

*A Final Report on Building Evaluation Capacity for Programs
Funded by the Champaign County Community Mental Health and Developmental
Disabilities Boards (CCMHDDDB) Year 7*

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Statement of Purpose:

The aim of this effort was to continue to build evaluation capacity for programs funded by the Champaign County Mental Health Board (CCMHB) and the Champaign County Developmental Disabilities Board (CCDDB). In Year 7, we proposed to continue to implement the recommendations and specific plans identified via Year 1 assessment of current evaluation activities and priorities and to build upon our previous efforts over the last few years. Specifically, we proposed the following activities and deliverables.

1. Continue to create a learning organization among funded agencies and the CCMHB and the CCDDB.

- a. Prepare new “targeted” agencies to share information at MHDDAC meetings once/year by end of summer, 2022 (as schedules allow). The actual presentation will occur in the August or September following the end of the fiscal year at the MHDDAC meeting.*

Together with the CCMHB and CCDDB staff, we targeted six programs for more intensive evaluation capacity building partnership. Six programs worked closely with evaluation consultants who were doctoral students supervised by Drs. Aber and Todd. These programs developed and engaged in targeted strategies for building evaluation capacity and received sustained individual support over the course of the year from their consultant throughout the process. The processes and outcomes from these partnerships are explained in detail in Sections II through VII of this report. Each section summarizes the effort engaged with each partner agency.

These relationships were created to foster a culture of learning, first within each program and then across CCMHDDDB-funded agencies as a larger system. Consultants took an intensive approach that emphasized developing a learning organization, or one that is “skilled at creating, acquiring, and transferring knowledge, and at modifying its behavior to reflect new knowledge and insights” (pp. 79; Garvin, 1993). As one example, we hoped to position these target programs as ‘peer experts’ that could then report back and serve as resources to other CCMHB-funded programs. While the targeted programs are not at a point where they would be able to function as independent supports for other agencies building evaluation capacity, their experiences are valuable learning opportunities for their peers. During the Mental Health Agency Council (MHAC)

meetings from years two through six, representatives from each of the targeted programs presented to their peers about their experiences building evaluation capacity. Programs briefly shared about challenges they encountered and lessons learned, as well the general processes they engaged in. This feedback appeared to elicit some excitement among other programs, leading a few to express their desire to participate in this evaluation effort. Much of the research on learning organizations focuses on individual actors (e.g. employees) within an organization (e.g. a specific business). In addition to engaging at the individual and organizational levels, our process also engaged programs and agencies within a larger system (CCMHDDDB). While ongoing effort will further advance these goals, the targeted partnerships begin the process of fostering a culture of i) valuing evaluation, ii) desiring evaluation to be meaningful, and iii) experimenting with evaluation.

- 2. Continue to Support the Development of Theory of Change Logic Models.**
 - a. Offer 2 logic modeling workshops to support funded programs in model development in Fall 2021*
 - b. Schedule and announce logic model training dates with 30 days advance notice*
 - c. Provide follow-up support to targeted agencies who submit a model to the team for review (and to agencies who choose to develop the model using “hours” from the consultation bank)*

We held two (virtual) logic model workshops for funded programs. One workshop was offered in October of 2021 and was attended by four groups: Driven to Reach Excellence and Academic Achievement for Males (DREAAM), the Well Experience, First Followers, and Rape Advocacy, Counseling, and Education Services (RACES). The second workshop was offered in March 2022 and was attend by staff from the Refugee Center. During the workshops all programs engaged in hands-on theory of change logic model creation with the support of an Evaluation Capacity Building team member. All programs in attendance were provided with PowerPoint slides containing their logic models following the workshop.

- 3. Choose three Programs for Targeted Evaluation Development in Consultation (up to two CCMHB and one CCDDDB)**
 - a. Work in collaboration with up to three funded programs to develop evaluation plans and support them in the implementation of those plans (e.g., instrument development, data gathering, data reporting)*
 - b. The goal would be to guide an evaluation plan and process that can be implemented and sustained by the program in subsequent years*

We worked with three programs as new targeted partners for evaluation capacity building support in year 7, one funded by the CCDDDB and two funded by the CCMHB. The new CCDDDB program was the Champaign County Regional Planning Commission Decision Support Person-Centered Planning Program (CCRPC-DSPCP). The two new CCMHB

funded programs were the Well Experience and Women in Need Recovery (WIN Recovery). Individual meetings and customized efforts were provided to each of these three programs. Reports that elaborate on the specific activities engaged to build evaluation capacity and to create specific evaluation plans are provided in the following sections II, III and IV.

- 4. Choose three Programs for Targeted Evaluation Data Usage in Consultation (up to two CCMHB and one CCDDDB)**
 - a. Work in collaboration with up to three funded programs to support ongoing evaluation implementation (e.g., data collection, data usage, data translation).*
 - b. The goal would be to emphasize translating evaluation findings to inform program activities and facilitate usage of evaluation data to make informed programmatic decisions.*

We worked with three programs as continuing targeted partners, all funded by the CCMHB, for evaluation capacity building support targeted to data usage in year 7. Given the challenges associated with continuing to provide high quality services during the COVID-19 pandemic, no CCDDB funded programs were able to devote the necessary time and effort to participate in continuing partnerships in year 7. The continuing CCMHB programs included: Community Choices – Community Living program (CC-CL); Rape Advocacy, Counseling and Education Services – Sexual Violence Prevention Education program (RACES-SVPE); and Uniting Pride – Children, Youth, & Families program (UP-CYF). Individual meetings and customized efforts were provided to each of these four programs. Reports that elaborate on the specific activities engaged to build evaluation capacity and to create specific evaluation plans are provided in the following sections IV, V, VI, and VII.

