

**Measuring Community Health Improvement Implementation**

August 20, 2013, 1:30pm – 3pm

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This session will be recorded and available at:  
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August 20, 2013




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Maximize or minimize side bar →

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- **Organizers will mute all phones during the presentation**
- **Q & A session at the end**
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### Webinar Presenters

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Illinois Public Health Institute  
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### Objectives

- Define IPLAN impact and outcome objectives for use in IPLAN.
- Understand how logic models can help develop strong plans.
- Understand how to develop measurable and meaningful impact and outcome objectives.
- Identify meaningful process measures.
- Identify tools and processes for monitoring and evaluating.



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### Variety of Requirements for Measuring Community Health Improvement

- Illinois Project for Local Assessment of Needs (IPLAN) – Certified Local Health Dept Administrative Code
- Public Health Accreditation Board (PHAB)
- IRS Requirements for Non-profit Hospitals- Community Health Needs Assessment (CHNA)
- Funders
- Etc.



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**The Certified Local Health Department  
Administrative Code Requires:**

- At least one measurable **outcome objective** covering a five-year time frame related to each priority health need;
- At least one measurable **impact objective** related to each outcome objective; and
- At least one **proven intervention strategy** to address each impact objective.
- **Evaluate programs and provide quality ...** and provide feedback on inadequacies and changes needed to redirect programs and resources.

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**IRS Requirements for CHNA**



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**PHAB Standards**

5.2.2 L Produce a community health improvement plan as a result of the community health improvement process

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

Source: PHAB Standards and Measures, Version 1.0



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**PHAB Standards**


5.2.4 A Monitor progress on implementation of strategies in the community health improvement plan in collaboration with broad participation from stakeholders and partners

1) Evaluation reports on progress made in implementing strategies in the community health improvement plan including:

- a) **Monitoring of performance measures**
- b) **Progress related to health improvement indicators**

2) Revised health improvement plan based on evaluation results

Source: PHAB Standards and Measures, Version 1.0



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**Poll Question 1**

Which best describes the organization or group you represent?

1. Coalition
2. Community-Based Organization
3. Hospital
4. Local Health Department
5. State Health Department
6. Other



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**Poll Question 2:**

What stage is your organization or group at with community health assessment and planning?

1. Completing our assessment; priorities not yet defined.
2. Completed assessment with priorities defined.
3. Developing our community health improvement plan for our priorities.
4. Implementing and monitoring our plan.
5. N/A



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**Brief Overview of Community Health Improvement Planning**



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**Poll Question 3:**  
Thinking of your last IPLAN/CHNA process, what percentage of overall time was spent on assessment vs. planning?

1. Less than 30% on assessment and the rest on planning.
2. 30-40% on assessment and 60-70% on planning
3. 50% on assessment and 50% on planning
4. 60-70% on assessment and 30-40% on planning
5. 71% or more on assessment and the rest on planning.
6. N/A



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**Need to Better Balance Time and Resources**

**Planning =**  
Developing plans to address the priority, including:  
An exploration of barriers, resources, full understanding  
Of the issue, outcomes and the strategies.  
Programs and interventions we and our  
Partners will implement to create the changes needed.  
Includes detailed action plans, measurement plans and  
Monitoring and oversight.





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Priorities were selected based on having a picture of what is...

Understand and define the current status

➔

- Scope of the problem
- Impact of the problem
- Most vulnerable populations
- Why it is important to address to achieve vision
- What else is going on to address this issue?

Refer to the reports with data related to Priority Issue.

In some cases, more work on understanding the problem may be necessary.

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Action planning to address priorities begins with the end in mind...

Current Status of the Priority Issue

➔

Vision for the Future with Improvements Related to the Priority Issue

What changes need to occur to achieve Vision?

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What changes need to occur to achieve Vision?

