



## **Program Evaluation at the Health Resources and Services Administration**

**Presented on February 16, 2016**

### **DCoE Program Evaluation and Improvement Training Series**

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**Presenters:**

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[Video Introduction]

[Slide 1] Title slide: Program Evaluation at the Health Resources and Services Administration.

Ms. Meehan: Hello. My name is Susanne Meehan. I am a senior program management analyst who provides contract support to the Defense Centers of Excellence for Psychological Health and Traumatic Brain Injury, or DCoE. I will be your moderator for this presentation, which is part of DCoE's Program Evaluation and Improvement webinar training series. The webinar is hosted using the Adobe Connect platform and the technical features are being handled by DCoE's webinar support team in Washington, D.C.

Today's topic is "Program Evaluation at the Health Resources and Services Administration." Before we begin, let's review some details.

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This presentation has been pre-recorded; however, there will be a live question-and-answer session at the end of the presentation.

Throughout the webinar, we encourage you to submit technical or content-related questions using the question pod on your screen. Your questions will remain anonymous, and our presenters will respond to as many questions as possible during the Q-and-A.

All audio is provided through the Adobe Connect platform; there is no separate audio dial-in line. Please note there may be delays at times as the connection catches up with the audio. Depending on your network security settings, there may also be some noticeable buffering delays.

Closed captioning is provided for today's event, and a transcript will be made available at a later date.

At the bottom of the screen is the chat pod. Please feel free to identify yourself to other attendees and to communicate with one another. Time is allotted at the end of the presentation to use the chat pod for networking.

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Webinar materials for this series are available in the files pod at the bottom left of the screen during the webinar. They are also posted in the Program Evaluation section of the DCoE website. Modules from the newly revised DCoE Program Evaluation Guide will be posted throughout 2016.

For information about other DCoE webinars and trainings, visit the Training section of the DCoE website by following the link on slide three.

[Slide 4]

We are pleased to offer continuing education credit for the 2016 Program Evaluation and Improvement webinar series. Instructions for obtaining continuing education through DCoE's collaboration with the Professional Education Services Group were made available during the registration process. Eligibility criteria for continuing education credit are presented on slide four. The length of this episode is 1 hour. Eligible participants will receive 1 hour of credit.

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If you preregistered for the webinar and want to obtain CE certificates or a certificate of attendance, you must complete the online CE evaluation. After the webinar, please visit [dcoe.cds.pesgce.com](http://dcoe.cds.pesgce.com) to complete the online CE evaluation and download your CE certificate or certificate of attendance. The CE evaluation will be open through March 1, 2016.

[Slide 6]

This webinar was introduced by Captain Armen Thoumaian. Captain Thoumaian is the deputy chief for program evaluation and improvement at DCoE. He is a scientist director in the

Commissioned Corps of the U.S. Public Health Service with more than 30 years of experience in health and mental health program design and evaluation. In January 2012, Captain Thoumaian joined DCoE to help design and implement program evaluation and improvement efforts in the Defense Department. He holds a B.A. in psychology and sociology, an M.A. in general experimental psychology, and a Ph.D. in social welfare and social work. Captain Thoumaian has also completed a National Institute of Mental Health fellowship in community mental health.

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I am Susanne Meehan, your moderator for today. I am a retired U.S. Air Force command chief master sergeant with over 28 years of military and civilian experience in the Defense Department. I have worked as a program manager for the National Guard Bureau Psychological Health Program, managing day-to-day activities for the program as a member of the Pentagon Joint Staff. I served as point of contact for the National Guard Bureau Legislative Liaison Office on Congressional Inquiries and Joint Action Staff Management System.

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This training will provide an overview of how program staff can understand and address service gaps for their programs and access existing community resources.

- Apply strategies to address common challenges that program staff encounter when seeking to establish an “evaluation culture”
- Explain how health program evaluation is conducted at this federal agency
- Identify important tools and measures used to track program evaluation accomplishments
- Recognize features and contributions of an evaluation culture to organization values and operations
- Develop the means to build internal evaluation capacity

[Slide 9]

Our distinguished guest speaker for today’s webinar is Dr. Sylvia Fisher.

Dr. Fisher’s presentation is on “Building an Internal Program Evaluation capacity at the Health Resources and Services Administration, or HRSA.”

CAPT Thoumaian will now introduce our special guest.

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Dr. Sylvia Kay Fisher is director of the Office of Research and Evaluation at the U.S. Health Resources and Services Administration. HRSA, an agency of the U.S. Department of Health and Human Services, is the primary federal agency for improving health and achieving health equity through access to quality services, a skilled health workforce and innovative programs. HRSA's programs provide health care to people who are geographically isolated, and economically or medically vulnerable. HRSA also supports the training of health professionals, the distribution of providers to areas where they are needed most, and improvements in health care delivery.

As former director of evaluation in the Child, Adolescent and Family Branch at SAMHSA, Dr. Fisher managed the national evaluation of the Children's Mental Health Initiative. She has co-authored 10 book chapters, more than 20 articles, and has conducted over 100 presentations in numerous academic and professional venues about evaluation, suicide prevention, lesbian, gay, bisexual, and transgender youth and families, and measurement of outcomes.

Dr. Fisher has taught graduate courses in measurement, evaluation and psychological assessment and served on organizational boards devoted to victims' services, child abuse prevention, treatment of domestic violence victims in the courts, and health services for LGBT populations. She was lead editor of the volume "Improving Emotional and Behavioral Outcomes for LGBT Youth: A Guide for Professionals."

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Thank you, Captain Thoumaian. I will start this presentation by stating that I have no financial interests to disclose, that I do not intend to discuss commercial products or devices, and that my views are my own.

