



Building Capacity to Evaluate Health Equity Plan Strategies

Introductions

Learning Objectives

Learning Objectives

- Increase your knowledge and skills to assess how well your health equity plan strategies are benefitting
 - individuals,
 - groups,
 - organizations, and/or
 - communities.
- Increase your ability to use a logic model to help you develop an evaluation plan.

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“

Start where you are. Use what you have. Do what you can.

-Arthur Ashe

CONNeCting to Care and CLAS

Connecting to Care



Connecting to Care is a federally-funded initiative focused on improving the state's behavioral health system of care for children. In order to best serve all children with behavioral health needs in our state, the services that children and families might benefit from must be racially just, culturally responsive, and linguistically appropriate.

<https://www.connectingtocarect.org/>

<https://www.plan4children.org/about-connecting/>

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CONNECTing with CLAS

VISION

To develop, plan and implement a statewide process for incorporating the enhanced Culturally and Linguistically Appropriate Services (CLAS) Standards within the children's Network of Care of Connecticut.

GOAL

To partner with families and network of care leaders to promote health equity, racial justice and cultural and linguistic competence across all behavioral health services at the local, regional and state levels.

<https://www.plan4children.org/connecting-children-and-families-to-care-workgroups/cultural-and-linguistic-competency/>

Behavioral Health Equity

- The right to access quality health care for all populations regardless of the individual's race, ethnicity, gender, socioeconomic status, sexual orientation, or geographical location.
- This includes access to prevention, treatment, and recovery services for mental and substance use disorders.

<https://SAMHSA.gov/behavioral-health-equity>

Behavioral Health Inequities

- Access to care- the opportunity to have health care needs fulfilled
 - Underdiagnosis, availability (i.e., hours of operation), affordability, lack of insurance, patient perceptions of healthcare provider stigma, lack of usual place of care
- Use of behavioral health care
 - Untreated mental health disorders, treatment gaps, low utilization of mental health care
- Outcomes of behavioral health care

Racial Injustice and Racial Justice

Racial injustice-disparities in outcomes and experiences in various systems based on race.

Racial justice (racial equity)-the systematic fair treatment of people of all races, resulting in equitable opportunities and outcomes for all.



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Culturally and Linguistically Appropriate Services (CLAS) Standards



To provide a blueprint for individuals and health and health care organizations to implement **culturally and linguistically appropriate services (CLAS)** that will advance **health equity**, improve **quality**, and help eliminate **health care disparities**.

CLAS Standards

Principal Standard

Governance, Leadership and Workforce (Standards 2-4)

Communication and Language Assistance (Standards 5-8)

Engagement, Continuous Improvement, and Accountability
(Standards 9-15)

Principal Standard

- Provide racially just, effective, equitable, understandable, and respectful quality care and services that are responsive to the diverse cultural health beliefs and practices, preferred languages, health literacy, and other communication needs.

CLAS Theme 3: Engagement, Continuous Improvement, and Accountability (Standards 9-15)



Engagement, Continuous Improvement, and Accountability Standards

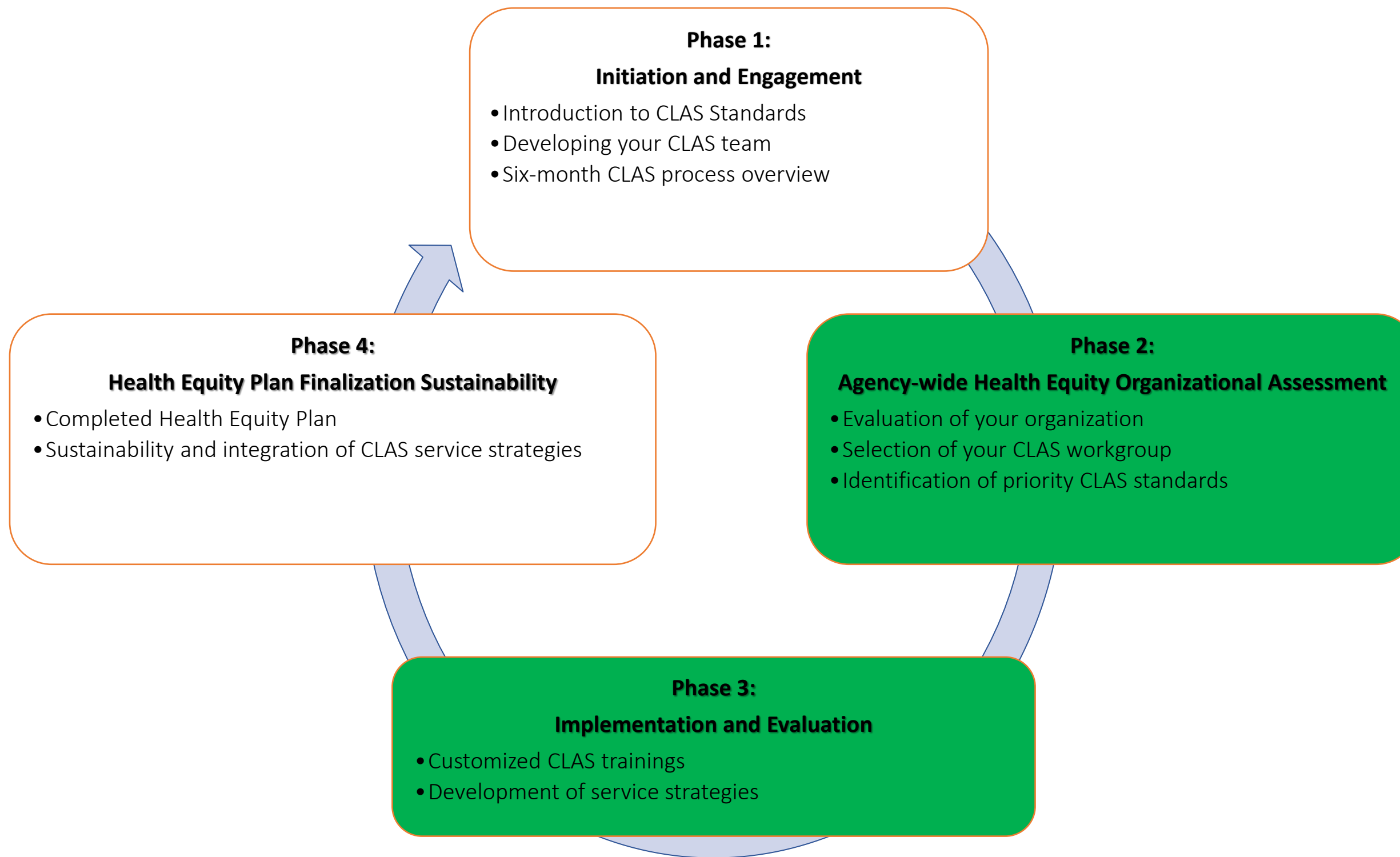
9. Establish culturally and linguistically appropriate goals, policies, and management accountability, and infuse them throughout the organization's planning and operations.
10. Conduct ongoing assessments of the organization's CLAS-related activities and integrate CLAS-related measures into measurement and continuous quality improvement activities.
11. Collect and maintain accurate and reliable demographic data to monitor and evaluate the impact of CLAS on health equity and outcomes and to inform service delivery.
12. Conduct regular assessments of community health assets and needs and use the results to plan and implement services that respond to the cultural and linguistic diversity of populations in the service area.