➔

### Desired Changes

- *How does health status need to change?*
- *What determinants of health need to change?*
- *How must the environment change?*
- *What policies must be changed and/or adopted?*
- *What types of system changes are needed?*
- *What risk factors need to change?*
- *What behaviors must change? How and by whom?*
- *What knowledge or skill must be increased and by whom?*
- *What attitudes must change and by whom?*
- *What awareness must be created and with whom?*

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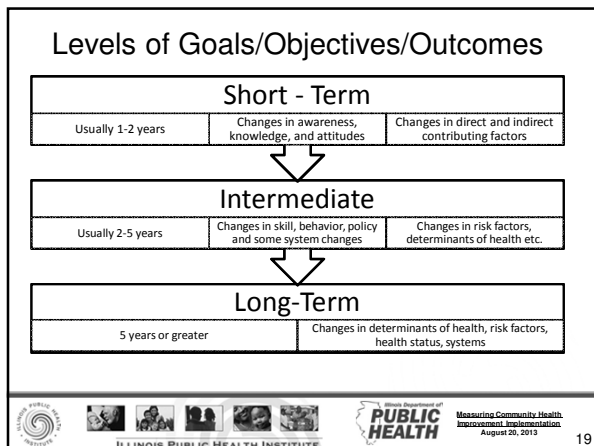
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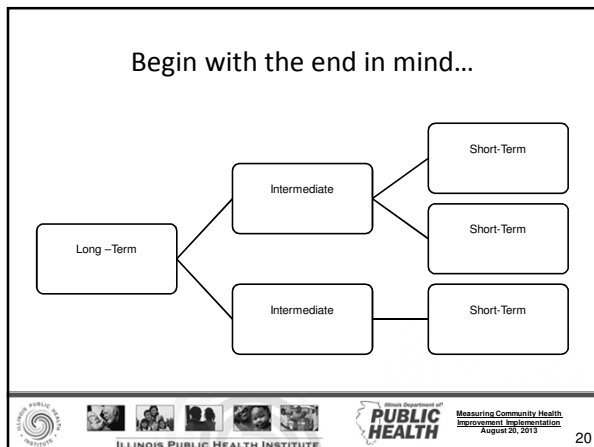
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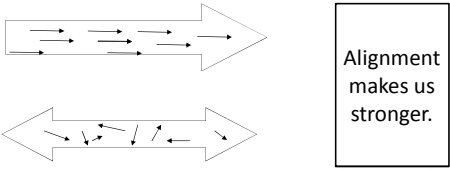
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We seek alignment with others focusing on the same priorities...



Alignment makes us stronger.

Align with other initiatives going on with the public health department, other organizations in the community and at the state and national level.

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### 5 Key Elements to Collective Impact

COMMON AGENDA	<ul style="list-style-type: none"><li>• Common understanding of the problem</li><li>• Shared vision for change</li></ul>
SHARED MEASUREMENT	<ul style="list-style-type: none"><li>• Collecting data and measuring results</li><li>• Shared accountability</li></ul>
MUTUALLY REINFORCING ACTIVITIES	<ul style="list-style-type: none"><li>• Evidence-based/Evidence-informed approaches</li><li>• Coordination through joint plan of action</li></ul>
CONTINUOUS COMMUNICATION	<ul style="list-style-type: none"><li>• Consistent and open communication</li><li>• Clear decision making processes</li><li>• Focus on building trust</li></ul>
BACKBONE SUPPORT	<ul style="list-style-type: none"><li>• Separate organization(s) with dedicated staff</li><li>• Resources/skills to convene and coordinate</li></ul>

Source: Kania, J. and Kramer, M., Collective Impact. Stanford Social Innovation Review, 2011. 26

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### IPLAN Requirements

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**The Certified Local Health Department  
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- At least one **proven intervention strategy** to address each impact objective.
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Short-term **Process Objective**

- Desired level of change in a contributing factor.
  - **Direct contributing factors** – a scientifically established factor that directly affects the level of a risk factor
  - **Indirect contributing factors** – community-specific factor that directly affects the level of the direct contributing factor
- **Short-term** (1-2 years in length)
- Usually the result of one or more programs or interventions.
- Should address an impact objective



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Intermediate **IPLAN Impact Objectives**

- A goal for the level to which a health problem should be reduced.
- **Intermediate** (i.e., 2 to 3 years) in length of time
- Desired level of change in a risk factor.
  - **Risk factors** are direct causes and determinants which based on scientific evidence or theory, are thought to influence directly the level of a specific strategic issue/health problem.
- Measurable related to each outcome objective.
- Only occur after related short-term (process) objectives are achieved.



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Long-term **IPLAN Outcome Objectives**

- A goal for the level to which a health problem or condition should be reduced.
- **Long term** (five-year)
- Measurable related to each priority health need.
- Look to HP 2020 Objectives for guidance on establishing measures
- Only occur after short-term and intermediate objectives (process and impact objectives) are achieved.