[Slide 12]

Title slide: Office of Research and Evaluation (ORE)  
Health Resources and Services Administration

[Slide 13]

I want to begin by telling you a little about what we've done at HRSA. HRSA is a very important agency under the Affordable Care Act (ACA) that you've all heard about in terms of implementing a lot of activities associated with the funding designated for Health and Human Services around the implementation of ACA. As a part of that effort, it was apparent to management and administration that there was a significant need to have ongoing evaluation activities that would be continuously feeding information about what was happening in the field and all of our different grantee programs, as well as what was happening in terms of meeting our ACA goals, extending outreach to the public, and ensuring more service provisions for previously underserved populations. A part of this is due to having a visionary individual who was an administrator in HRSA at the time. That individual was Dr. Mary Wakefield. Dr. Wakefield basically realized it would be necessary to have an internal type of office that could guide the activities that go on in the agency around program evaluation.

This is a chart that gives you a sense of our particular office location. The larger office of the administrator houses several offices and the Office of Planning and Evaluation is a part of that. What's good about this placement is that it means that this role is integral to the decision-making at the executive and administrative level of a very large health agency. Instead of being placed sort of away from decision-makers who have the authority to implement changes around programs, we have been placed right in the center of the decision-making authority, to be able to make decisions about what could be done to improve, enhance, and sometimes terminate programs. Although that has never had to happen because we use the evaluation in ways to grow and promote programming rather than harm or in some way devastate programming.

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If you will notice, the Office of Planning, Analysis and Evaluation has a director, a deputy director, and several officers. The Office of Research and Evaluation is my particular office. You will notice that we have colleagues in three other offices. We work with them concurrently on many activities throughout the agency. The Office of Policy Analysis does analysis of how effectively the policies are being implemented around ACA at the local, state, and federal levels. The Office of External Engagement works with the General Accounting Office and also with the Office of Management and Budget, in order to make sure that all of our programs are implemented appropriately and that funds are expended appropriately. Also, the Office of Performance and Quality Measurement emphasizes program-level performance measures to enhance the programs' performance, as well as ensure that the budget has been expended and there is demonstrable evidence to justify continuing the budgets for programs at HRSA. The Research and Evaluation Office works on its own independent portfolio and also supports the efforts of all offices. They are a very good, collegial team and well managed by the director to ensure that there is a high-functioning team that provides information to the administrator and high-level, and also program-level decision-makers to improve programs.

[Slide 15] Title slide: Office of Research & Evaluation: Logic Model

I'd like to talk to you about an approach to setting up our office. We opened this office 5 years ago and we developed a logic model very early on. Our goal was to be able to highlight the important issues that we wanted to report our vision, mission and also our strategies, short and long-term outcomes that we wanted to achieve in our office. It is very rare when you have an opportunity to develop a brand-new office. Generally, you often have existing and disparate types of evaluation activities that are undertaken throughout an agency. Sometimes they are coordinated frequently and sometimes they are not. One of the reasons this office was housed within the Office of the Administrator was to coordinate these types of activities to be able to ensure that random and disparate types of activities that were disembodied from program decision-making and from a coordinated effort to deal with issues around evaluation. That was not going to happen. Instead, this was going to be the vehicle that would facilitate all of the good parts of decision-making, i.e. improving decision-making for administrators and also supporting programs that were widely disparate in achieving their program goals. Developing a logic model isn't always what's done for any office, but it seemed a little bit hypocritical to work with programs and help them develop logic models and not have one of our own. Therefore, this was a good exercise for a lot of reasons. It consists of a new team of new hires, including myself. This was not my first position in government, but it was my first time in this particular position at HRSA. A lot of the hires were new employees, some were new graduates from various masters and doctoral programs, and we had some very experienced evaluators as well. We want to build the team around a system of values and strategies to be able to implement what we wanted to do for HRSA. As a part of this, if you've done logic models before, you will know that a good thing to do is to identify your vision, mission, challenges, and strengths in the context that you are operating within. Our vision was to advance the HRSA mission and enhance agency and program-level decision-making through excellence in research and evaluations of services, supports and products.

Our mission was to conduct and ensure high-quality internal evaluation and research activities and ensure the integrity of data and reports, and continuously improve HRSA data through a client-driven and service oriented approach. You may have heard about the customer service model. We wanted to take a different approach. When you are an internal office in an agency,

you have a lot of constraints that are somewhat different from what an external evaluator deals with and what they have to bring to the table when working with an agency. Internal evaluators have even more significant trust issues, perhaps more than external evaluators. One of our goals was to have a client center rather than a customer-oriented type of approach to working with and within the agency. The reason we went with this model was a client-centered approach favors a long view of ongoing relationships. Not a short-term very small nominal interaction where you go in and out and finish a task and you no longer have a responsibility to the client. We wanted to grow that responsibility to the client, increase trust around our work and our relationship, and ensure the client was aware that we would always be available. Not only that, but that we would always be accountable. We would meet with you in your office, you meet in our office. That engagement changes the nature of the relationship when you are providing services within an agency.

Then, we spent time working on our values. I would suggest any group that opens up an evaluation office or that works on creating an evaluation team strongly considers what values you want to share, what values are driving your efforts, and what values you strongly want to keep at the forefront of all of your thinking and planning. We believe we were service-oriented, responsive, quality oriented, and reliable. We were continuously going to improve the quality of our services. We wanted to be able to mobilize resources, and that would include folks in our actual group, but also our colleagues and clients' teams. We wanted to be useful and utility focused. I have a long career in evaluation and there's nothing more dreadful than to spend a great deal of time producing a product that ends up on a shelf. That is one of the most frequently leveled criticisms against evaluation. I must say, sometimes it's been the case that that is what happens in agencies. If you create an entirely viable system around evaluation, however, it becomes responsive, imminent, immediate, helpful, useful, and something you want to continue to have available to you as a program person.