Engagement, Continuous Improvement, and Accountability Standards

13. Partner with the community to design, implement, and evaluate policies, practices, and services to ensure cultural and linguistic appropriateness.
14. Create conflict and grievance resolution processes that are culturally and linguistically appropriate to identify, prevent, and resolve conflicts or complaints.
15. Communicate the organization's progress in implementing and sustaining CLAS to all stakeholders, constituents, and the general public.

Health Equity Plan Development Review

Four Phase Model to Develop Health Equity Plans and Address Racial Justice and Health Disparities



What is the Goal?

CONNECTing Children and Families to Care					
DIVERSITY/EQUITY/INCLUSION PLAN					
AGENCY:					
CLAS STANDARD:					
SELECTED GOAL	MEASURABLE OBJECTIVES	PERFORMANCE MEASURE	IMPACT OR RESULT	RESPONSIBLE DEPARTMENT/ COMMITTEE/PERSON(S)	PLANNED DATE OF COMPLETION

Program Evaluation Fundamentals

Group Discussion:

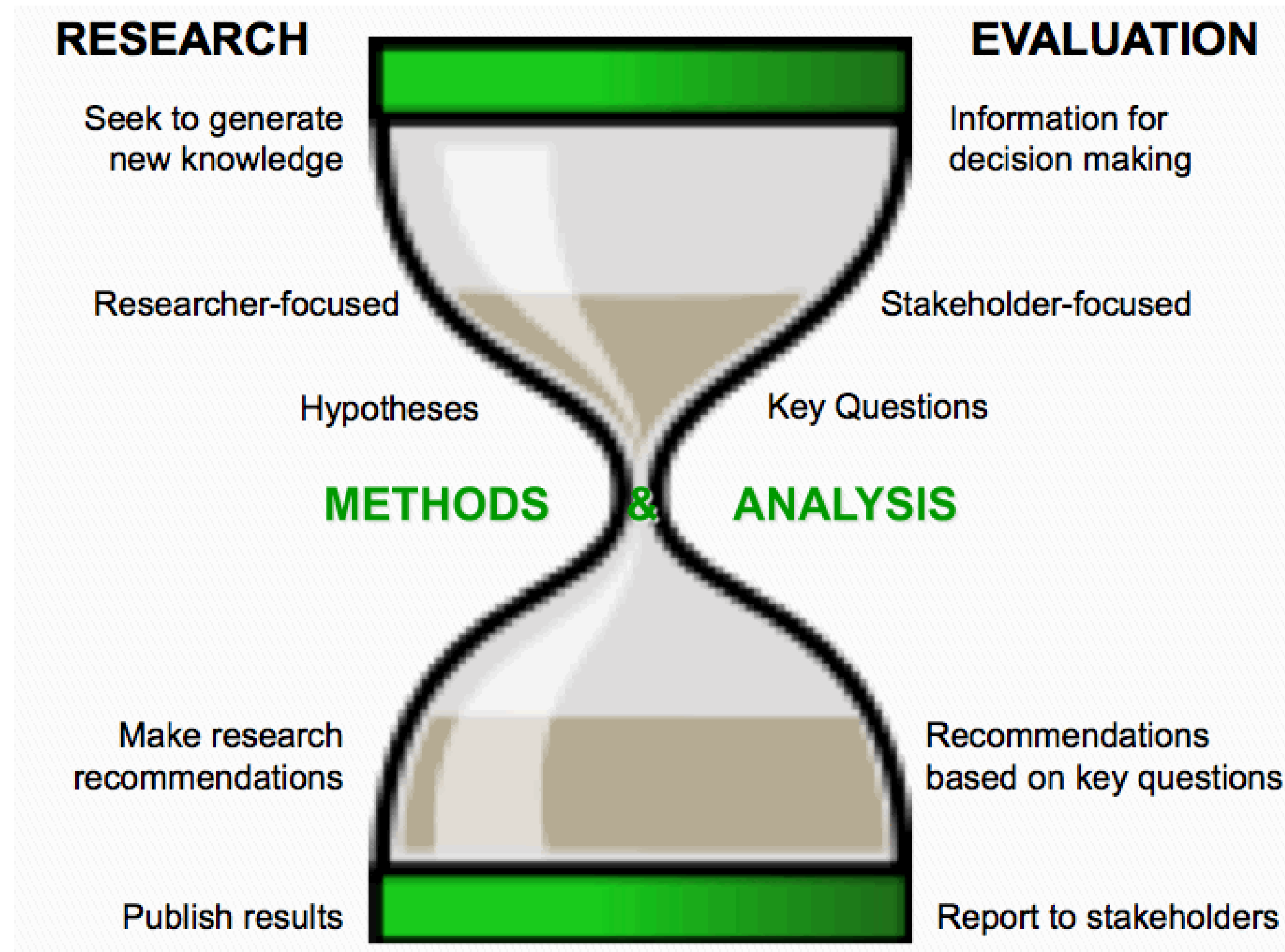
What are some evaluation challenges you have experienced?

What is Program Evaluation?

“The use of social science research methods to systematically investigate the effectiveness of social intervention programs in ways that are adapted to their political and organizational environments and are designed to inform social action in ways that improve social conditions.”