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Examples of Impacts/ Outcomes		
Outcome Objective	Impact Objective	Example Adapted From
By 2014, reduce the number of asthma hospitalizations in Will County by 15%, (762 hospitalizations).	By 2012, 25% of the Will County communities will pass ordinances to be smoke-free.	Will County
By 2016, reduce Kendall County death rate from heart disease from 144 per 100,000 to 138 per 100,000	By 2012, decrease the number of Kendall County adults who smoke from 22.3% to 21%.	Kendall County
By 2019, reduce by 10% the pregnancy rate among Vermillion County adolescent females aged 15-19 years of age	By 2017, increase by 10% the proportion of Vermillion County sexually active persons aged 15 to 19 years who use condoms to both effectively prevent pregnancy and provide barrier protection against disease.	Vermillion County



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**Digging Deeper into Priority Issues**

*What are the underlying causes and factors?*

- **Risk factors** are direct causes and determinants which based on scientific evidence or theory, are though to influence directly the level of a specific strategic issue/health problem.
- **Direct contributing factors** – a scientifically established factor that directly affects the level of a risk factor
- **Indirect contributing factors** – community-specific factor that directly affects the level of the direct contributing factor



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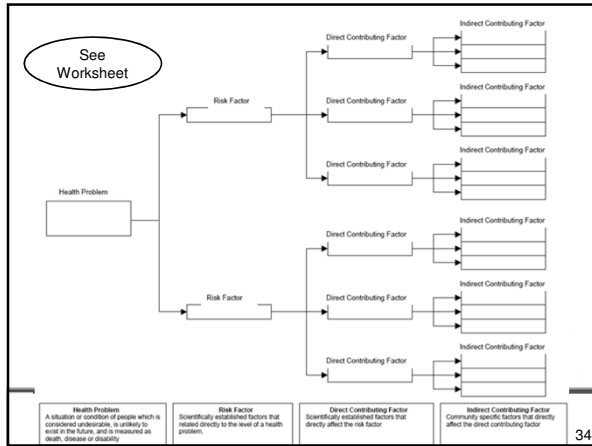
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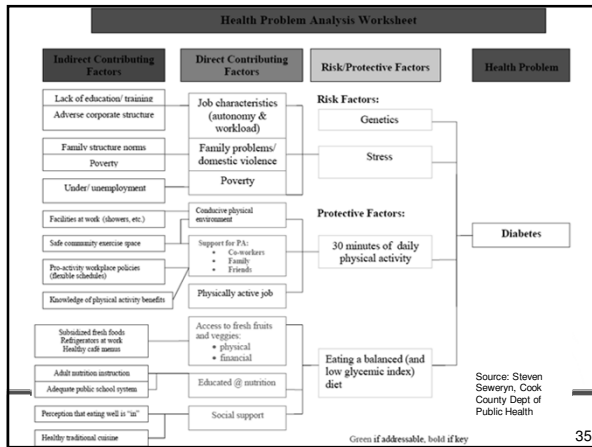
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**Poll 4**  
**Have you ever used this tool?**

1. Yes and I like it.
2. Yes and I am not crazy about it.
3. No and I might try it.
4. No and there is no way I am going to use it!
5. N/A