We looked at our various investments and staff experience and expertise, which was very nice a lot of public health emphasis and a lot of statistical experience. We looked at our staff time and the different types of capacities we had within the agency and spent time looking at what the sources of funding were for the programs we might be working with. We also looked at the contract portfolio for the agency. We looked at what that entailed around the topic of evaluation. We looked to see if we could identify other research and evaluation partners because we don't want to be the only go-to source. We want to work with other go-to individuals and professionals in the agency.

Then, we identified our constituencies. I strongly recommend this, because you may think on the surface it's very obvious who your constituents are, but this is not necessarily true. If you are a federal agency, your first client will be the president of the United States, but even more so the American public, Congress, your secretary of your particular department, all of the agencies in that department, particularly in an area like public health where there's a sustained effect and lasting permanence to some of your results in terms of how programs are funded and whether they continue to be funded, how they are shaped and what will happen if they are revised in some way. Your grantees are your primary audience and primary customers as well, because they represent the public you are serving. The programs you work with directly are your first-level customer or client. The public, media everything else has to be considered in some work that you do in the evaluation. It should be part of the thinking about how you will be sharing information.

We identified a series of strategies. One of the main ones you did do is developed a research

agenda and evaluation agenda. That was very useful. Number one, it gave you a more long-range vision about our activity so that you simply weren't reacting to situations that came up in critical mass. Sometimes because of a situational emergency, it gave us a vision for what we need to be accomplishing in a longer range to benefit the agency. We've been working on developing a complex data strategy around sources of data in the agency. Our focus is on how they are interlinked, how they should be interlinked, and what implications it will have for future different types of data undertaken by various programs. We have a continuous, evidence-based type of recommendation that we would generate from all of our efforts to inform and enhance executive and program-level decision-making. We trust you will do this for some time with quality and help us to figure out what we need to know about our program so it functions more effectively. We have also been developing and growing our publications and presentations. It is a very important part of getting the word out about the efforts at HRSA and it grows the professional staff.

With new office structures, there are always growing pains. There are protocols of engagement to be developed and sometimes there are issues around how you handle managing the flow of work. An important goal was to continue to educate our staff on a regular basis. There is continual change in evaluation. There are some things that are tried and true testaments of approaches, and then there are new and innovative approaches we want to make sure that everyone is up on so we can apply at any given time. We made sure that every step of the way we have continuous quality improvement process where we look to see how are performing, and how we can improve the performance.

[Slide 16] Title slide: A New Research & Evaluation Office

What are the challenges that surround a new research and evaluation office? It would be nice for me to sit here and say, there are none, but that would be incorrect. Also, I think it's best to identify these challenges. If you don't, some members of your staff will come to you and ask you or tell you about things that they are encountering. It is good to build that into all of your strategic planning as you move forward because this will ameliorate any potential concerns that might come up later. We have had great success with our staff and being able to do this. We had a new office that opened with very limited, agency-wide visibility. We worked to develop meet-and-greet opportunities and actually met with all of the larger offices in order to discuss what our services would be, and how we would make ourselves available to them.

Some of our other challenges were around the limited experience of some of our newer staff. Five years later, we don't really have that as a concern anymore. Currently, our staff is very well-acquainted with our programs and have many contacts throughout the agency; a point of pride for our office. I will be discussing the need for an agency-wide evaluation supportive culture and how it is a must have to be successful. Again, you don't want evaluation efforts to fail and you really want to bring everyone to a level where they value and support evaluation and in fact, seek it out. We've made very consistent efforts to improve the culture at HRSA around this, with great success. There are many programs that desire this type of information and if you can provide it in a low-cost, well-designed approach that they can tap into when there are decisions to be made, you become an important part of their team. We did receive a lot of work requests from the beginning on. It's hard to streamline and figure out which of those requests you have to attend to first. Sometimes the priority comes from the administrator's request and other times there are reporting needs, perhaps to Congress or other sources that you must respond to quickly. That has been a continuous part of our decision-making as we work through our portfolio on an everyday basis. I strongly advise anybody who works in a

research and evaluation office to account for this in their planning, both in the short and long-term. It should be a part of your strategic planning to the extent possible, and you should continuously be aware that you have to staff all of those requests. Your staff can easily become overwhelmed in a very short time. This is perhaps the greatest challenge of managing an evaluation portfolio with an internal agency, or with an evaluation office comprised of a rather small number of individuals who are very diligent, hardworking and committed to their efforts, but you don't want to burn them out.

In addition, we have complex data systems that are very difficult because it's very difficult at the grantee level to be able to collect all of the needed data from the individuals who receive services, and so there are susceptibilities around data systems as you would expect from any kind of grant program. We had support from the grant head, and that was a great opportunity for us. We had a clear vision that we had spent some time developing and vetted at various levels by various constituencies in the agency and received support for. We had and still have a very energized, committed staff with research and evaluation experience that has been growing regularly. In addition, I am very blessed to have a team that really shares the commitment to client service and to the agency mission and the vision that HRSA is trying to accomplish and the population that we serve. If you have that kind of staff commitment you will have tremendous success with evaluation teams. If they are well integrated into your programs, they will also take on the concerns that you yourself have as a program manager for your own constituencies that you serve. That shared commitment will be a huge facilitator in getting the kind of information you are seeking to have to make decisions about your program. After we did more and more work we were getting more and more positive word of mouth from our clients and that allowed us to continue to grow our efforts and also, our portfolio.