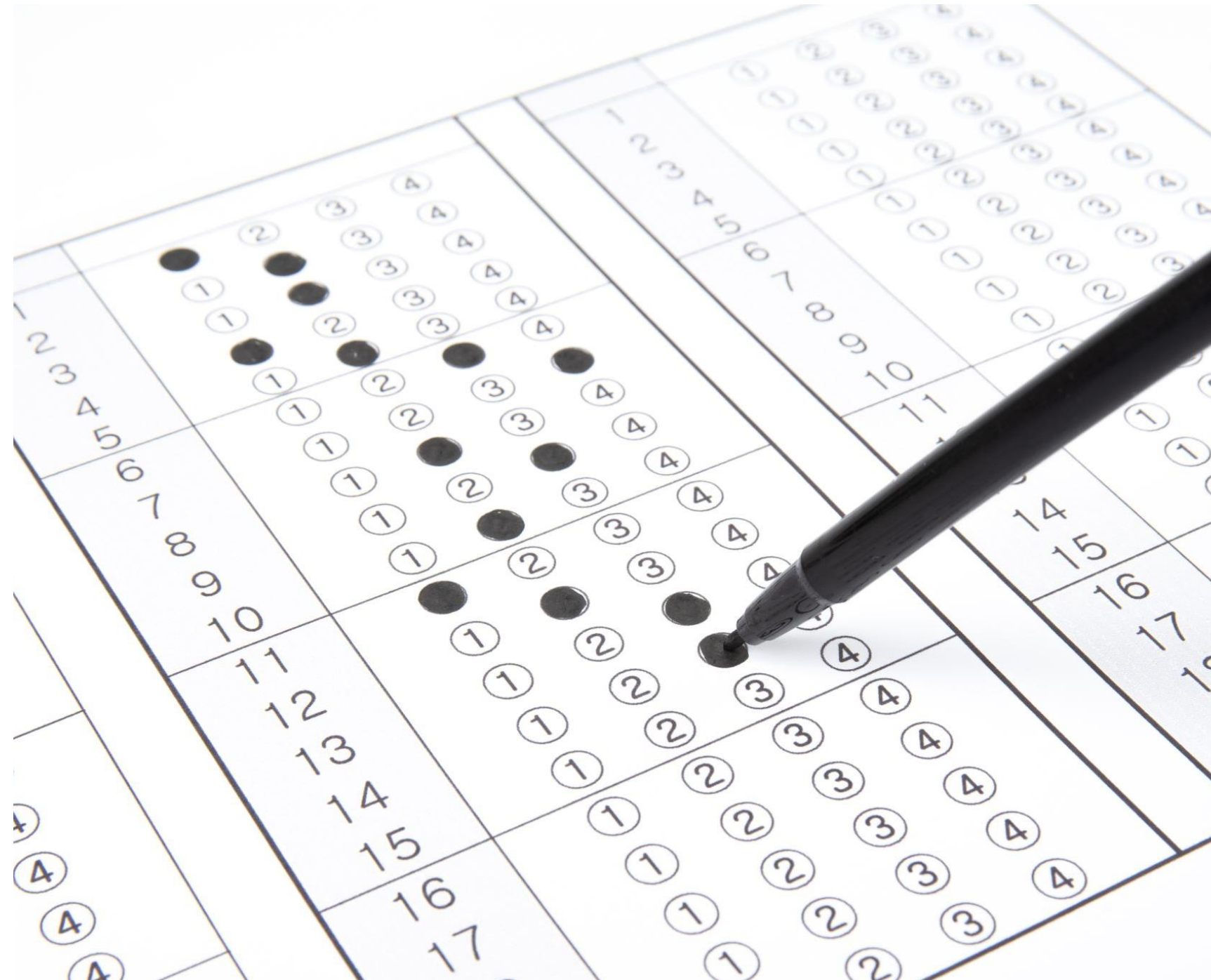
(Rossi, Lipsey, Freeman, 2002, p. 29)

Research vs. Evaluation



Types of Evaluation

- Needs Assessment
- Formative/Process
- Outcome



Needs (and Resource) Assessment

- How do you know there is a need for a program or service?
- What resources exist/are needed to address the identified need?
- How ready are you to address health disparities?
- Common data sources:
 - Archival data (local, state, federal)
 - Data from other programs that you implement
 - Consumers/program recipients, program staff/leadership, funders, other stakeholder perception and opinions about programs/services are needed
- Change model Phase 2

Needs Assessment



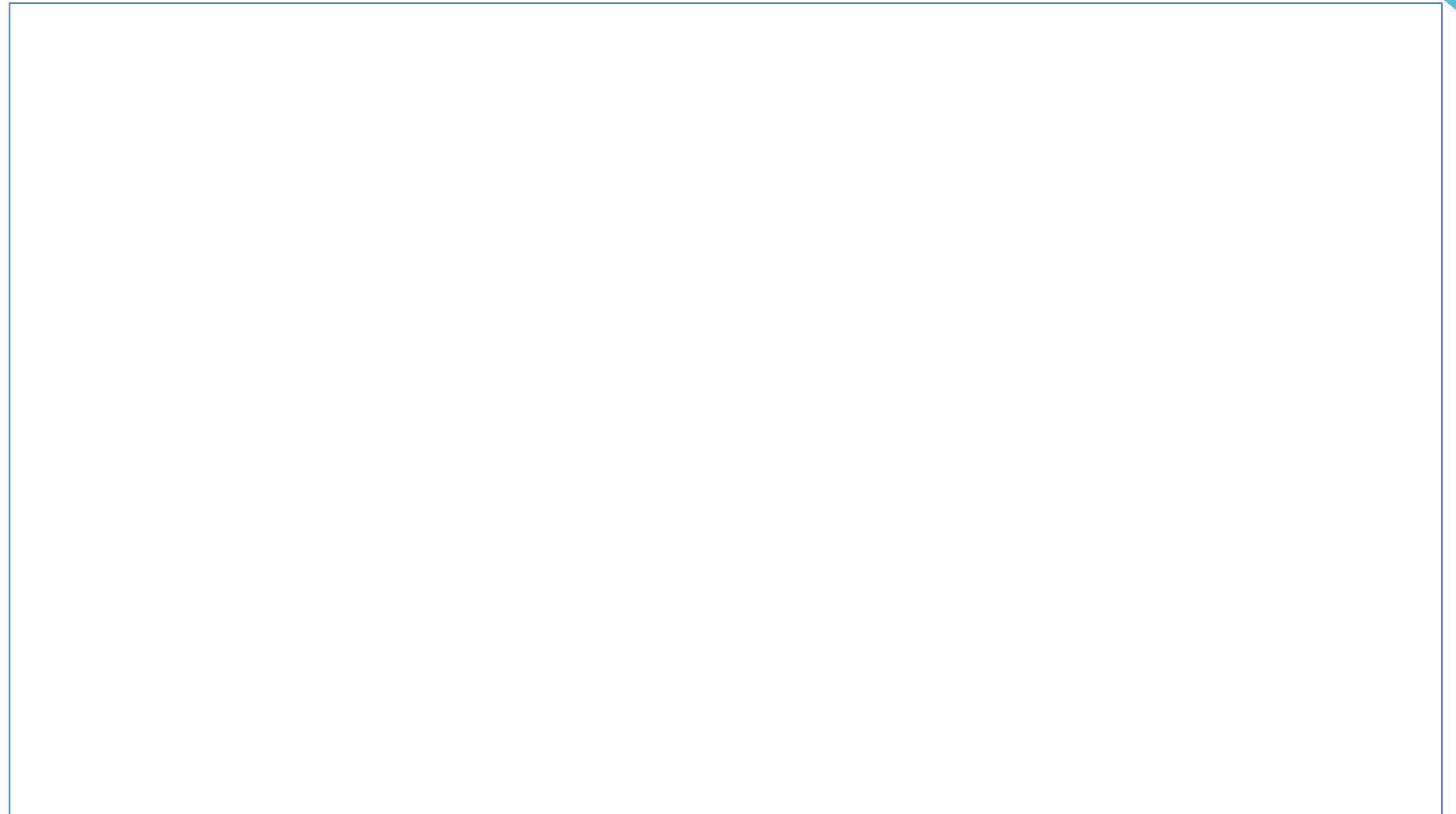
Process Evaluation

- Focuses on activities that were done/program implementation
- Answers questions: Who, What, Where, When, and How?
- Process=Activities
- Types of process evaluation and evaluation questions
 - Fidelity
 - Dose delivered
 - Dose received
 - Reach
 - Recruitment
 - Context



Outcome Evaluation

- How will individuals, groups, organizations benefit from your work?
- Change in individuals, groups, organizations, social conditions
- Answers questions: What were the results?
- Outcomes=Benefits
- Evaluation designs



Evaluation Designs

- Post-test only
- Pre-test – Post-test
- Pre-test – Post-test – Follow-up
- Control/Comparison Groups



Impact Evaluation

- Assesses the net effect of a program by comparing program outcomes with an estimate of what would have happened in the absence of the program.
- Employed when external factors are known to influence the program's outcomes, to isolate the program's contribution to achievement of its objectives.

