Overview

Evaluation is a systematic method for collecting, analyzing, and using data to examine the effectiveness and efficiency of programs and, as importantly, to contribute to continuous program improvement (see Appendix A for key definitions). CDC has a deep and long-standing commitment to the use of data for decision making, as well as the responsibility to describe the outcomes achieved with its public health dollars. When programs conduct strong, practical evaluations on a routine basis, the findings can both meet accountability mandates as well as improve program effectiveness.

In an effort to bring greater consistency to the use of evaluation for these purposes, evaluation experts around the Agency developed a set of recommendations to inform evaluation planning and implementation. The goal is to increase the use of evaluation data for continuous program improvement Agency-wide. These are recommendations and not mandates because our programs vary so much in purpose, funding, and history. It is expected that the leadership of Centers, Divisions, and large programs will seriously and systematically consider which of these guidelines and recommendations are most important to improve evaluation capacity and the quality of program evaluations in their own organizations.

Why are these guidelines and recommendations needed? Although program evaluation has always been a respected component of public health practice, the ability to conduct meaningful program evaluations has been constrained by wide differences in expertise, resources of programs, and commitment to evaluation. Unfortunately, as the accountability environment has intensified at all levels of government, public health programs often find themselves unable to make a persuasive case for the efficacy and effectiveness of their programs. Likewise, in an environment of scarce resources, we need more and better information about which interventions and approaches, of the many options open to us, are best suited to the problem. Strong program evaluation can help us identify our best investments as well as determine how to establish and sustain them as optimal practice.

While the emphasis is on CDC practice, most of these recommendations, when implemented, will improve the ways in which partners, grantees, and community-based organizations evaluate and improve their program efforts as well.

1. Recommendations for CDC/OD for Enhanced Evaluation Training and Support

To support improved evaluation capacity of CDC programs and partners, the CDC/OD, and especially the Office of the Associate Director for Program, should[1]:

1.1. Revive the Public Health Service (PHS) evaluation set-aside competition, or equivalent, as a source of funding for evaluation projects and other capacity building initiatives.*

1.2. Create an evaluation fellowship and recruit and train a pool of evaluation fellows to expand the capacity of programs and CDC to conduct evaluation and increase its usefulness and impact.*

1.3. Create an agency-wide evaluation experts group to serve as a resource and to advise, support, and monitor progress on the use of evaluation at CDC.*

1.4. Designate an Agency-wide organizational focal point and champion for evaluation and program improvement who actively engages key CDC players, such as the Excellence in Science Committee, Office of the Associate Director for Science and Office of the Associate Director for Policy among others, to increase understanding of and gain support for improving evaluation capacity/practice.*

1.5. Coordinate creation of an expedited clearance process for evaluation-related data collections under the Office of Management and Budget's (OMB's) Paperwork Reduction Act.*

1.6. Maintain/upgrade the CDC evaluation Internet site (www.cdc.gov/eval) and supplement with a related intranet site, including, among other resources:

    1.6.1. Creating a one-stop shopping online directory of evaluation resources developed by CDC programs, for easy access by partners, grantees, and the public.

    1.6.2. Maintaining updated inventories of job descriptions for evaluation positions that can be used in recruiting and hiring evaluators, and sources for recruiting evaluation staff those programs can draw on when hiring.*

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[1] Recommendations with an asterisk (*) are near completion or have been completed by the Office of the Associate Director for Program (OADPG), often in coordination with the Office for State, Tribal, Local, and Territorial Support (OSTLTS).

1.7. Expand evaluation offerings within CDC University (i.e., creation of a strong "evaluation track" for evaluators at all levels of expertise).*

1.8. Ensure that "immersion" fellowship programs (e.g., Epidemic Intelligence Service (EIS), Public Health Prevention Service (PHPS), Preventive Medicine Residency and Fellowship (PMR/F), Public Health Associate Program (PHAP)) and other training and development efforts (i.e., Project Officer of the Future) include strong program evaluation training modules.*

1.9. Use technology, such as webinars and podcasts, to broaden the reach of evaluation forums, seminars, and other CDC evaluation resources.*

2. Overarching Recommendations for Centers, Divisions, and Large Programs

The following are overarching recommendations for CDC's National Centers, Divisions, and large programs. They should:

2.1. Assure sufficient evaluation capacity and devote sufficient resources[2] to successfully implement their priorities among these recommendations.

2.2. Have an evaluation plan for examining their own efforts to achieve health impact, apart from and in addition to the evaluations of funded recipients' performance.

2.3. Ensure evaluation findings are timely and relevant, so as to maximize their use in the organization's strategic planning, budgeting, and priority-setting processes.

2.4. Track/demonstrate the use of evaluation findings for program improvement for maximum health impact.

2.5. Ensure that evaluation findings are easily accessible to users, major constituencies, and stakeholders.

2.6. Designate a point of contact as a focal point, champion, and resource for evaluation and performance measurement within the organization, at least at the Center level and preferably at the Division level.

2.7. Ensure that new public health programs or major health initiatives present an evaluation plan/approach that includes evaluations across the lifecycle of the effort so that findings can be deployed for program improvement even in early stages.