[Slide 17] Title slide: Importance of an Agency "Evaluation Culture"

I mentioned earlier about the importance of an agency evaluation culture. It is true many agencies view evaluation and evaluators in a negative way. Partly because our field is not always clearly understood by everyone in terms of what it can gain for a program. What gains can be made from evaluation? Evaluators sometimes are not as successful at explaining what it is we can offer our clients. We spent time producing materials, and also spending time conferring and meeting. When we don't have an activity at stake, to be able to talk about what we can provide and how we can inform decision-making within programs and also improve programs continuously. Even from the point of beginning at the logic model level when you develop a program all the way through, you make decisions about whether to continue funding a program. One of the ways we talk about programs is not to talk about destroying or changing them, but transforming them, rather, implementing programmatic transformation. It's a recasting that is much more positive and favorable and talks about the desire to achieve sustainability around programs. However, a lack of an evaluation culture can stagnate the efforts of any evaluation office to create changes in program effectiveness. Developing an evaluation requires effort by an evaluation team, if it's not already inherent in the culture of the agency.

[Slide 18] Title slide: A Supportive Agency with a Thriving "Evaluation Culture"

A supportive agency with a thriving evaluation culture has a number of characteristics. For example, it's open to accountability. Open to accountability meaning that you can take the good news and the bad news and you are able to use that information to make successive approximations to get to the goals you want and achieve for the improvement of programs. Openness to evaluation is something that if you are successful in developing the evaluation

culture, it becomes increasingly easy to the point where people come to you and say, “I want to go to your presentations,” and, “I’ve been hearing you are very helpful to us in the agency in terms of giving us information we can’t acquire through other means and that you are less expensive than using outside evaluators.” You are immediately responsive. That increasingly becomes and intensifies the openness to evaluation within your agency. In understanding the value and importance, we’ve made significant efforts about the types of activities we did to grow that understanding among our clients. We were successful at that and once that is launched, it is a continuous rolling phenomenon where you continue to succeed at instituting evaluation activities across an agency. Utilizing evaluation results for evidence-based decision-making levels is the primary goal of evaluation and an evaluation culture recognizes that. It doesn’t have to have a harmful type of toxic quality. Rather, a forward thinking innovative quality is what we are striving for in a successful evaluation culture responsive to change.

[Slide 19] Title slide: Components/Roles of an Internal Evaluation Office

The components and roles of an internal and valued office include building internal capacity, evaluating programs, creating and disseminating resources for the agency to use on a regular basis, providing on-call, technical assistance and expertise, and linking constituencies and clients to resources. We do that regularly.

[Slide 20] Title slide: Client Focused Collaborative Approach and Written Protocols

What we found was that there were challenges when you have an internal evaluation office. A typical challenge is that projects bleed. By that, I mean people come to you and say, “I really like this, and I’m asking you to do this activity.” You complete the activity and during the course of the activity you have success in meeting the client’s needs, and all of a sudden they have an add-on request. Now that you looked at the collective data from this group we want you to collect data from this part of our program. We would like to have some additional questions asked. What eventually happens to you if you are managing a portfolio and staff, is that your clients, and in your effort to be client centered, are asking you for more work that has not been agreed to or scoped out properly. Then, you do have many negative outcomes. Staff burnout, project bleed, which results in confusion about what the actual project questions were and what the evaluation was designed to do. Also, there is a lot of overwork for those who have to collect the data and analyze it. It becomes a very significant challenge.

In order to avoid that, we decided to adopt the model in sync with private sector contracting firms. We maintain our strong client orientation and our collaborative relationships with our clients, but we develop forms and scopes of work for internal work. A lot of internal offices are starting to realize if they don’t do this, agency work can overwhelm them and flood them with a lot of undefined activity that leads to poor evaluation. Our challenges were one of the reasons internal evaluations have not gotten the respect it deserves has been that when one of those situations occur, that project lead does ameliorate what the goals were. It makes it muddy, and you never really get to closure or completion of a task which is unrewarding to the staff who are involved and unsuccessful for the project and the program you’re working with. This leads to worker burnout and a degree of dissatisfaction and a sense of being overwhelmed.

We developed the following tools to manage work and requests pre-evaluation questionnaires where we talk to the prospective client and discuss what they want to find out about their program. What information they are looking for? Are they looking for someone to work on developing a logic model or a full-fledged evaluation, or an evaluation TA provided to grantees? We get all types of asks. Then, we have them complete the form and we have a series of

questions that are prepared to get a sense of the scope. After that discussion, we complete a full statement of work that has a lot of details around projected project deadlines, timelines, and projected activities as well as products and deliverables that will be shared with the client. We follow through those statements of work. It's not as extensive as a typical contract. It's very short, usually five to seven pages. It does outline the work and it states if your project is such that you would like to continue an add-on evaluation activity, we will ask you complete another pre-evaluation questionnaire so we can then fit your activity into our portfolio. The technical aspect has been a very good move because it requires your client to think through their own project. That is a huge help when you are in an internal office. It's easy to have someone knock on my door and say, "I would like to talk to about evaluating a program." I'm not sure exactly what it is I need to know if it's being implemented the way you planned. It's a lot whether I say, "Let's discuss some of what you would like to find out and what questions you have and what information you need and what information your constituencies need" and then I'd like you to go back to your team and write out what you think you want to find out.

Holding the client accountable leads to more respect for you as a professional in terms of working on evaluations and, number two, leads to a better conceived project. Number three, there's a greater degree of match between what the evaluation team does in the information needs the project staff are seeking. If you don't do this, I think you can have troubles at internal evaluation. I strongly recommend you have a scope of work approach. Even if you are internal and you think it's not what you are trying to do, you will keep some very significant control over how much your staff become overburdened. We also have a technical assistance request form for smaller projects, where people ask us to come and talk to the group about evaluation activities or the nature of a particular approach. Perhaps you can teach us about focus groups or doing a logic model or give a sense of statistical analysis that we should expect. We get a lot of smaller types of consultation activities.

Then, we hold ourselves accountable. We have regular progress reports on a monthly basis for longer-term projects, just like a contractor would. Again, just because we are internal to the agency doesn't mean we should not be held accountable to our clients, and we have a standardized format for those monthly progress reports, including progress made, challenges emerged, next steps, changes in deliverables, and timelines. All of those are accounted for in the progress report format. We continuously review our evaluation management protocols to ensure they are relevant and that they account for situations we may not have thought of. We have a small sub-team in our group that does it regularly. That's been successful.