<https://www.worldbank.org/en/news/video/2016/06/08/what-is-impact-evaluation>

<https://www.usaid.gov/project-starter/program-cycle/project-design/project-evaluation-overview/impact-evaluation-decision>

Impact Evaluation

Measures

- Broad, larger-scale effects of programs/initiatives
- Improved service coordination and integration
 - less duplication of services
 - greater information sharing among systems at both the management level and among direct service providers
 - increased collaboration among agencies/providers
 - blending funding/changes in funding streams

Cost Outcome Evaluation

- Cost outcome evaluation usually involves measuring costs along with assessments of program outcomes or benefits
 - Cost effectiveness focuses on the extent to which the outcomes produced by the program and measured separately is worth the cost of the program.
 - Cost benefit focuses on the extent to which other overall benefits derived from the program -- beyond those measured as cost outcomes -- is worth the cost of the program.

Cost Outcome Evaluation

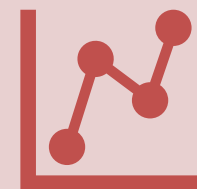
- For example,
 - a cost-effectiveness analysis might examine whether a 20% reduction in adult depressive symptoms is worth the cost of delivering the program;
 - a cost-benefit analysis might examine whether other benefits associated with a 20% reduction in depressive symptoms – such as reduced hospitalization, sustained employment, reduced suicide, etc. –is worth the cost of the program.

Types of Evaluation Data



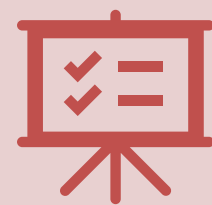
Qualitative

Words, descriptions, reports of experiences
Provides information about the qualities of something, and therefore it is qualitative



Quantitative

Numbers, counts, ratings, ratios, costs
Provides information about the quantities of something, and therefore it is quantitative



Most program evaluations mix qualitative and quantitative data and the methods used to gather such data; these are called mixed methods evaluation designs

Evaluation Questions

- Foundation of a successful evaluation
 - Define the topics the evaluation will investigate
 - Guide the evaluation planning process
 - Provide structure to evaluation

1. Limited in scope
2. Clear
3. Researchable
4. Useful

https://americorps.gov/sites/default/files/document/2015_04_16_AskingtheRightResearchQuestionsSlides_ORE.pdf

Evaluation Questions: Examples

Example 1: Questions from an evaluation of an HIV service provider support project

From: “To what extent is the project relevant?”

To:

- Is the training and technical support to HIV service providers being delivered as intended according to project design?
- Does the training and technical support to HIV service providers meet the needs and priorities of project stakeholders?
- What are the financial and organizational characteristics, organizational mission, and coverage area of HIV service providers who have received the project training and technical assistance?
- Have the appropriate (as defined in project design documents) HIV service providers received the project training and technical support?

Evaluation Questions: Examples

Example 2: Questions from an evaluation of a youth employment project

From: “To what extent is the project effective in meeting its objectives?”

To:

- To what extent did the intended outcome of increasing youth employment in targeted regions occur over the course of the project?
- Did employment outcomes differ by region or gender?
- Did the project meet its targets in training youth in employable skills? Why or why not?
- Are key stakeholders satisfied with the performance of the implementer in training youth in appropriate skills? Why or why not?

Brainstorm Your Evaluation Questions

Take a few minutes to brainstorm and jot down your evaluation question(s).

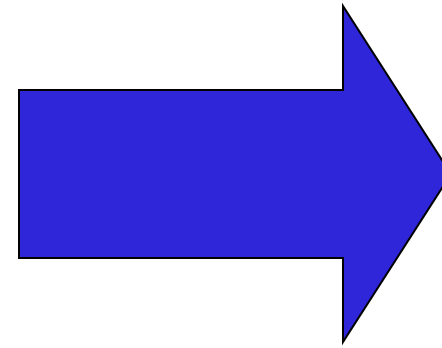
Keep the guidelines in mind.

1. Limited in scope
2. Clear
3. Researchable
4. Useful

Logic Models

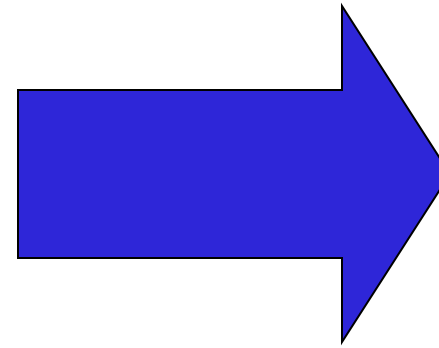
- A picture of how your program works-the theory and assumptions underlying the program.
- It provides a roadmap of your program, highlighting how it is expected to work, what activities need to come before others, and how the desired outcomes are achieved (Kellogg Foundation, 2000).
- Helps to determine the extent to which your planned activities lead to your desired outcomes?
- Allows you to specify:
 - Project resources available to address a specific problem/need
 - Planned activities
 - Outputs
 - Desired Outcomes

Linking Activities to Outcomes



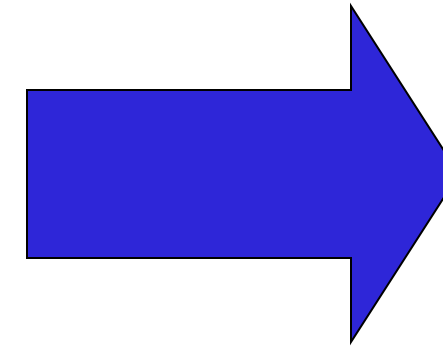
Inputs

Resources a program uses to achieve program objectives.



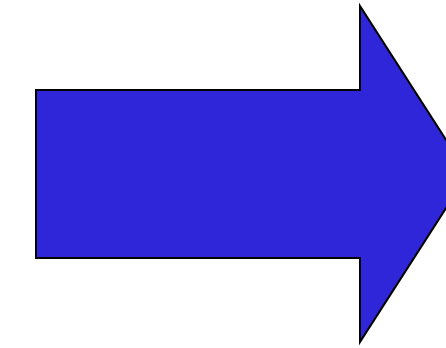
Activities

The service that a program provides to fulfill its mission.



Outputs

Products of program activities. Program outputs should produce desired outcomes for the program participants.



Outcomes

The benefits for participants during or after their involvement with a program (knowledge, attitude, skills, behaviors).