- 5. Invite follow-up with all previously targeted agencies via the Consultation Bank. This could include (depending on agency need):**
 - a. Reviewing evaluation implementation progress*
 - b. Revising and refining logic models*
 - c. Reviewing gathered data and developing processes to analyze and present data internally and externally*

We received two requests for consultation bank support from previously targeted agencies – DREAAM and the Community Service Center of Northern Champaign County (CSC-NCC). DREAAM interns met a couple of times with evaluation staff to clarify anticipated short-term outcomes and to operationalize program components. Progress was limited due to interns switching out for the semester as well as needing to clarify program scope with leadership more before creating a logic model. The new director of CSC-NCC sought consultation regarding the evaluation capacity building work done during previous fiscal years. We helped them build institutional knowledge about their evaluation strategy amid staff changes, and assisted them in using and updating an Excel spreadsheet we created for them

previously to analyze satisfaction data. To promote sustainability of these skills moving forward, we also provided resources on Excel from our data workshops which address the most common questions the staff were encountering.

6. Continue the Evaluation Consultation Bank with Agencies Who Have not Had Targeted Partnerships

- a. *Offer a bank of consultation hours for use by funded programs*
- b. *Funded programs would request hours based on specific tasks*
 - i. *Developing an evaluation focus*
 - ii. *Completing a logic model*
 - iii. *Developing and sustaining evaluation activities (particularly in targeted agencies)*
 - iv. *Reporting data*

This year we received no requests for consultation bank support from agencies who had not previously had a targeted partnership.

7. Continue to Build a “Buffet” of Tools

- a. *Maintain and expand a Google drive or other web-based repository for measures developed with and/or for funded programs*

The web-based repository of measures developed with and for funded programs continues to be maintained, however, this year all new measures that were developed were highly specific to the individual programs involved, and thus were not appropriate for use by other programs. Consequently, in year 7, no new measures were added to the repository of measures.

8. Offer up to three workshops with CCMHB/CCDDB funded agencies regarding data usage fundamentals including, for example:

- a. *Data storage (setting up excel, confidential storage, identity keys)*
- b. *Basic analysis (shareware, means, standard deviations, change over time)*
- c. *Conceptualizing process and outcome evaluation questions based on the theory of change logic model*
- d. *Applying evaluation findings to inform programmatic decision-making*

In summer of 2022, we offered two data workshops to all CCMHB/CCDDB funded agencies. The workshops focused on the use of Excel for working with outcome data and were sequenced to build on each other, with the first workshop being more basic and the second more advanced. The first workshop, *Introduction to Excel for Outcomes Analysis – Part I*, provided an basic introduction to Excel. It addressed the following topics: creating a workbook and adding new sheets; renaming, moving and deleting sheets; creating a current client worksheet; creating a workbook reference sheet; adding evaluation details to a reference sheet; creating response option dropdowns; tracking and organizing outcomes data; adding outcomes tracking content to a current client worksheet; creating a measure scoring worksheet; linking dropdown responses and

numerical values; using Xlookup to automate measure scoring; converting relative cell references to absolute cell references; producing a total measure score; and, generating counts using the “subtotals” dropdown. The second workshop, *Introduction to Excel for Outcomes Analysis – Part 2*, provided a practical demonstration of how to use Excel for PMO reporting. As was true for the year 7 logic modeling workshops, the data workshops were delivered online via zoom. Resources from the workshops (e.g., video examples of topics covered in the workshops as well as sample Excel workbooks) were stored for future access by present and future CCMHDDDB funded programs in a Google Drive. The workshops were attended by staff from RACES, First Followers, the Refugee Center, DSC and GROW.

9. Meet with CCMHB/CCDDB members as requested to provide information on, for example:

- a. The varied uses of evaluation
- b. Logic modeling process
- c. CCMHB/CCDDB goals and priorities with regard to evaluation
- d. Instantiating evaluation practices for the CCMHB and the boards’ funded programs

The evaluation capacity building team provided consultation to CCMHDDDB staff regarding continued evaluation related supports that the board and staff might provide to funded agencies as the contract with the University of Illinois Department of Psychology Evaluation Capacity Building team was coming to an end due to the retirement of Dr. Aber and the relocation of Dr. Allen to Vanderbilt University.

Champaign County Regional Planning Commission – Decision Support Person-Centered Planning Program (CCRPC- DSPCP)

Program Overview

The Decision Support Person-Centered Planning Program at CCRPC is designed to support individuals living with intellectual and developmental disabilities (I/DD) in Champaign County who are not yet eligible for state-funded services. The Decision Support Program has three components: 1) support and provide transition planning for high school students with I/DD ages 14 and older, 2) provide person-centered planning case management services to adults, and 3) assist individuals in Champaign County with registering for the PUNS list and with organizing documentation required for state funding. From September 2021 to June 2022, one consultant from the University of Illinois worked with two staff members of CCRPC to build the program’s capacity to evaluate and improve their program.