[Slide 21] Title slide: ORE Portfolio: Major Areas of Responsibility

What types of activities do we get? I alluded to some, but I will be more specific about the portfolio. HRSA has a complex portfolio in general, with a great deal of variation in their various programs. We work a lot on the development and maintenance of infrastructure of measures. To see how, for example, rural areas have not received services and how their services can be mapped into such a program, that requires quite a bit of infrastructure efforts and development of those regions. We like to have at least at a minimum performance measures that tap into the effectiveness of those infrastructure development efforts. Internal evaluation studies, some of these are around operations within the agency. Are they working effectively within the agency?

For example, an internal program might be managing our contract portfolio managing our grant portfolio. These evaluation studies could also be known as the organizational development or organizational assessment studies, and any agency that can seriously consider its effectiveness

will do a number of studies like this to be able to enhance its internal performance so that the agency mission can be satisfied. We get a lot of requests on this line. It's a credit to the agency that there is a significant belief and significant desire to continuously improve internal process.

We manage evaluation contracts, not the entire portfolio for the entire agency. We do have our own small portfolio of contracts and we are regularly asked to review contract statements of work before they are competed. We sometimes serve on panels with technical expertise. Some of us are contracting the office of representatives and we provide that level of expertise around technical evaluations of potential proposals that come in under a contract competition. We are spending a lot of efforts now to do agency-wide capacity building around the field of evaluation. This has been very successful. People are coming to us and asking us to come and do internal presentations to increase capacity among their own staff around evaluation issues.

When we started off, we were not sure if we would have anybody attend the initial presentation. We ended up having about 35 and now we sometimes have as many as 85 or even more. That has been a very big plus. In fact, we have what we call the regulars people who say, "I'm not working as an evaluator, but I know the value of this in my portfolio and the clients and the grantees that I work with, I would like to learn more and more. You've done a good job of making us aware of how the evaluation helps our program." We bring in outside experts and we have some internal capacity to do presentations ourselves. We provide this ongoing consultation technical assistance approach. Some of this is around rapid evaluation response, which I will talk about shortly. We also do traditional research among complex data that the agency has in addition to the work and performance measures.

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Some of the work that you see here comes from our offices and involves the departmental level. HHS requires some research and evaluation activities. We also are responsible with liaisons for the department level around these research and evaluation activities. We are contacted regularly with requests around how the agency is performing on a number of its program activities. We report regularly on the activities that are being undertaken within the agency. We have the paperwork reduction act, the clearance process for all of the HRSA collection activities, which goes through the Office of Management and Budget (OMB). We have a very big responsibility there, a large portfolio of many clearances at our review. Our team provides very good support. Our lead has been a terrific liaison both to OMB, the HHS, and to our programs to ensure our data collection activities comply with the paperwork reduction act and also meet the evaluation goals that the projects are designed to achieve. In addition, our office has active portfolios in terms of participant privacy rights, welfare, and a large number of participants protecting the activity that we manage for the agency. It requires extensive effort and a lot of program monitoring. We also conduct ongoing activities and develop and revise infrastructure processes. Our team looks at our internal process to ensure on a regular basis, that we are meeting the expectations and needs of our constituencies. We finally conduct annual data collection activities.

[Slide 23]

What kinds of studies do we do? We design and conduct large evaluations and research studies. One of the challenges of an internal evaluation office is that you only have so many staff. An outside contractor can have a larger staff that is available and sometimes located around the nation to be able to meet your data collection needs. That's a certain advantage that

outside evaluators can offer to a program. We are more limited in that way. We have a smaller staff. We are based in the D.C. metro area in general, although we certainly have access to all the regions we serve in the United States and its territories. We do qualitative analysis quite often, as well as more traditional data analytic approaches and quantitative methods, and we do mixed method studies where we combine qualitative and quantitative efforts and yield information around both qualitative and quantitative efforts to inform each other. Sometimes the qualitative work informs the quantitative results we achieve and other times, it goes the other way. Our mixed method studies are a popular request. We help others design evaluation studies in our programs, even if we ourselves do not implement those activities. As we said, we manage some contracts and serve regularly on technical evaluation panels. We review deliverables and statements of work and on a regular basis.

[Slide 24] Title slide: Creating and Promoting a “Research and Evaluation Culture” and Building In-House Capacity

Some specific activities we do for that promotion of the research and evaluation culture include presenting six to eight evaluation chats. We call them “evalchats,” but we've developed them where they are regularly attended successfully with a lot of individuals who maybe had never even considered going to an evaluation chat in the past. We do an evaluation of each of those chats and complete a form so that we can get a sense of, number one, were they successful in meeting your evaluation needs and, number two, would you continue to come back. and what topics would you like to look at. We feel that since we are an office, it would be inappropriate for us not to evaluate ourselves and efforts on a regular basis.

We are now developing a very nice online project officer evaluation toolkit. This evaluation toolkit consists of several pages with many resources on important evaluation topics including various methods, as well as a number of evaluation philosophical approaches, such as rapid evaluation and we also have many visuals and graphics that are included to show and demonstrate particular points around content areas and evaluation. This evaluation toolkit will be launched in the next few months and we are excited about it. Evaluators are a professional group and project officers need to have some knowledge on a day-to-day basis to be able to work with the grantees. Grantees contact them and say, “I know you asked us as part of the funding to complete this part of the evaluation. We don't have that level of expertise available here, or we cannot afford to fund it. We need support.” Officers need to feed those inquiries on a regular basis, sometimes daily. Sometimes there were further queries to us, but they have so many of them in their portfolios that they need to be able to have some expertise they can reference. This toolkit, which will be web-enabled, will provide that to them. It's very useful and a product we are proud of. It's part of the promotion of that evaluation culture. We've got good feedback already from the testing we did with project offices.