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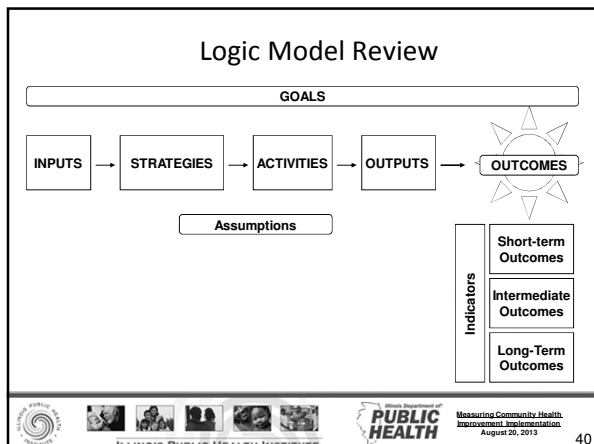
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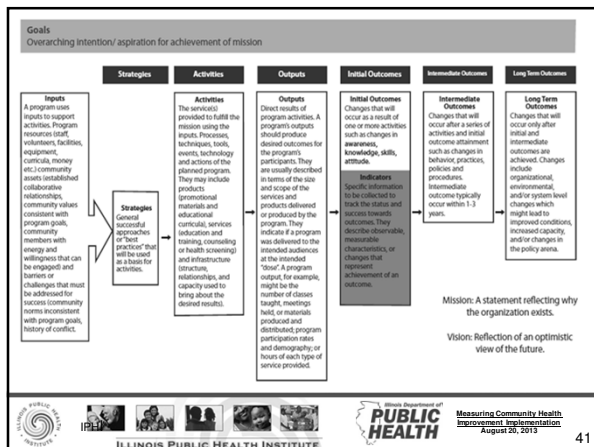
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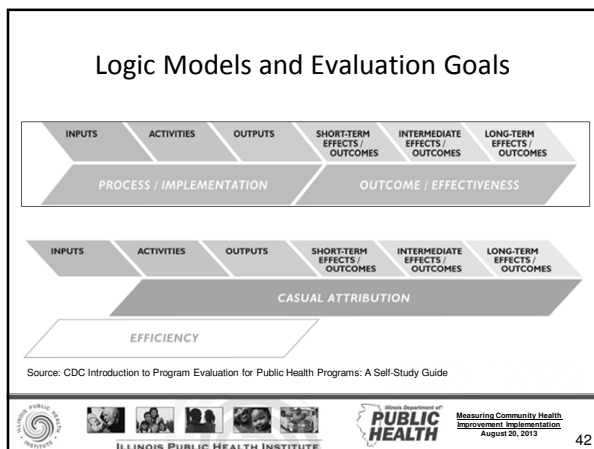
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Process is a measure of what we do.

- Ultimately, what will give you the best information about what it is being implemented to address the priority?
- What will tell you if the program, intervention or activity is on track?
- What will you be able to report out on to show progress?



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Considerations for Process Evaluations

- Transfers of Accountability
- Dose Delivered
- Dose Received (Exposure)
- Dose Received (Satisfaction)
- Access
- Staff Competency
- Reach (Participation rate)
- Recruitment
- Context



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Questions for Process Evaluations

- Who have we reached through this intervention?
- What was delivered?
- How does that compare to what was planned?
- Have evidence-based practices been adhered to rigorously? If not, why?
- If someone were to try to replicate our process, would they be able to from our information?
- What barriers exist for our intended participants?



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### Additional Questions Related to Partnerships

- What inputs and activities are each partner responsible for?
- What outcomes will each partner measure?
- How well are the partners communicating?
- What is needed to improve the effectiveness of the partnership?

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Identifying Meaningful

### IMPACT AND OUTCOME MEASURES

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### Criteria for Choosing Outcomes to Measure

- Cost and burden of data collection
- Can program participants or others realistically provide the data?
- Can we track individuals through time?
- Are there any issues of confidentiality to take into account? How would we do it?
- Can we train data collectors and manage the data collection process for this type of data?
- Is the desired improvement cycle smaller or larger than the measurement cycle?

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### Criteria for Choosing Outcomes to Measure

- Is it reasonable to believe the program can influence the outcome in a non-trivial way, even though it can't control it? (can you really impact community-wide change?)
- Would measurement of the outcome help identify program successes and help pinpoint and address problems or shortcomings?
- Will the program's various stakeholders accept this as a valid outcome of the program?

Source: *Measuring Program Outcomes: A Practical Approach*, United Way, 1996.



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### Look at Your Set of Outcomes

- Do program outputs and initial, intermediate, and long-term outcomes relate to each other logically? (walk through and check "if-then" relationships)
- Do these relationships reflect the logic of the program—the sequence of influences and changes that program inputs, activities, and outputs are intended to set in motion?
- Do the longer-term outcomes represent meaningful benefits or changes in participants' status, condition or quality of life?
- Have you identified potential negative outcomes of the program?

Source: *Measuring Program Outcomes: A Practical Approach*, United Way, 1996.



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### Identifying Indicators

- Determine the specific observable, measurable characteristic or change that will represent achievement of the outcome
- Determine the specific statistic(s) (e.g. number and percent attaining outcome) the program will calculate to summarize the level of achievement.
- You may need more than one indicator for an outcome.

Source: *Measuring Program Outcomes: A Practical Approach*, United Way, 1996.