Inputs / Resources

- Current resources available to support your program
- Common types of resources include:
 - Human
 - Financial
 - Organizational
 - Community
 - Technology/Equipment/Materials

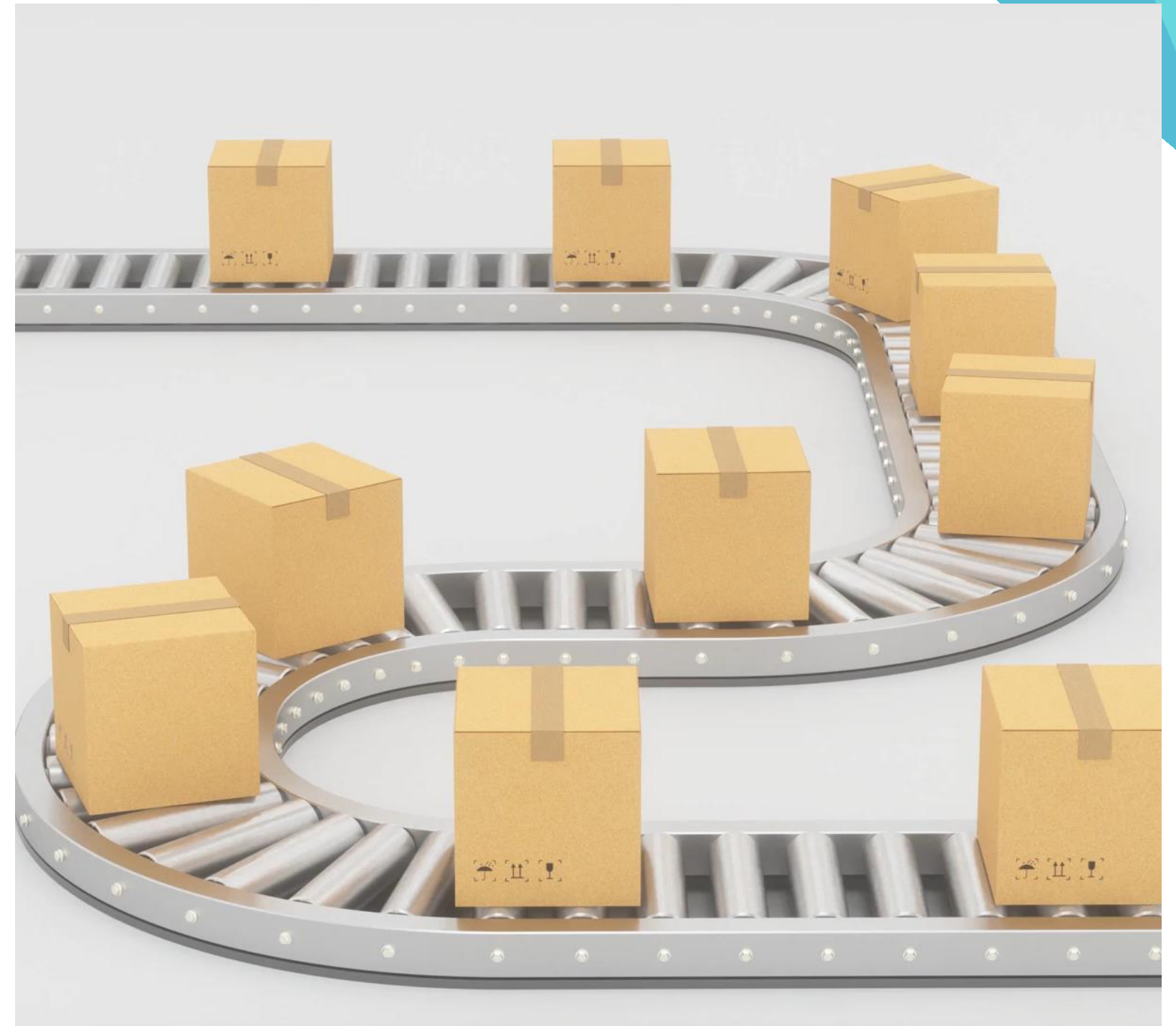
Program Activities/Strategies

- Represent the interventions – events, tools, processes, and actions – that are used to bring about the intended program outcomes
- Common activities are:
 - Developing products
 - Providing services
 - Engaging in policy advocacy
 - Building infrastructure



Outputs

- Also known as deliverables or products – represent the direct products of a program and its activities
- Outputs produce evidence of service delivery and the work of the program/initiative
- Program activities should be linked to tangible and specific outputs but are not themselves the changes you expect the program will produce



Outputs, cont'd

- Helpful to express outputs in terms of size/ and or scope and frequently include quantities or reflect something new
- Examples can include numbers and descriptions of:
 - Classes taught or meetings held
 - Materials developed or distributed
 - Participants served
 - Focus groups held
 - Curriculum developed
 - Partnerships/Collaborations formed

Outcomes

- May also be called results, impacts, or objectives
- Represents the changes expected to result or the difference that is made from a program/initiative and its activities
- This includes changes among clients, families, consumers, communities, systems, or organizations
- Answers the question “What difference does the program make?” or “What does success look like?”

Outcomes, cont'd

- Outcomes can reflect changes in:
 - Learning (new knowledge, skills, attitudes)
 - Action (changed behavior, practice, policies)
 - Condition (human, economic, environmental)
- Important to clarify who or what will experience the intended changes
 - Individual
 - Family or community
 - Systemic Outcomes (e.g., greater coordination among partners in a system)
 - Organizational (e.g., increased efficiency, staff motivation)

Outputs vs. Outcomes

- Outputs are direct and measurable products of a program’s activities and services
- Outcomes are the results or impact of the activities and services. Often represent the results of multiple outputs.

Outputs	Outcomes
# of children receiving 12 trauma-informed therapy sessions	Participating children show decrease in their trauma-related symptoms
Board job descriptions developed	Board members understand their responsibilities
# of meetings held with legislators	Increased legislators’ awareness of policy options

Criteria for Selecting Good Outcomes

- Measurable
 - Outcomes/objectives need to be quantifiable
 - Outcomes/objectives need to be operationalized and specifically defined

Criteria for Selecting Good Outcomes

- Realistic
 - Does the program have a realistic chance of changing/influencing the desired outcomes/objectives? Are the desired outcomes/objectives grounded in the literature?
 - What does the literature say about the outcomes/objectives?
 - Have similar programs demonstrated similar outcomes/objectives?
 - Assess the ability of the program to change multiple behaviors.

Criteria for Selecting Good Outcomes

- Feasible (doable)
 - Test evaluation plans against real world staff constraints.
 - Can staff manage collecting and reporting the data?
 - Is the data something you can actually collect (access to data sources)?

Criteria for Selecting Good Outcomes

- Useful (Helpful)
 - Gear evaluations toward program and institutional needs. This helps to determine if you are influencing the right behaviors.
 - Does the data inform program and policy decisions?
 - What does the data tell you about the program?