We also have an annual research innovation symposium at HRSA. This is our third year. It's held in the spring every year. We started off thinking, “Was anyone really wanting to do a day committed to research at the agency?” HRSA is a service providing agency. We were not sure if people were sufficiently interested to commit that much time to research. What did we find out?

It was encouraging when you have an evaluation culture, people want to be a part of it. Every year our requests and our submissions to the symposium increases. We get more and more requests I should say, proposals to participate in the symposium, to report new and innovative practices that are grantees and that our programs are undertaking. It's been rather astonishing. We did not know the first year if we would succeed. We did it internally, in terms of the team

managing that process with the steering committee across the agency. Instead, it has grown and grown, and has led to cross agency collaborations and has led to a large general lifting of the boat, as they say, “belief in the value of research and also promoted research activities to be undertaken. “ A tremendous amount of respect has gone to the process from everyone involved in terms of, we can really inform our agency practices and programs by undertaking something that is, in addition to the regular work requirements, that will give us more information and contribute to the field in a larger way. Public health is an ongoing concern is now to be able to make new research findings to improve service delivery, and also serve our public in a more effective way. This has been a big success. We are in the midst of planning right now for the third year. And I've already received almost 100 proposals. We also have an evaluation listserv where people can ask questions or share resources. That's been nice to have that traffic as well. We feel that in 5 years we have come from no one being aware that there was the potential for an internal evaluation office, to an extensive evaluation effort and a new culture that is promising.

[Slide 25] Title slide: Evaluation: Small Projects/Technical Assistance (TA) and Consultation

Let me talk a little about the projects in assisting consultation. That part of the portfolio grows regularly. What we learned is that many people in the agency need more immediate rapid response evaluation research needs met that are not necessarily large-scale projects, that will help them considerably in meeting their program goals. The types of activities we get, we chart this, and I strongly recommend that if you are managing an office like this or are in an office like this, but you do the same thing we did which is create a spreadsheet and we ask all of our members of our office to please enter in that spreadsheet any activity that they did plus any feedback they may have received from that client and so we now have, in a very short time, over 160 requests. And what kinds of things are they asked to do? Can you help us devise the logic model? Can you conduct a focus group on the particular topic or interviews with some grantees or internal to our office so that we have a better sense of where the needs are, and where we are not meeting? Can you look at our performance measures? We need to improve our program and make them more effective and more operationally sound. Can you tell us how the statement of work will meet our evaluation needs? Can you write the task or edit it so we can ensure that when the evaluation is completed, it has met the information needs. Can you help us in our technical evaluation panel for that contract? Can you review a survey we are considering or that the grantee has developed and some data collection tools they have available at the grantee level or perhaps the program level. We do a lot of survey work. Internal and outside and we do have a lot of expertise in the office of ground survey development. We feel it's a big part of the portfolio and therefore we invest in Survey Monkey. It's a very low-cost investment. We get requests to develop the surveys and administer them or sometimes just administer an existing survey although we always do provide a free service, so to speak, an additional service and help people with surveys if we see challenges. We will format, test the questions that we have we will also field them as necessary and we can do analysis. We also reviewed draft articles and reports that people come to us and say, “Please take a look at this article, we want to submit it to a journal. Is it empirically valid, methodologically sound and rigorous enough? Do you have any suggestions about journals we could consider? This is a report we received from a contractor, could you take a second look here? We want to be sure this is what's being reported and is truly based on the evidence collected. We get numerous requests on a regular basis. Some come to us from word-of-mouth and some people say, “You talk to this person or that person.” We get a lot of repeat business, they are happy with our service and come back to us with other requests. Plus, they are a source of referral for ongoing business with other clients in the agency. This is a big part of your portfolio.

It's a good idea to consider whether your office has many large projects, contracted projects, that you are managing from the outside contractors, and if you have a lot of these small project consultation activities which may take up a great deal of the effort. If you don't monitor it, you lose track of what is happening you cannot document later on what your effectiveness has been in terms of reaching out to the agency. In the large and small ways that still have meaningful value.

[Slide 26] Title Slide: Research Analyses/Studies.

Some specific activities we did, just to give you a sense, is we manage a large contract for community health applied research network, known as the CHARN contract. It's been in operation for a while. To build capacity and to conduct patient centered outcome research, and improve patient care at federally supported community health clinics. This is a very research based type of effort with large implications for the health of the individuals that are mostly underserved in our health centers and it's been something we have managed from its initiation.

We are doing a number of research studies around us. We are sharing results with the involved health clinics to ensure that there are improvements to patient services. We conduct the symposium I mentioned earlier. We have the ongoing research agenda and we are now developing a research agenda for the entire agency as well. That is a big mission for us, and also, we are pleased to say we have people asking to participate in that process, instead of walking with the direction and saying you want to be involved. People come to us and say, "We want to have an impact with what the agency does and research across the agency." We seek out more and more opportunities for collaboration. We see that the health concerns of our constituencies may vary on terms of specifics, whether it is a organ donor client or a person with HIV. All of us are serving the same people with somewhat different and complex multifaceted conditions and health needs. We need to be working together to make sure that we can meet the needs of those populations.

We also are working with the patient survey for the community health centers. It's a big research study that we are doing some analysis and sub-studies from, and we work with the Center for Medicaid and Medicare Services. They have a data sheet that allows access to their data. We are conducting research studies. We don't want the research end of our portfolio to be ignored in favor of the more typical evaluation request we get. Instead we are growing and cultivating it in every way we can, and we feel we have been successful in increasing the viability of the research results for program planning and improvement across the agency in many ways.