Goals for Targeted Partnership:

1. Update Preference Assessment survey to improve the richness of county-level needs assessment provided to DDB annually
2. Examine Preference Assessment results by various demographic variables to identify themes and opportunities to tailor services more closely to client needs
3. Update PMO consumer outcomes to align with program activities and long-term goals
4. Improve ability to analyze consumer outcome data efficiently, reproducibly, and more frequently

Executing Goals

- 1. Update Preference Assessment survey to improve the richness of county-level needs assessment provided to DDB annually**

We began by reviewing the Preference Assessment, which is a needs survey administered to each person in the county when they update or initiate their PUNS list registration. Because every client seeking DDB-funded services must first be registered for the PUNS list and everyone on the PUNS list must meet with the case manager annually to update their registration, the Preference Assessment produces a rich dataset covering a large proportion of DDB-eligible citizens in Champaign County. These data are reported annually to the DDB and may at times be used to inform funding decisions and board priorities. For example, responses to the survey question “Where would you like to live?”

may be useful for planning where in the county there may be an increased need for services in the near future.

CCRPC staff noted previous attempts to use the Preference Assessment to answer important questions about county-wide needs but that the survey was missing critical questions that would allow them to answer these questions. We therefore worked together to add missing items as well as improve the existing items. Informant type (i.e., is the client filling out the assessment or a support person) and length of time on the PUNS list were added to enable parsing the data by these important variables. Further, we added demographic variables to allow CCRPC and DDB staff to look at differences in needs by client age, race and ethnicity, gender, income bracket, and zip code. The questions and response options were updated throughout, and additional items were added based on staff input (e.g., “On a scale from 1 to 10, how comfortable are you in navigating the DD system and/advocating for yourself or your loved one?”). The survey items were reviewed by CCRPC staff (including those who administer the Preference Assessment), the full Evaluation Capacity Building Team at the University of Illinois, and members of the DDB, and changes were implemented on a rolling basis. The final updated Preference Assessment was approved by DDB staff, and CCRPC began using the updated Preference Assessment in January 2022.

2. Examine Preference Assessment results by various demographic variables to identify themes and opportunities to tailor services more closely to client needs

After the revised Preference Assessment was implemented, we assisted CCRPC in conducting initial analyses of the data so they could begin to identify how to compare results for different types of participants. CCRPC staff worked to analyze the data in SurveyMonkey (where the survey is hosted), and we helped with reviewing and interpreting the results. For example, we alerted CCRPC staff to the result that over a quarter of respondents were for clients under 18. This highlighted the importance of breaking out all future analyses by age, given that children under 18 are not eligible for PUNS selection and also may have very different needs from adults with I/DD. These initial analyses were preliminary in nature but assisted the staff in practicing analyzing and interpreting survey results and in developing general guidelines for how to work with the updated survey.

3. Update PMO consumer outcomes to align with program activities and long-term goals

We assisted CCRPC in revisiting the consumer outcomes described in their FY23 DDB application and in their FY22 PMO and in updating these outcomes to better align with

the tasks they were currently completing as an organization. For example, due to the COVID-19 pandemic, the transition consultants have been working to reestablish in-person connections with schools and students. Thus, their previous consumer outcome relating to a targeted number of transition plans developed for students was not an accurate reflection of the outreach efforts that transition consultants were needing to engage in to increase referrals to their services.

Overall, we worked together to identify areas of the previous year's PMO and the most recent application where the evaluation strategy could be strengthened, and to implement those improvements in the upcoming FY23 PMO.

4. Improve ability to analyze consumer outcome data efficiently, reproducibly, and more frequently

Finally, CCRPC expressed they would like to be able to evaluate their consumer outcomes more easily. We therefore worked to improve their ability to analyze the consumer outcomes listed in their application on an ongoing basis. We used the upcoming FY23 PMO to anchor this activity and engaged CCRPC in analyzing their existing data to evaluate their updated consumer outcomes described in Goal #3 above. We worked to ensure that all analyses were thoroughly understood by CCRPC staff and were readily reproducible. Together, we developed a draft PMO report detailing CCRPC's progress with all consumer outcomes, including transition consultants' outreach efforts, satisfaction survey results, and comparing time from PUNS selection to state funding for individuals with and without a Decision Support Program case manager.

These results were used to inform programming in real-time; for example, the time-to-funding metric was monitored weekly and used to identify areas' cases in need of attention. Ultimately, we completed the partnership with a strong start to the FY23 PMO and, more importantly, with the CCRPC staff understanding the rationale behind their evaluation procedures and feeling comfortable with how to measure their program's success at achieving their consumer outcome goals.

Next Steps and Future Directions:

1. Develop process for summarizing open-ended data on the Preference Assessment and on the Satisfaction Survey
2. Increase internal knowledge sharing to allow cross-pollination of learning between county- and state-funded person-centered-planning case managers

Appendix Items:

Section II A: Revised Preference Assessment

Section II B: Performance Outcome Report (DRAFT)

The Well Experience New Targeted Partnership FY 22-23

Program Overview

The Well Experience “has created a conduit by which individuals that have been traditionally marginalized, underestimated and undervalued have an opportunity to receive trauma-informed care by means of evidence-based practices.”