Not all outcomes occur at the same time, and some are necessary before others can happen

Often helpful to distinguish between:

Short-Term: what do you **expect** to change immediately or in the near future (e.g., changes in learning)

Intermediate: what do you **want** to occur next (e.g., changes in behavior)

Long-Term: what change do you **hope** will occur over time (e.g., changes in conditions)

Chain of Outcomes

Short-term Outcomes

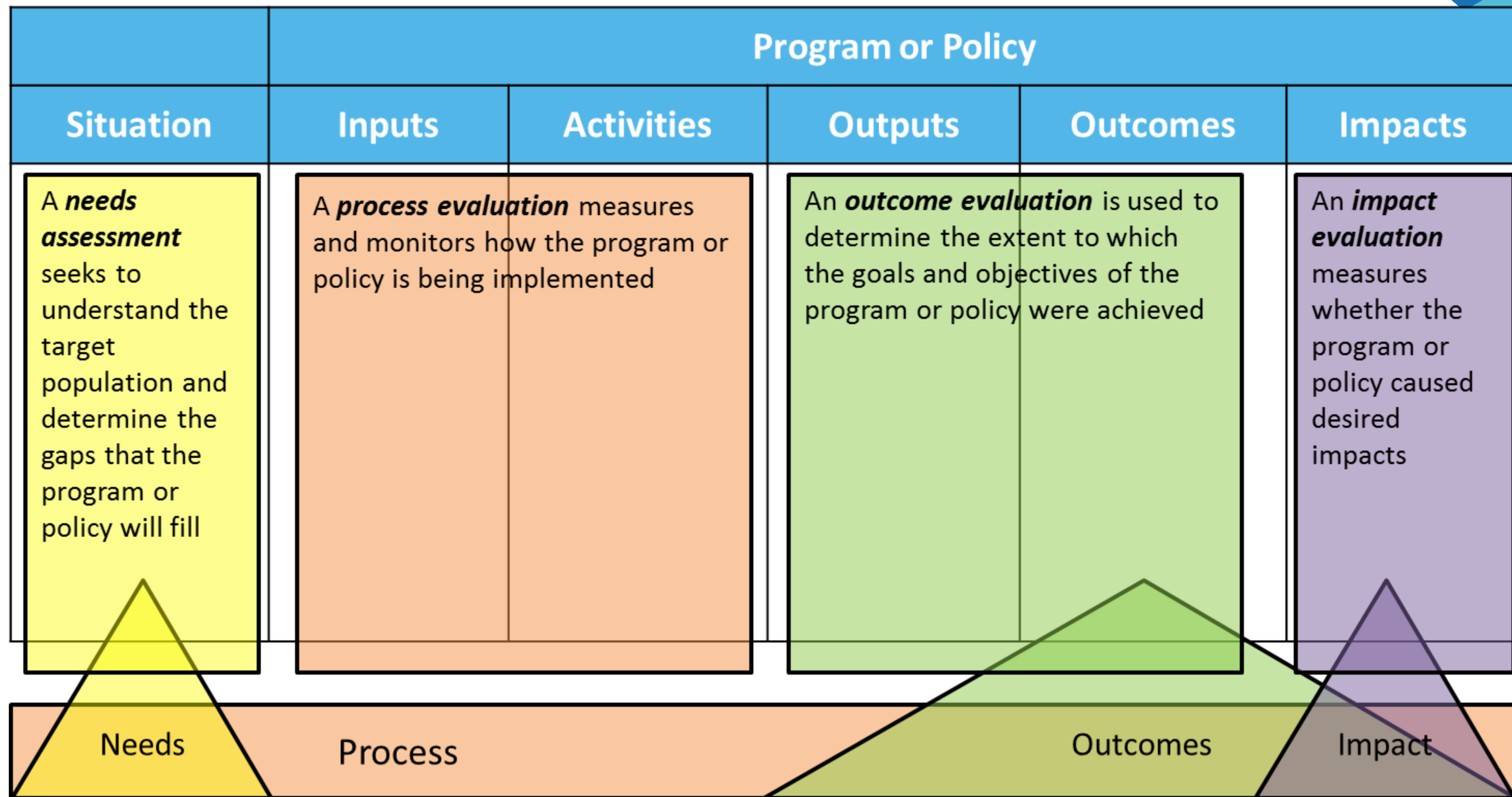
What do you expect to change immediately or in the near future (e.g., changes knowledge)?

Intermediate Outcomes

What do you expect to change after a short-term outcome occurs (e.g., changes in behavior)?

Long-term Outcomes

What do you hope will change over time (e.g., changes in conditions)?



