evaluation Resources:
www.cdc.gov/eval/resources/index.htm
- Evaluation Plan Template:
www.cdc.gov/asthma/.../AppendixF_Evaluation_Plan_Outline.doc
- American Evaluation Association Resources:
www.eval.org/resources.asp
- National Network of Libraries of Medicine Evaluation Resources: <http://nnlm.gov/evaluation/tools/>
- Wholey, Hatry, Newcomer, *Handbook of Practical Program Evaluation*
- Patton, *Utilization-Focused Evaluation*



CHIP Resources

- Issue Prioritization Tip Sheet
- CHIP Implementation Plan Template
- 90 Day Implementation Steps Worksheet
- MAPP Action Cycle Resources:
<http://www.naccho.org/topics/infrastructure/MAPP/framework/clearinghouse/phase6.cfm>
- What Works for Health database: <http://www.countyhealthrankings.org/what-works-for-health>
- Take Action Cycle Webinar Series by the *County Health Rankings and Roadmaps* project: <http://www.countyhealthrankings.org/blog/123>

Visit the CHA/CHIP Network to access these resources and more!



Last Word

The next CHA/CHIP training webinar will be on:

**'Collaborating with Partners and Community Members to Change Public
and Organizational Policy'**

Presenters and Date: Allen Lomax, Victoria Manning & Ken Smith

9/24/12 from 2:30 – 4 PM ET

**Please complete the evaluation before
logging off the webinar.**