2.8. Ensure that program-specific evaluation plans are developed along with, informed by, and complimentary to the organization's strategic goals and objectives, as much as practicable.

2.9. Involve evaluation staff early in the development of new FOAs and large contracts to ensure that evaluation is best positioned to inform program improvement and accountability, including making these roles explicit in job descriptions and Performance Management Appraisal Program (PMAP) plans for evaluation staff.

2.10. Coordinate and communicate about evaluation efforts across CDC organizational units with overlapping or complementary missions.

2.11. Ensure a process for tracking how evaluation findings are used by a program and the impact of evaluation findings on program decisions and changes.

3. Recommendations for CDC's Funding Opportunity Announcements (FOAs)

In their FOAs, CDC's National Centers, Divisions, and large programs should:

3.1. Specify how the funded effort contributes to the health priorities/strategic plan of the program and the Division in which it is housed.*

3.2. Use a logic model or other method of presentation to present a uniform set of outputs and the short-, mid-, and long-term outcomes that the funded recipients are expected to achieve. It is understood that the specific outputs and outcomes and how proximal or distal they are will vary by the program.*

3.3. Specify outcome measures that all recipients must report on (and/or make creation of such a list an early collaborative effort with funded recipients).*

3.4. Provide standards, definitions, and suggested format(s) for reporting results (and/or make agreement on these an early collaborative effort with funded recipients).*

3.5. Indicate which populations are disproportionately affected by the health issue and whether they are being addressed or targeted by the funded program, with special attention to vulnerable populations and people with disabilities.*

3.6. Match evaluation designs and methods to the size and scope of the funded initiative, purpose of the evaluation, and capability of the funded recipients.*

4. Recommendations for Applicants/Funded Recipients Related to Funding Opportunity Announcements

Organizations applying to CDC FOAs should provide an explicit evaluation plan that includes:

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[2] The recommended percentage of resources to be devoted to evaluation will vary by the size of the program and the nature and purpose of the evaluation. Recommended percentages in the literature vary from 3% to 10% of program budget.

4.1. Clarity on the intended activities/outputs, and short-, mid-, and long-term outcomes of their health promotion effort (using a logic model or other method of presentation).

4.2. Plans for dissemination and use of evaluation findings to maximize program improvement for health impact.

4.3. The number and capabilities of staff assigned to evaluation and performance measurement (although the number and type may vary with the level of grantee capacity).

4.4. Plans for the engagement of stakeholders in helping shape the evaluation and measurement design.

4.5. Clarity on evaluation and measurement design and data collection sources and methods.

Appendix A: Key Definitions

- **Accountability:** The responsibility of program managers and staff to provide evidence to stakeholders, as well as authorizing and funding agencies, that a program is effective and in conformance with its expectations and requirements.
- **Activities:** The actual events or actions that take place as a part of the program.
- **Data collection method:** The way facts about a program and its outcomes are amassed. Data collection methods often used in program evaluations include literature search, file review, natural observations, surveys, expert opinion, and case studies.
- **Evaluation (program evaluation):** The systematic collection of information about the activities, characteristics, and outcomes of programs (which may include interventions, policies, and specific projects) to make judgments about that program, improve program effectiveness, and/or inform decisions about future program development.
- **Evaluation design:** The logic model or conceptual framework used to arrive at conclusions about outcomes.
- **Evaluation plan:** A written document describing the overall approach that will be used to guide an evaluation, including why the evaluation is being conducted, how the findings will likely be used, and the design and data collection sources and methods. The plan specifies what will be done, how it will be done, who will do it, and when it will be done.
- **Experimental (or randomized) designs:** Designs that aim to establish causal attribution by ensuring the initial equivalence of a control group and a treatment group through random assignment. Some examples of experimental or randomized designs are randomized block designs, Latin square designs, fractional designs, and the Solomon four-group.
- **Impact:** The effect that interventions or programs have on people, organizations, or systems to influence health. Impact is often used to refer to effects of a program that occur in the medium or long term with an emphasis on ones that can be directly attributed to program efforts.
- **Large program:** Any program that exceeds thresholds for program budget and/or percentage of the organization's budget. For purposes of these guidelines, the thresholds are $5 million and/or 20% of the organization's budget, respectively.
- **Logic model**: A visual representation showing the sequence of related events connecting the activities of a program with the programs' desired outcomes and results.
- **Outputs:** The direct products of program activities; immediate measures of what the program did.
- **Outcomes:** The results of program operations or activities; the effects triggered by the program. (For example, increased knowledge, changed attitudes or beliefs, reduced tobacco use, reduced morbidity and mortality.)
- **Program:** Any set of related activities undertaken to achieve an intended outcome. For purposes of these recommendations, "program" is defined broadly to include policies; interventions; environmental, systems, and media initiatives; and other efforts. It also encompasses preparedness efforts as well as research, capacity, and infrastructure efforts.
- **Stakeholders:** People or organizations that are invested in the program or that are interested in the results of the evaluation or what will be done with results of the evaluation.