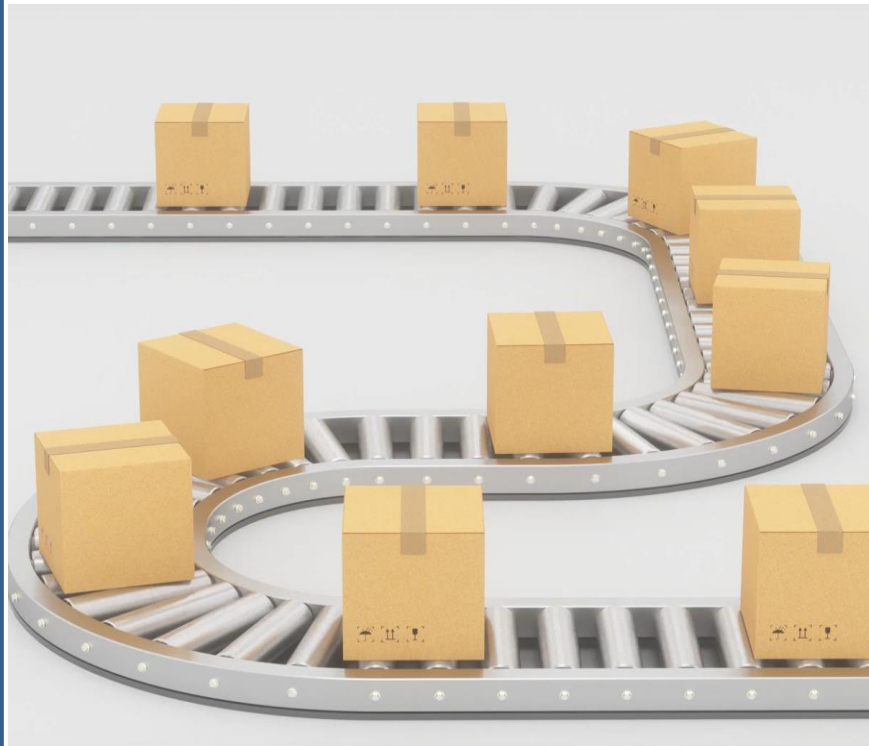
Logic Model Exercise

Developing a logic model for the program/strategy you plan to evaluate

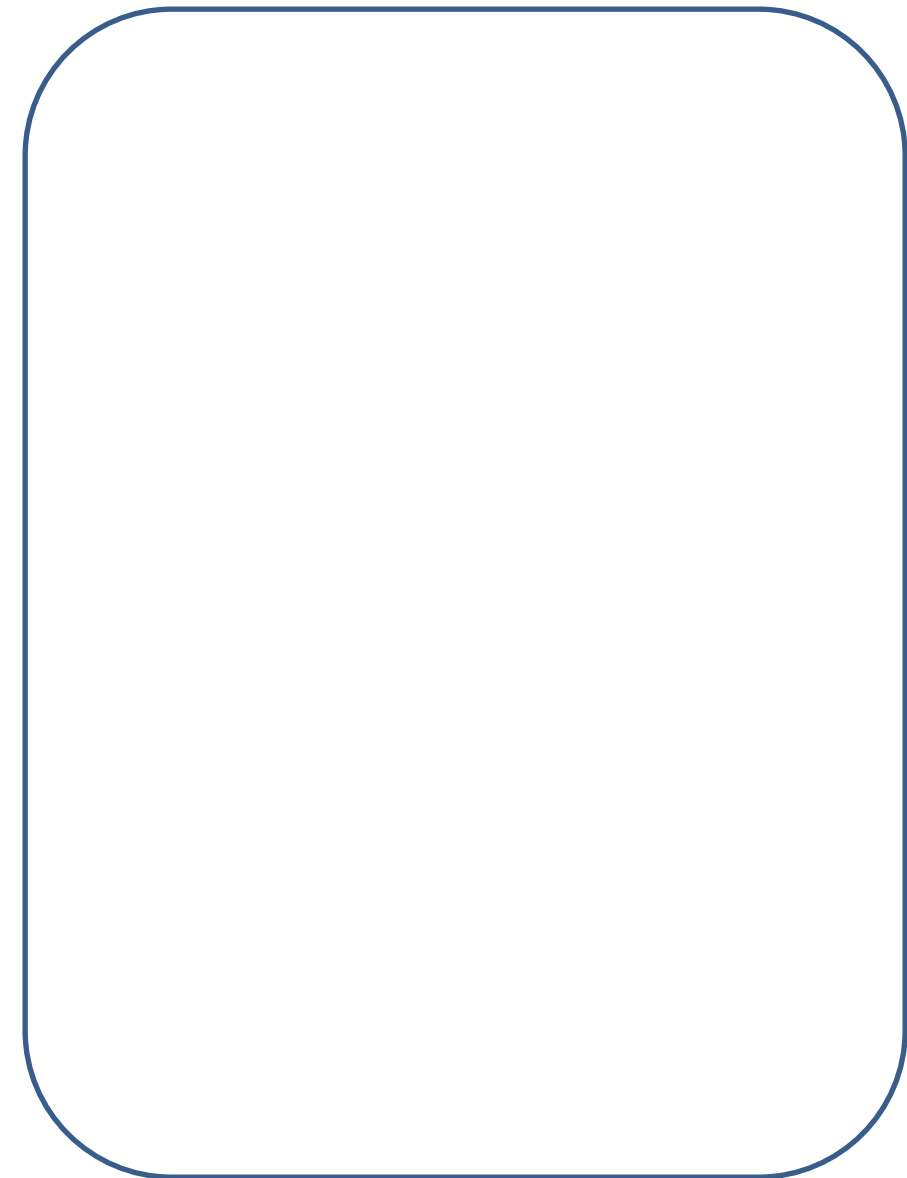
Activities /Strategies



Outputs



Outcomes



CLAS Implementation and Evaluation Framework

Seven Steps for Implementing and Evaluating the National CLAS Standards

- Assess organizational and community needs
- Set goals and objectives
- Develop a logic model
- Identify evaluation research questions
- Choose measures
- Design evaluation and collect data
- Share finding and make changes as part of CQI

https://www.minorityhealth.hhs.gov/assets/PDF/Evaluation_of_the_Natn_CLAS_Standards_Toolkit_PR3599_final.508Compliant.pdf

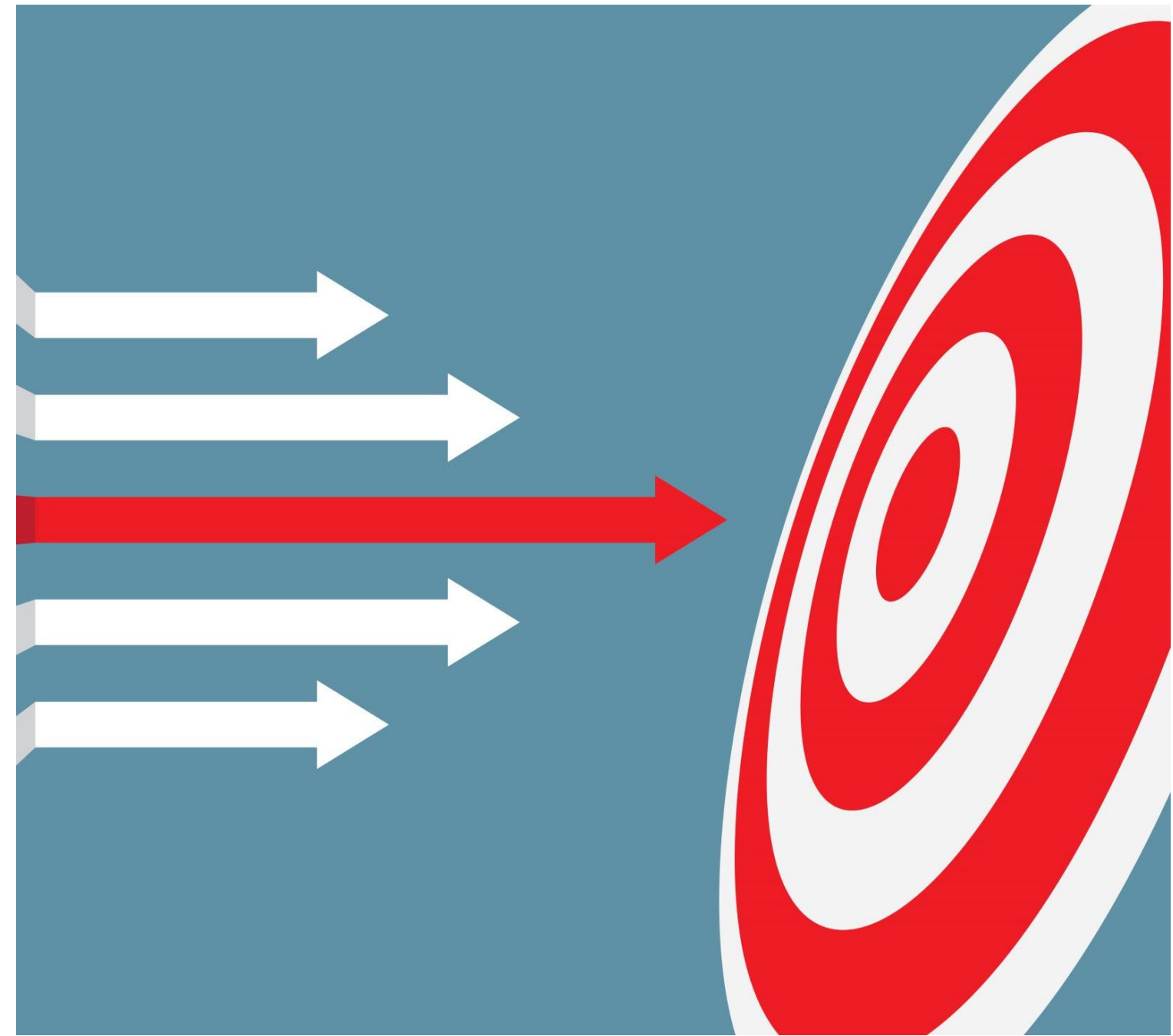
Assess Community and Organizational Needs

- Identify the problems your clients, patients, and their families (communities) have in accessing high quality services and supports.