[Slide 27] Title slide: Data & Performance Measures

The data and performance measures. Performance measures for some people are the bane of a grant program. They are the challenge. They are required of programs and program staff try very hard to do a good job in developing performance measures, but it's a challenging enterprise under the best of circumstances. We work with our colleagues who are in the performance measurement part of the quality office in the larger office that research and development is in. We take turns with each other on a number of tasks that come: developing and operationalizing particular constructs around performance measures; testing to see if a performance measure's effective; looking at data to see if we are receiving appropriate data and that it's been collected in the proper way; analyzing results; checking the ACA implementation

data and data needs. These are the kinds of issues we see as part of our portfolio, and we get a lot of requests about this. So many grant programs are required to include a performance measures as part of the budget submissions to congress and the president. This has been an area that has traditionally, in grant programs been challenging because of performance measures. Programs are being asked to develop them under a very short timeline, and many times, a program may be instituted, and they may have very little time to develop activities and identify the measures quickly and are to be able to issue a grant publicly, for competition. We work as much as we can to first, early on in the process, ask that programs come to us, and we will develop measures with you. We work on the quality improvement and existing measures, so we can make them more effective at helping the program manage decision-making and implementation issues that vary. Some of them are outcome based, and some are implementation based to work across all of those dimensions.

[Slide 28] Title slide: Navigating an Internal Evaluation Office

To think about a few, if you navigate an internal evaluation office, you work from within. You think of yourself as part of the solution. You think of yourself as part of the general team and the entire agency. You think of yourself as a shared mission serving our constituencies. Your role is one of the roles that helps us to get to that mission helps us to achieve the mission and ultimately improve conditions for the constituencies we serve building trust and ethical issues. I haven't talked about this enough but that's why this slide is here. One challenge of an internal evaluation team is ensuring the confidentiality of the results you get the data you collect, and the findings and recommendations you make. If you damage your trust in an agency, as an evaluator by sharing results inappropriately, or speaking out of turn about requests that have come to you, your credibility is not only damaged, it is a sustained damage. People talk about you in the cafeteria and say, "don't go to them. They share your stuff or they talk out of turn. They make critical judgments and they do damage. We realized very early on in the inception of this office that we were going to potentially have that challenge unless we made very strong provisions to avoid it. This is perhaps the most important thing I can say because technical expertise can find many individuals who can provide you with excellent technical expertise. If they do not appreciate that there is an ethical issue and confidentiality is primary, to building trust in the agency, it won't matter what the level of expertise is you will not receive referrals and people not come to you. I did not have to work very hard to get this across to people.

I have worked in situations outside of HRSA where there is less of this, and it can do irreparable harm to your entire evaluation program. If people know that you are going to be respectful and remain confidential about results, or that you will go to them and say, "I have been asked by X to share results and I need your permission. This is your call. I am referring this request to you. You make the decision if you want to share results," that behavior will go a long way. It will let you cultivate the sense of trust that is integral to an effective evaluation response relationship with internal clients. Of course, you don't want to be perceived as an arm or a puppet of the upper administration or management at any agency, even if they have come to an asked you to do a project. The typical axioms of integrity associated with the field of evaluation should be applied whether they are an internal or external evaluator. We regularly look at the association guidelines about ethical behavior. We discuss them. We discuss ethical issues that come up to us on a regular basis during the staff meetings. We allow time for that. People come to each other as colleagues and they come to me and each other and discuss potential areas of concern around integrity and ethical behavior. If you make that a priority, believe me, it will be noticed by your clients, if you don't make it a priority, believe me, it will be noticed your clients. Please pay attention to that part of your work.

[Slide 29] Title slide: Navigating and Internal Evaluation Office

Once again, there are some things to think about. Remember you have client orientation. Even if someone is a customer for short-term task, you must think about the fact that they come back to you and you want them to. You are looking for repeat business and sustained relationships. You are looking to have small teams sometimes and sometimes large models to address the incoming request, the hurry-up requests, the ad hoc teams that are put together for urgent requests (ad hoc within our own group but also with their clients). The best and most effective evaluations we found are when we have teams comprised of our methodologist and our public health experts and our evaluation experts with program members and staff who are equally invested in the success of the program greatly invested and who want to be able to ensure the evaluation meets their needs. It's a waste of their time if they don't get a product that they cannot use. By being a part of the process early on, we can calibrate our efforts to ensure the data they receive ultimately is what they need to hear or what they need to know to be able to manage the program. Prioritize, prioritize, prioritize work. It's a daily activity for a manager. It's also for any project manager. All the staff have their own projects they have to regularly prioritize and make decisions about what has to be addressed first, second, or third.

[Slide 30] Title slide: Training ORE Staff/Building Agency Capacity

If you are respectful of your staff not only will it build the agency capacity, but the staff capacity. We have evaluation tests, we prepared trainings, we have done internal groups on - - I've done training on how to run focus groups and do cognitive interviews and logic models. Others have done how to use programs for particular times of analysis. We've had a number of different opportunities for that training and staff development, plus the staff have the ability to be able to grow themselves in an education role, which is important for them professionally as well as when they work with their clients. In addition, some of our staff, all of our staff have been able to train themselves with certain methodology through the Evaluator's Institute and the Joint Program in Survey Methodology, both based in this area – the D.C. area where there are external trainings you can register for.. There are a number of opportunities that are available to provide evaluator is with ongoing continuing development. If your budget allows for I recommend you institute the opportunity for your staff. It's good for them to get refreshed in a new environment and new contacts with other individuals who are doing similar work, and they can learn from each other and grow as colleagues and maintain relationships after. It's amazing to me. My folks come back and they made friends from other agencies and they remain in contact. It's a really great thing to know you are part of an evaluation culture.