In service of their mission, The Well Experience (TWE) offers an expansive breadth of services (crisis management, age specific groups, family nights) dedicated to serving “Black/African American girls, women, teens, and families” in Champaign County. The organization advocates for a wraparound approach to service engagement, and the majority of clients are involved in multiple service programs. CCMHB funds support these services broadly, as opposed to being earmarked for a specific program.

Identifying Goals

The Well Experience (TWE) is both a new targeted partner and newly funded by the CCMHB. Early work involved discussion and informal modeling of the connections between program mission, activities, short-term and long-term goals, and underlying values. Discussion of these connections and organizational strengths and needs resulted in identifying multiple potential avenues for the partnership. After discussing the potential utility of each aim, the following three major goals were prioritized:

- 1) Develop an organizational theory of change logic model.
- 2) Develop an overarching and cohesive evaluation process.
- 3) Develop a structured intake tool to use across programs.

Executing Goals

1) Develop an organizational theory of change logic model.

As this agency’s CCMHB funding is not allocated for one specific organizational program but instead may be used across organizational services, the early partnership focused on understanding the breadth of the services offered by TWE, including participant overlap between services, the influence of organizational values on program services, and general goals for improving evaluation. The breadth of interrelated potential services offered by TWE initially proved challenging for developing a parsimonious model. Additionally, TWE’s work is highly informed by values of healing-centered engagement, community support, holistic care, and cultural identity; thus, understanding these values and frameworks was critical for accurately articulating the organization’s theory of change. This level of values articulation may not be critical for every evaluation capacity building effort. However, given how influential these values are for both how

and why TWE operates, informal articulation of these values and concepts was critical for developing a culturally-reflective, empirically-useful evaluation process.

Ultimately, two models were developed through this partnership: one overarching agency model (Well Family Care model) and one programming-specific model (Girls2Life).

2) Develop a systematized, cohesive evaluation process

Because of the expansive nature of program activities and potential impacts, TWE's early articulations of evaluation goals were extensive and potential measurement strategies were vague. Challenges at this stage included identifying an evaluation strategy that both captured the breadth and interrelated nature of service activities and that was feasible and sustainable. Thus, a critical part of building organizational evaluation capacity involved bounding the shorter-term outcome domains to be prioritized during the rest of the partnership. This prioritization occurred through consultation of scholarly literature, consideration of current organizational data collection processes and potential measurement strategies, and concerns related to feasibility and sustainability. The outcome domains prioritized in the evaluation partnership are related to i) psychological health and ii) academic functioning.

Operationalizing the domains of psychological health and academic functioning helped to facilitate greater specificity in the agency's anticipated shorter-term outcomes, which were then used to identify specific measurement tools and relevant analytic strategy. Ultimately, the process of bounding and operationalizing anticipated shorter-term outcomes contributed to the development of an evaluation strategy that is both more specific and more feasible.

Validated and/or evidence-based measurement tools and analytic strategies were identified for the following shorter-term outcomes:

- 1) Participants will experience a reduction in symptoms of psychological impairment and distress.
 - a) Youth
 - b) Caregiver
- 2) (When applicable) Participants will experience a reduction in trauma symptoms and associated behaviors.
 - a) Youth
 - b) Caregiver
- 3) (When applicable) School-aged participants will maintain or improve their grades.
- 4) (When applicable) School-aged participants will maintain or improve their school attendance.

After specific measurement tools were identified, efforts moved towards developing a reproducible data analytic process. Challenges at this stage included identifying an analytic strategy that was both parsimonious and context-sensitive. For example, it was challenging to identify one analytic method that would satisfactorily capture attendance

related outcomes for youth with no or few absences and youth demonstrating significant truancy. We had similar discussions around capturing psychological functioning over time. Reporting the average across clients may disguise meaningful change occurring in, for example, clients experiencing particularly frequent absences, whereas this nuance may get “washed out” when averaged with clients who are infrequently absent. In response to these concerns, we hypothesized about any particularly significant potential clusters that may be relevant to the shorter-term outcomes indicated above. We then specified the criteria for each group (e.g., GPA of 3.0 or higher, GPA of 2.9 or lower). Finally, a data analysis workbook was created to directly reflect the measurement and analytic strategies identified during the partnership.

3) Develop a structured intake tool to use across programs

Early in the partnership, TWE described feeling both limited and overwhelmed by existing organizational data collection processes where forms and measurement tools were created and adapted as-needed, with completely different forms used for different programming. This practice is not uncommon among nonprofit organizations, though it is generally an inefficient use of agency time and an impediment to observing outcomes over time. Throughout the partnership, TWE expressed a desire for a cohesive intake tool that could be used to collect data from clients across programming areas. The agency also expressed their desire for an evaluation process that was strengths-based, captured individualized outcomes, and was consistent across families, individual clients, and programs.

A cohesive intake assessment was developed to collect i) baseline outcome data from multiple informants, ii) demographic data, and iii) client context, presenting needs, and goals. We anticipate that integrating the collection of baseline outcome data directly into the intake process will simplify the process and result in this information being collected with greater consistency.