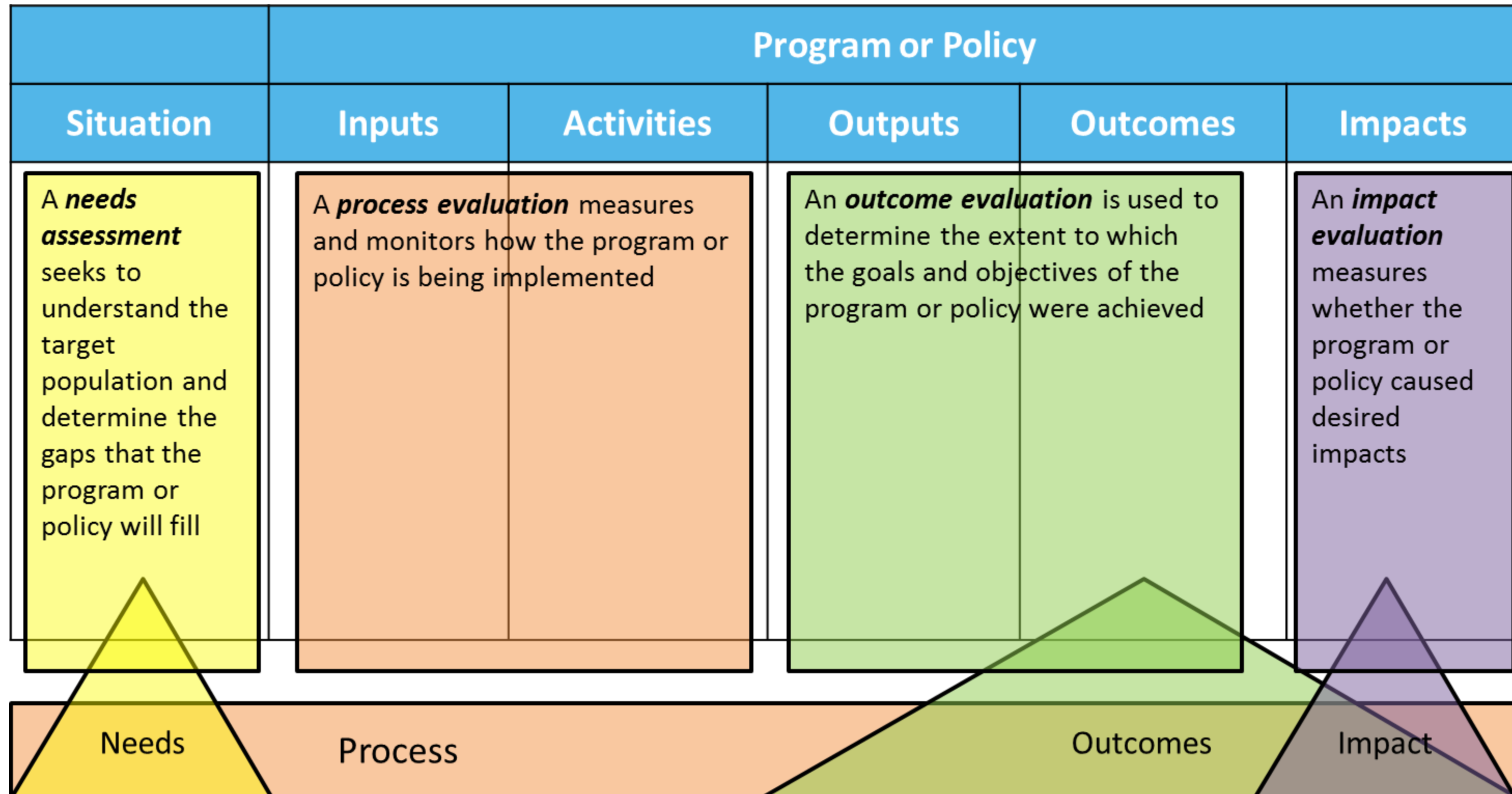


Set Goals and Objectives

- Use needs assessment data to set goals and objectives



Develop a Logic Model



Identify Evaluation Research Questions

- Process Evaluation Questions
 - Fidelity
 - Dose delivered
 - Dose received
 - Reach
 - Recruitment
 - Context
- Outcome Evaluation Questions
- Impact Evaluation Questions

https://www.minorityhealth.hhs.gov/assets/PDF/Evaluation_of_the_Natn_CLAS_Standards_Toolkit_PR3599_final.508Compliant.pdf

Choose Measures



Design Evaluation and Collect Data



Share Findings and Make Changes as Part of CQI

CLAS Theme 3: Engagement, Continuous Improvement, and Accountability (Standards 9-15)



Health Equity Plan Evaluation Examples

Health Equity Plan: Example

HEALTH EQUITY IMPLEMENTATION PLAN

NAME OF AGENCY: XXXX

GOAL: Provide effective, equitable, understandable, and respectful quality care and services that are responsive to diverse cultural health beliefs and practices, preferred languages, health literacy, and other communication needs (Principal Standard).

CLAS Standard # 1: Provide effective, equitable, understandable, and respectful quality care and services that are responsive to diverse cultural health beliefs and practices, preferred languages, health literacy, and other communication needs.

STRATEGY	MAJOR TASKS	PERFORMANCE MEASURE	IMPACT OR RESULT	ACCOUNTABILITY	TIME LINE
[Modify all assessment and intake forms to be inclusive of gender identity and sexual orientation]	<p>Conduct a readiness assessment with staff to assess their current understanding of this work]</p> <p>Identify key stakeholders/departments for this work.</p> <p>Identify best practices in caring for an inclusive patient population</p> <p>Modify the pre-existing fields about sex/gender/ and sexual orientation to be inclusive of all recognized genders and sexual orientation in the healthcare software</p> <p>Create a comprehensive training module to educate staff on best care practices]</p>	<p>[Increase number of transgender patients receiving services at the hospitals by 25% in one year</p> <p>Have visible postings and policies welcoming LGBTQIA patients/companions.</p> <p>Collect appropriate data on both the patient's current gender identity as well as the patient's sex assigned at birth in a sensitive manner</p> <p>Number of staff trained during the roll-out process of the education modules]</p>	<p>[Create a welcoming environment that is inclusive to all patients</p> <p>Provide equitable care for all gender identities or expressions]</p>	<p>Position: [Regional Health Equity Program Coordinator]</p> <p>Department or Committee: [Center for Health Equity; CLAS workgroup]</p> <p>Reports to: [Vice President of Community Health & Well-Being]</p>	<p>[12 months to develop the training and have all staff trained and modify the fields in EPIC and Meditech]</p>

Questions?



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