[Slide 31] Title slide: More ORE Team-Building and Staff Development

Remember to do strategic planning, even if it hurts. Strategic planning is a very difficult challenge when you are in the throes of your everyday life. As much as you can despite the fact we get the influx of many small request and sometimes urgent larger request. If you have a plan you can revisit it on a regular basis and accommodate. By the time I did my second year with the team, it was apparent we got many small projects, so we developed forms the TA alluded to earlier, and we allowed people's portfolio to have enough sufficient flexibility to account for those ongoing requests that were streaming in regularly. No matter if it's a short-term activity or not, you will take time if you do your job right.

Pay attention to how your team development activities go, differences in work style and personality. All of that has to be accounted for when you're building a successful evaluation team. Remember that it doesn't really matter if there's a lot of variation in personality as long as there is a commonality of value. The value of working with your clients, the client centered approach carrying a bunch of constituencies, believing an agency missions and having methodological rigor if all of those values are the same and consistent you can pretty much work very well with differences in personal style to achieve a successful team that meets the goals that you are trying to meet with your project. We supplement our teams with interns and we have details and they've been very successful. We have many individuals who ask us to join as a detail from other parts of the agency. They want to be increasingly exposed to and have the opportunity to work in evaluation. We consider that a testament to our efforts to build that evaluation culture, and I'm glad to say that that continuously happens.

[Slide 32] Title slide: Tracking Accomplishments

Track your accomplishments and those that are less successful. We do our surveys after evaluation chats, we maintain that report we have a form that we ask individuals who receive the consultation activities. It's nothing painful. If there's anything that everyone hates, it's oh this will be a brief survey and then you have 35 questions. We have a seven-item questionnaire. It's very well designed to be streamlined to ensure that people will complete it. It doesn't help if they don't. It matters how much effort you put in. We develop a small streamlined survey asking folks, are you satisfied with what happened, what would you like us to do differently and would you refer to us. As you know, client satisfaction, in many ways, is "I will come back to you, and I will be repeat customer, and I trust you enough that I would refer you to my best friend or colleague." They are some of the most important questions.

We also track our publications and presentations. That's always a very nice testament to our group. They are having increasingly great success in that arena. As needed, we do post-activity follow-up debriefing with clients to make sure the information they received was helpful. We also consider referrals a proxy of success. We monitor referrals when people come to us, we ask, were you referred to us? Even if they don't want to say the name if they are referred by a client that is all we need to know. That is good for us to be able to monitor and we are happy with what we have seen. Plus we work with our SES director for the office. And we do - - we have our performance plans and indicators on our performance plans of success of our program. I am accountable in my performance plan. My manager is and my staff are. All of us have accountability for the success of the program.

Please see the note, this is my contact information. I can answer any questions you have or if you want to discuss the presentation further. It's been a significant pleasure for me and a privilege to be with you today. I hope you will find this useful to you, and thinking about your evaluation and a part of my growing the culture is to assist anyone who is interested in wanting to know more about how to do an evaluation culture and activity I consider that part of the evaluation community.

[Slide 33] Contact information

[Slide 34]

Thank you, Dr. Fisher. Now, Captain Thoumaian will conclude with some final announcements.

[Slide 35]

As Dr. Fisher discussed, evaluations can transform programs and implement positive change. A supportive agency with a thriving evaluation culture understands the value and importance of evaluation to program development, management, and improvement. With an evaluation mindset, programs can ensure their goals are aligned with the needs of the population they serve. In addition, an evaluation culture encourages openness to accountability, responsiveness to change, and contributes to stronger decisions based in part on evidence.

Program evaluation involves many different aspects. Examples include: building capacity, culling and distributing resources, and providing technical assistance. To incorporate an “evaluation mindset” into your program, consider each component as a separate area. Seek to strengthen each area in an incremental fashion. Also note that a strong client-focus will build trust and further facilitate the evolution of an evaluation mindset.

Lastly, as program evaluation benefits are realized, acceptance and capacity-building will follow accordingly. As Dr. Fisher noted, data and performance measures can be applied to areas of overlap between data collection for evaluation, performance measurement, and quality improvement.

While characteristics of the Defense Department differ from those of civilian federal agencies, our ultimate aims and goals are not so divergent. Just as HRSA aims to improve health and achieve health equity through access to quality services, a skilled health workforce and innovative programs, so too does DCoE aim to improve the lives of our nation’s service members, veterans and their families by advancing excellence in psychological health and traumatic brain injury prevention and care. DCoE’s endeavors include capacity building, training, and education as well as more traditional program evaluation and improvement activities.

[Slide 36]

Thank you Captain Thoumaian. There's a great deal of information to be learned about evaluation and building evaluation capacity. On slide 37 we provide links for the educational resources Dr. Fisher mentioned. We will wait a moment for the system to sync up before proceeding.

[Slide 37]

On slide 37, we provide a brief list of resources and references that we think may be useful.

[END]

[Slide 38]

We are about to open for a live question-and-answer session.

[Slide 39]

Please use the question box, now in the center of your screen. All questions are anonymous.

Following the Q&A, please stay connected -- a link to the ICE card will open automatically.

Any additional questions and comments following the session may be directed to Captain Armen Thoumaian at the e-mail address provided on slide 39.

We have run out of time for the Q&A. Thank you for your participation. I will now provide some additional information to conclude this webinar.

[Slide 40]

Thank you again, Dr. Fisher and Captain Thoumaian. Please stay connected -- a link to the interactive customer evaluation card will open automatically. Completing an ICE comment card is very important for the development of these training sessions and will allow us to tailor them to your needs.

Please save the date for the next webinar in the DCoE program evaluation and improvement webinar series. The next webinar in the DCoE PEI Webinar Series will be held on March 15, 2016 from 1 – 2 p.m. ET. The topic will be "Data Collection in Program Evaluation: How to Ensure Quality and Security."

On behalf of DCoE, thank you for attending today's webinar. Please use any remaining time after completing your evaluation of today's event to network and chat among yourselves. Have a great day!