The cohesive intake assessment was developed to reflect agency preferences and is available for use as a “hardcopy” to be printed and filled out. After the intake appointment, data must be entered from the hardcopy into the electronic data analytic file. To streamline the process, the hardcopy includes specific scoring data that is also reflected in the data analytic file.

Next Steps and Future Directions

- 1) Implement and maintain the evaluation strategy for one quarter, and at that time assess consistency, barriers (including feasibility), etc.
- 2) Consider including qualitative data from individual family goals into the narrative section of the PMO end of year report.

- 3) Consider developing a structured progress report template for families based on individual progress.

Appendix Items:

Section III A: Well Family Care Logic Model

Section III B: Girls 2 Life Logic Model

Section III C: Overview of Data Workbook

Section III D: Cohesive Intake Assessment

Women in Need Recovery New Targeted Partnership FY 22-23

Program Overview

WIN Recovery serves justice-involved women and the LGBTQ2+ community who struggle with substance misuse and have a history of trauma. They offer a continuum of services based on each client's individual recovery to help bridge the gap from incarceration to reentry. These comprehensive support services occur within the transitional living environment and includes programming designed to address and interrupt the source of trauma that leads to continuous cycles of incarceration.

Identifying Goals

Women in Need Recovery (WIN) is both a new targeted partner and newly funded by the CCMHB.

- 1) Develop an organizational theory of change logic model.
- 2) Increase capability to track and measure organizational effectiveness over time.
- 3) Develop a reproducible and feasible data analytic strategy that is relevant to agency vision and framework.

Executing Goals

1) Develop an organizational theory of change logic model.

WIN Recovery is emphatic that they do not simply provide a “recovery house.” Instead, they provide a range of scaffolded supports from peer-leaders that occur in the context of stable, safe housing. Given this holistic perspective, early partnership focused on understanding the nature of the services offered by WIN, including models or frameworks that inform program services, existing data collection and reporting practices, and general goals for evaluation and data processes.

Early stages of the partnership involved modeling the connection between program activities, anticipated shorter- and longer-term outcomes, and theoretical underpinning for the articulated connections. At this stage, a significant review of the literature was conducted to understand the frameworks articulated by WIN (e.g., gender-responsive, trauma-informed), their meaning in a substance use recovery context, and potentially-relevant evidence-based tools.

A second step involved linking current collected data to stages in the theory of change. As an example, the agency consistently collects information on 12 “benchmarks” that may be achieved by women while they are engaged in services with WIN. These

benchmarks were specifically included in the model because WIN treats them as very proximal short-term outcomes that are important to the foundation of sustainable recovery. These benchmarks have been really useful for WIN in understanding some of the concrete ways that they have been able to support participants (e.g., accessing identification documents) as well as identify the individual-level successes of women in the program (e.g., maintain sobriety for 3 months). However, the binary yes-no nature of these 12 benchmarks somewhat limits their utility as an outcome tool. WIN was motivated to identify other assessments that may capture organizational effectiveness in more complexity.

2) Increase capability to track and measure organizational effectiveness over time.

Once the organizational theory of change model was articulated, multiple potential avenues for measuring agency effectiveness were discussed. At this time, WIN expressed a desire for the capacity to measure i) individual-level outcomes that would ii) be directly relevant to programming and agency vision and iii) resonate with multiple types of stakeholders. With this in mind, we decided to pursue an evaluation plan that measured program impact on individual's trauma symptoms.

At this point, a targeted search of the scholarly literature was conducted to identify a high quality, accessible measure. After considering the sample appropriateness and feasibility of different measures, the Posttraumatic Check List- 5th Edition Civilian Version (PCL-5) was selected. In order to further improve applicability of the measure to WIN's participant context, the instructions of the PCL-5 were adapted to include examples of potentially-traumatic events that may be particular relevant to the context of women who have experienced incarceration and/or substance abuse.

3) Develop a reproducible and feasible data analytic strategy that is relevant to agency vision and framework.

In order to integrate future evaluation practices with existing agency routines, significant time was spent understanding the nature of and ways in which data is already collected and used. As a result, the current data strategy is significantly influenced by existing programming components and accessible resources, with the specific intention to streamline and systematize the data collection and analysis process. In particular, it was really important to the agency to develop a process that would be consistent across different caseworkers, locations, and time frames.

The analytic strategy was specified in an Excel workbook. However, it is important to note that WIN's existing data software was expected to be upgraded in August 2022. The agency anticipated building the developed analytic strategy (as outlined in the Excel workbook) into this upgraded software program.

Next Steps and Future Directions

- 1) Building the outlined analytic strategy into the software.
- 2) Train caseworkers on the process and implement the data collection practice.
- 3) After analysis, document observed group differences and make decisions about whether to analyze/report outcomes by group characteristics or overall.