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### Selecting Indicators for Outcomes

Program	Outcome	Indicators
Smoking cessation	Participants stop smoking	*# and % who report quitting *# and % not relapsed at 6 months
Counseling for parents to reduce child abuse	Fewer cases of abuse	*# and % of families with no cases following program
6 <sup>th</sup> grade tutorial program	Improved academic performance	*# and % of students who earn better grades after program

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### Outcome Measurement Plan

Outcomes	Indicators	Data Collection			
		Sources	Methods	Sample	Timing

Source: University of Wisconsin-Extension, Program Development and Evaluation.

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### Hard to Measure Outcomes

- Anonymous participants
- Very short term service
- Very long term outcomes
- Reliability of participants to give accurate response
- Intangible outcomes
- Long term outcomes dependent on influencing action of others (not target group)
- Community level outcomes
- Activities that support other agencies/programs
- Programs preventing negative events

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Poll 6:  
Have you ever reached the point of measuring outcomes for community health improvement planning?

- Yes
- Close but not quite.
- No
- N/A



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Developing Measurement and Monitoring Plans



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Why do measurement systems fail?

1. Impose management measures on the performing group instead of allowing the group to establish the measures
2. Do not involve process owners and those who know the most about the process in developing the measurement systems
3. Treat measurement information and trends as private data and do not share the information with the group
4. Fail to recognize and reward performance improvement
5. Fear exposing good or bad performance. The group may be satisfied with the status quo and not want to upset anyone.
6. Improperly define the system or process to be measured
7. Spend too much time on data gathering and reporting and not enough time on analysis and action
8. Fail to consider customer requirements

Malcolm Baldrige National Quality Award Office



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### Determining Measurement Needs

- What are you already doing to collect data, document your work etc.?
- What resources do you have?
- How often will you be able to come together to look at data?
- What existing reliable data do you already have?
- Where can you start measuring a couple indicators fairly easily and accurately?
- Where do you have measurement expertise, capacity and time?
- Others?



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### Infrastructure to Support Monitoring

- Evaluation and Monitoring Team
- Evaluation and Monitoring Focus/ Expertise on Action Teams
- Oversight / Accountability Mechanism
- Plans for How Results Will be Used



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### Basic Monitoring Infrastructure

- Establish a team responsible for monitoring progress of
  - activities and process data
  - objectives and outcome indicators
- Report out progress information to steering committee or governing committee and all partners.
  - monthly, every 3 months, every 6 months or annually
  - depending on when outcome and performance data are available.
  - Hold assessment sessions to discuss "How are we doing?"
  - What is going well? Why?
  - What is not going well? Why?
  - What changes or improvements are needed regarding the activities?
  - Develop a plan and implement changes or improvements

The key is to develop a monitoring process to provide continuous feedback to make changes/improvements when necessary.



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## TOOLS FOR MONITORING AND COMMUNICATING DATA



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- Could be as simple as an excel spreadsheet with targets and measures  
or
- Something more complex and visually appealing



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### Dashboards


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#### Michigan Health and Wellness Dashboard

**Performance Key:**

- ▲ Performance improving
- ▬ Performance staying about the same
- ▼ Performance declining

Click on the links in the table below for more detail.




Access to Health Care		Prior	Current	Progress
Uninsured adults	12.9%	12.7%	12.7%	▲
Primary care physicians (per 100,000 population)	117.8	112.4	112.4	▬
Veterans enrolled in Veterans Administration health care	26.5%	30.1%	30.1%	▬

Health Indicators		Prior	Current	Progress
Life expectancy at birth	77.8	77.8	77.8	▬
Leading causes of death	69.8	69.8	69.8	▬
Preventable hospital stays (per 100 Medicare enrollees)	74.2	69.8	69.8	▲
Infant mortality (per 1,000 births)	7.7	7.4	7.4	▬
Attempted suicide and self-inflicted	5,284	5,380	5,380	▬

Health Behaviors		Prior	Current	Progress
Obesity in the population (adults)*	n/a	31.3%	n/a	▬
Obesity in the population (high schools)	11.9%	12.1%	12.1%	▬
Adult physical activity**	n/a	15.7%	n/a	▬
Adequate daily consumption of fruits and vegetables**	n/a	12.8%	n/a	▬
Routine checkups in past year**	n/a	68.5%	n/a	▬
Recent dental visits	n/a	n/a	n/a	▬

[http://www.michigan.gov/midashboards/0,4624,7-256-59026\\_...\\_00.html](http://www.michigan.gov/midashboards/0,4624,7-256-59026_..._00.html)



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