Appendix Items:

Section IV A: WIN Recovery Theory of Change Logic Model

Section IV B: PCL-5 Measure

Section IV C: Overview of Analytic Strategy

Community Choices: Community Living Program

Program Overview

Community Choices is a human services cooperative and service provider for adults with developmental disabilities. They have three main philosophies: people need people, we are not afraid to try, and success is a shared responsibility. The Community Choices Community Living Program aims to help people build the lives they want to build by providing assistance to people in finding somewhere to live, taking care of their homes, getting from place to place, and having people to support them. By engaging in weekly meetings, they support people in moving out, in acquiring the skills and confidence to maintain their homes, in managing the support they need to make that happen, in building connections, and in achieving their self-determined goals. From September 2021 to July 2022, one consultant from the University of Illinois worked with two primary staff members of Community Choices to build the program's capacity to evaluate and improve their program.

Goals for Targeted Continuing Partnership:

1. Clarify objectives of the new iteration of Community Living Program, including how to assess progress in the context of ongoing needs for support
2. Develop an overarching strategy for data collection and evaluation across all facets of the Community Living Program, including streamlining the data collection timeline and various data sources
3. Develop tools to analyze and report data reproducibly and on an ongoing basis to support data-informed programming decisions

Executing Goals

- 1. Clarify objectives of the new iteration of Community Living Program, including how to assess progress in the context of ongoing needs for support**

The Community Living Program was initially designed to be a transitional program in which Community Choices would help clients get housing and get connected to resources to maintain their housing, and then clients would transition out of the program. In our previous partnerships with Community Choices, we helped them to develop ways to evaluate this program, with a particular focus on clients' transition out of the program as a key metric of the program's success. Over the past few years, Community Choices has learned from their internal evaluations that clients were often experiencing unanticipated issues after obtaining housing (e.g., breaking a leg, losing a job, needing to move) that required reengagement with the Community Living Program. These insights led

Community Choices to reconsider whether a transitional program could adequately address the often cyclical nature of their clients' needs, and ultimately to restructuring the program to focus more on sustained progress in domains relating to independent living rather than targeting discontinuation of services.

To support Community Choices in implementing these data-informed changes to the Community Living Program, we worked to help them articulate clear and measurable objectives for the new iteration of their program. We began this work by discussing with Community Choices staff how they might define success in the context of ongoing engagement with a client. In other words, if transitioning out of the program is no longer the explicit goal, then what *are* the goals? We supplemented these partner discussions with a literature review on evaluating sustained progress in human services, particularly in agencies serving individuals with intellectual and developmental disabilities.

To help distill the learning from these discussions into clear and measurable objectives, we revisited the program's original logic model and identified short- and long-term outcomes that still applied to the newest iteration of the Community Living Program. We then transported those outcomes to a modified indicators worksheet where we asked Community Choices staff to identify what they would expect to see in their clients' lives if each outcome were being met. The purpose of this activity was twofold: 1) to transform staff's intuitive understanding of what success looked like into written objectives that could guide evaluation, and 2) to develop language for updated short-term outcomes which aligned with the long-term outcomes of the program. Through these activities, we developed the Outcomes Mapping Document, available in the appendices.

2. Develop an overarching strategy for data collection and evaluation across all facets of the Community Living Program, including streamlining the data collection timeline and various data sources

In addition to clarifying the objectives of the new iteration of the Community Living Program, Community Choices expressed a desire to simplify and consolidate their data collection processes. At the beginning of this year's partnership, Community Choices was largely relying on annual client surveys for their consumer outcomes data, and these surveys were being sent to everyone at the same time of the year even though clients could be in very different stages of the program. The staff were therefore eager to find ways to tie data collection to clients' timelines in the program so that, for example, an "annual" data collection could reflect clients' progress one year into the program. Additionally, Community Choices were finding it difficult to track their internal data collection needs while also tracking data required for their accreditors and local and state funders. We therefore aimed to help connect their data collection processes more closely

to their program operations, to reduce redundancy in data collection, and to maximize the usefulness of the data sources required for accreditors and funders.

We used three main tools to consolidate and refine Community Choices' data collection processes. First, we took the Outcomes Mapping Document and added columns to identify the data source(s) for each objective (*"How would we know that was happening"*) and the time when data on each objective would be collected (e.g., at intake, quarterly, or during annual planning meeting). We worked to reduce any redundancies where multiple data sources were not needed for a particular outcome. We then developed a list of data sources that related to an outcome in the Outcomes Mapping Document and identified any gaps between the data they were collecting and the data they needed to evaluate their program objectives.

This practice allowed Community Choices to realize they wanted to evaluate outcomes related to clients' families (e.g., Families spending less time on care duties and enjoying more quality time with their loved one I/DD), but they were not actively collecting data from family members about these outcomes. We thus worked together to develop and implement the Family Feedback Form to administer to family members at intake and during the annual planning process.

We then transformed the list of data sources and their timings into a Data Collection and Evaluation Timeline that illustrated the data collection process from a client's intake to their annual planning meeting one year into the program (available in appendices). We used this timeline to refine the collection procedures, to inform the timings for data analysis, and to produce a visual aid to provide to staff responsible for collecting the data. The timeline also assisted with increasing the frequency with which progress on self-determined goals was being documented.

In reviewing the Data Collection and Evaluation Timeline, Community Choices staff realized that progress on self-reported goals was typically being updated only once a quarter, and without documenting goal progress more frequently, quarterly reports had become onerous tasks for staff. Staff were, however, already entering data weekly into the county and state claims spreadsheets which documented their contacts with each client. Thus, to make quarterly reports less onerous and facilitate more consistent updates on goal progress, we added columns to the claims spreadsheets for staff to enter brief contact notes and to denote which self-determined goal was being addressed in each client contact. Overall, this is one example of how the timeline tool helped Community Choices to see opportunities to consolidate existing evaluation processes to increase the efficiency and impact of their procedures.

3. Develop tools to analyze and report data reproducibly and on an ongoing basis to support data-informed programming decisions

Finally, we worked to translate the clarified program objectives into enumerated outcomes that could be evaluated quantitatively and reported to the CCDDDB. We used the CCMHB/CCDDDB Performance Outcomes Report (i.e., PMO) to anchor this activity, allowing Community Choices to practice evaluating and reporting their outcomes while we were available for support, and also giving them a head start on their annual reporting. These efforts resulted in the Performance Outcomes Report Instructions (Appendix D) which assigns a number to each outcome from the Outcomes Mapping Document and describes in detail how each outcome will be evaluated. These instructions include the data source for each outcome, which clients to include for each outcome, and how each outcome should be calculated.

To facilitate consistency in data analyses and reporting moving forward, Community Choices staff then largely worked amongst themselves to develop a spreadsheet to calculate all the enumerated outcomes in one place. We provided input on this document to maximize efficiency and minimize the potential for human error. This Data Tracking Spreadsheet is available in appendices.

Overall, we truly must commend the staff at Community Choices for their stellar progress during the partner year. They consistently worked between meetings to implement the ideas we discussed, and the tremendous gains they have made are a testament to their commitment to achieving high-quality services for the clients they serve.

Future Directions and Next Steps

1. Expand more frequent evaluation processes to other departments
2. Monitor data completion rates and how they compare to previous response rates for satisfaction surveys to identify potential areas for improvement
3. Monitor sustainability of new processes and responsively modify processes to improve long-term success
4. Share information about the evaluation process and why it exists with members of the organization co-op (comprising clients, their families, and community members) and improve engagement of co-op members in reciprocal feedback on programming and evaluation.

Appendix Items:

Section V A: Outcomes Mapping Document

Section V B: Family Feedback Form

Section V C: Data Collection and Evaluation Timeline

Section V D: Performance Outcomes Report Instructions

Section V E: Data Tracking Spreadsheet

Rape Advocacy, Counseling, & Education Services (RACES)

Program Overview:

RACES is an organization whose mission is to create a world that is free of sexual violence in our lifetime, starting with Champaign County. RACES offers a Child Assault Prevention Education Program that provides age-appropriate education to elementary-aged students and provides prevention education programs to public and private schools in Champaign County and beyond, focusing on topics including consent and fostering healthy relationships. They also provide confidential, compassionate, comprehensive support to those affected by sexual trauma through counseling, legal and medical advocacy, a 24-hour Crisis Line, and publication education and training. From September 2021 to July 2022, one consultant from the University of Illinois worked with staff members of RACES to build the program's capacity to evaluate and improve their program.

Identifying Goals:

1. Identify existing RACES education topics that map onto empirically established risk and protective factors for sexual violence and hone the evaluation of these topics.
2. Develop an efficient and reproducible process for analyzing in-person pre- and post-surveys to promote data-informed prevention education in K-12 schools.

Executing Goals:

- 1. Identify existing RACES education topics that map onto empirically established risk and protective factors for sexual violence and hone the evaluation of these topics.**

At the onset of the partnership, RACES expressed a desire to evaluate the effectiveness of their prevention education at reducing sexual violence. They expressed satisfaction with their existing pre- and post-surveys at documenting increased knowledge among the students they serve, and they hoped to be able to move beyond increased knowledge to speak to whether the increased knowledge was resulting in lower rates of sexual violence. We discussed potential challenges with this goal, including considerations when evaluating brief interventions within larger systems (i.e., "how do you account for all of the variables that influence the desired outcome beyond the brief intervention?") and the complexity of evaluating prevention in general (i.e., "how do you measure something that doesn't happen?"). We then brainstormed ways that RACES could move toward their goal of measuring their programs' impact on rates of sexual violence in a methodologically feasible way.

We decided to identify the areas of RACES's education curricula that are empirically linked to known risk and protective factors for sexual violence, which would then help us determine if students were reporting shifts in attitudes or behaviors known to be

associated with sexual violence prevention or perpetration. We used the CDC's Center for Violence Prevention list of risk and protective factors for sexual violence perpetration to guide this activity (Appendix A).

RACES staff began reviewing their elementary, middle, and high school curricula for topics relating to these risk and protective factors. We then planned to hone the pre- and post-survey to adequately capture changes in the most relevant risk and protective factors for each curriculum. However, due to unforeseen circumstances (e.g., staff illness) and competing agency demands, RACES staff were not able to progress further in this process beyond the curriculum review.

2. Develop an efficient and reproducible process for analyzing in-person pre- and post-surveys to promote data-informed prevention education in K-12 schools.

Our next goal was to assist RACES with building capacity to analyze their pre- and post-surveys internally. During the previous partnership year, RACES had to switch to a virtual platform for their education efforts due to the COVID-19 pandemic. This brought challenges but also provided opportunities to collect data more efficiently through the online portal, which enabled more sophisticated data analyses. This year, however, RACES was able to return to in-person instruction, which was accompanied by a return to administering surveys by hand. With this return to hand-written surveys, RACES expressed a desire to maintain some of the benefits they saw with virtual data collection and analysis, including the ability to break out results easily by curriculum and by school and to create color-coded "hotspot" graphs that visually identified questions where students struggled most.

We therefore worked with RACES to develop an Excel workbook that would allow them to filter results easily by school and by grade. We also worked with RACES staff to build a calculations tab that recreated the color-coded "hotspot" graphs that they found helpful during the previous year. Given that this was a continuing partnership, we emphasized RACES's existing capacity in these areas and aimed to have RACES staff creating these resources themselves, with our team available to support them when needed. Ultimately, RACES was able to enter data from over 5,000 students into this workbook and to identify quickly areas of their programming that could be tweaked for next year. This workbook is available below under Appendix B.

RACES staff also attended both of the Data Workshops that our team offered in Spring 2022, and we were able to leverage the skills gained in these workshops during our one-on-one meetings with RACES staff following the workshops.

Finally, we worked with RACES staff to re-order the questions on the post-surveys to reduce test-retest effects and maximize the likelihood that improvements on the post-test reflected gained knowledge.

Next Steps and Future Directions:

1. Implement reordered post-survey questions and explore using automated scoring (e.g., Scantron) to make data collection more efficient and less prone to human error.
2. Review prevention education curricula for areas targeting evidence-based risk and protective factors and update survey items to ensure assessment of key drivers hypothesized to reduce sexual violence perpetration.

Appendix Items:

Section VI A: CDC List of Risk and Protective Factors for Sexual Violence Perpetration

Section VI B: RACES Data Workbook

References:

Center for Violence Prevention. *Risk and protective factors*. Centers for Disease Control and Prevention.

<https://www.cdc.gov/violenceprevention/sexualviolence/riskprotectivefactors.html>

Uniting Pride

Program Overview

Uniting Pride is an organization whose mission is to create a Champaign County where all who identify as gender and/or sexual minorities can live full, healthy, and vibrant lives. The Youth and Families Division of Uniting Pride is specifically focused on empowering LGBTQIA2S+ youth, their families, and adults who work with youth in professional settings to build community with and better support LGBTQIA2S+ youth. Uniting Pride hosts support groups for youth and parents, community social events, workshops for professional settings such as churches and schools, and connect others to LGBTQIA2S+ resources.

Identifying Goals

Uniting Pride (UP) is a continuing evaluation capacity building partner.

As an initial step to determine goals for FY22, UP's most recent logic model and FY21 evaluation capacity work was reviewed with the goal of identifying potential evaluation capacity goals. These discussions allowed multiple potential goals to emerge. Given UP's status as a continuing evaluation partner, efforts to move towards implementation and data usage were emphasized as particularly fruitful opportunities.

- 1) Streamline workshop evaluation content.
- 2) Develop a consistent and reproducible analytic plan.

Executing Goals

1) Streamline evaluation content.

As part of their long-term goal to make Champaign County a more inclusive and affirming place for LGBTQIA2S+ community member, over the years UP has developed and offered numerous cultural competence trainings to support community organizations' effective engagement with LGBTQIA2S+ community needs. Due in part to increasing community concerns (e.g., public testimonials from LGBTQIA2S+ folks about mistreatment from local healthcare organizations) and changes in organizational capacity (e.g., staff hiring), UP intended to provide even more of these cultural competence workshops during FY22. Additionally, although UP was able to collect some evaluation data from previous workshops, the lack of consistency in both training and evaluation content limited the utility of data usage. Thus, streamlining and systematizing data collected from participants attending UP facilitated workshops was identified as a priority for the FY22 evaluation capacity building partnership.

A first step to streamlining the process involved taking stock of the multiple trainings and objectives previously offered by UP in order to identify opportunities for parsimony and shared objectives. After we brainstormed the types of workshop audiences together, UP staff and volunteers independently identified shared workshop objectives and streamlined workshop content accordingly. This led to a “core” workshop training. From here, we worked to develop clear and relevant “core” evaluation items based on workshop content. A series of potential supplemental workshop items was also developed for relevant situations.

2) Developing a consistent and reproducible analytic plan

At this stage, the uses and potential implications of the workshop evaluation data were discussed. A data analytic plan was developed based on the ways the agency hoped to use the data (e.g., to be able to see improvements in individual participants; to improve or update workshop content when needed; to share with stakeholders interested in booking a workshop). This data analytic workbook was developed with consideration of current agency resources and created in Excel.

Next Steps and Future Directions

- 1) Continue using the data workbook.
- 2) Very early work in the partnership considered cataloguing all current evaluation processes with the aims of a) reducing the reliance/burden on any one individual/position to maintain memory all of the organization’s processes, and relatedly, b) to build and maintain institutional knowledge less susceptible to turnover. As UP systematizes individual evaluation processes (e.g., evaluation of cultural competence workshops; evaluation of PrideFest programming), they may benefit from documenting this information in one electronic document that is updated at regular, specific occurrences (e.g., The first two weeks of a new FY).

Appendix Items:

Section VII A: Core Workshop Items

Section VII B: Evaluated Outcomes

Section VII C: Overview of Data Workbook