Change and Implementation in Practice

Monitoring, Evaluating, and Applying Findings

Capacity Building
CENTER FOR STATES

Monitoring and evaluation are essential activities for making informed decisions and guiding improvements.

This brief can help child welfare agency leaders, managers, and teams partner with evaluators and data analysts to monitor and evaluate the implementation and impact of a program or other intervention and apply findings over the course of the change and implementation process.

Change and Implementation in Practice Series

Child welfare agencies continually undertake efforts to implement new programs and practices to produce better outcomes for children, youth, and families. Effectively implementing new approaches and achieving sustainable change can be challenging. The Capacity Building Center for States (the Center) has developed the **Change and Implementation in Practice** series to support agencies in applying a structured approach to implementation and overcoming common challenges.

Briefs in this series provide user-friendly guidance on implementation concepts to strengthen child welfare systems' ability to implement change. These "how to" guides explain key steps in the Child Welfare Capacity Building Collaborative's (the Collaborative's) Change and Implementation Process, a synthesis of several implementation and continuous quality improvement (CQI) frameworks and tools (Collaborative, 2015). The Change and Implementation Process describes overlapping phases and steps that guide organizations from problem exploration through sustainable implementation. While the briefs align with the Collaborative's process, they can be used with similar implementation frameworks.

This brief discusses monitoring, evaluating, and applying findings. When monitoring and evaluation becomes most relevant in the Change and Implementation Process, agencies typically will have:

- A team to guide the change and implementation process
- A clearly identified and researched problem[1] and an analysis of the root cause(s) of the problem
- A theory of change that reflects a clear pathway from the problem to a desired outcome
- An intervention (or multiple interventions) to address the root cause(s) of the problem
- A completed readiness assessment and strategies to address readiness gaps and build capacity

Teams **should consider and plan for monitoring and evaluation as they complete the above milestones**, and also incorporate monitoring and evaluation plans into:

- A comprehensive implementation plan
- Approaches for testing, piloting, and/or staging the intervention

For more information on these milestone topics, see
https://capacity.childwelfare.gov/states/focus-areas/cqi/change-implementation/

---

[1] This series uses the word "problem" to refer to what needs to change to meet agency priorities. Problems may reflect identified needs or opportunities to improve agency functioning or outcomes.

Key Considerations and Definitions

This first section of the brief lays a foundation for a shared understanding of monitoring and evaluation by introducing definitions of key concepts, explaining their importance to effective change management processes, and showing how a logic model can be used as a tool to support planning for monitoring and evaluation efforts. The second section will describe a four-part process for monitoring and evaluation that builds on these concepts.

Given the complexity of monitoring and evaluation, a publication of this size cannot fully explain everything there is to know about this topic. As such, this brief is designed to familiarize child welfare leaders, program managers, and implementation teams with key concepts and tasks and prepare them to partner effectively with evaluators and data analysts. The brief also provides links to more detailed resources for more information.

Why Monitor and Evaluate?

Teams should monitor and evaluate their interventions to (Office of Planning, Research, and Evaluation [OPRE], 2010):

- ◆ Find out what is and is not working
- ◆ Identify strengths and weaknesses of the intervention and its implementation, and guide improvement
- ◆ Show stakeholders—including funders, agency staff, and community members—what the intervention has achieved and how it benefits the target population
- ◆ Provide evidence related to effectiveness
- ◆ Add to the existing child welfare knowledge base

Teams implement interventions so that they can improve services and outcomes for children, youth, and families; they monitor and evaluate so they know whether they are doing what they said they would do, and if it is achieving desired outcomes. By assessing how well their interventions achieve desired results, teams can make decisions about what to adjust, continue, expand, or phase out.

What Does It Mean to Monitor and Evaluate?

The concepts of monitoring and evaluation can overlap, but they also differ in various ways. Both use data to inform decision-making and guide improvements; data collected for monitoring can be used in evaluation and vice versa.

Monitoring is generally an ongoing process for tracking and reporting on program activities and reviewing progress against plans. Monitoring plays an important role in supporting program management over the course of implementation, bringing attention to progress and potential problems, and contributing to continuous quality improvement (CQI) efforts.

Definitions of Key Terms

- ◆ **Intervention** – any specific practice, service, policy, strategy, program, practice model, or combination that is clearly defined, operationalized, and distinguishable.
- ◆ **Core components** – the essential building blocks and related activities of an intervention believed to lead to positive outcomes.
- ◆ **Implementation** – a specified set of activities designed to put into practice an activity, program, or intervention.
- ◆ **Monitoring** – an ongoing task of tracking and reporting on progress toward goals to support oversight and decision-making.
- ◆ **Fidelity assessment** – process used to measure whether an intervention is delivered as intended by developers.
- ◆ **Formative evaluation** – systematic collection, analysis, and use of data and information with the purpose of guiding improvements to an intervention.
- ◆ **Summative evaluation** – systematic collection, analysis, and use of data and information with the purpose of making a judgment about an intervention's effectiveness.
- ◆ **Logic model** – a visual representation showing how an intervention's inputs and activities lead to outputs and outcomes.
- ◆ **Input** – resources needed to implement and operate the intervention.
- ◆ **Output** – direct results of activities or services, typically quantifiable (e.g., number of program participants).
- ◆ **Outcome** – a measurable change resulting from intervention activities, including system changes as well as changes in knowledge, skills, or behaviors of the target population.
- ◆ **Measures** – information or data that can be used to assess whether progress was made toward desired change.
- ◆ **Quantitative data** – numerical data that measure and quantify.
- ◆ **Qualitative data** – narrative or nonnumerical data that explore how and why and provide context.
- ◆ **Experimental design** – a study that assesses the impact of an intervention by randomly assigning participants to receive either the intervention or an alternative.

Evaluation is defined as "a systematic method for collecting, analyzing, and using information to answer basic questions about a program [or other intervention]. It helps to identify effective and ineffective services, practices, and approaches" (OPRE, 2010, p. 97). Evaluation takes place at specified points in time over the course of implementation and uses the scientific method to make assessments or judgments.

Many child welfare agencies conduct monitoring on a routine basis to answer basic questions, such as "What activities were conducted and what services were provided?" and, "Have activities been conducted as planned, on schedule, and on budget?" Evaluation is necessary to answer more probing questions (see below) and make judgments related to effectiveness. Since many child welfare agencies may not have the internal expertise to conduct evaluations, this brief will focus more on evaluation while weaving in key ideas related to monitoring.

Formative and Summative Evaluations

There are several different ways to categorize evaluations, and terms are sometimes used in different ways. This series focuses on two key purposes of evaluation that are important when attempting to achieve the intended outcomes of an intervention:

◆ Formative evaluation to guide improvements to the intervention and implementation

◆ Summative evaluation to assess the intervention's effectiveness

Formative evaluations help teams examine program functioning, look at whether outputs and short-term outcomes are on track, and make adjustments to implementation processes and/or the intervention (James Bell Associates [JBA], 2018a). Formative evaluations are especially useful during early implementation, particularly if the intervention is a new design or has been adapted for a new setting or population. The formative evaluation and subsequent improvements are intended to result in an intervention that is "stable" (no longer being adapted), can be implemented consistently, and has a greater likelihood of success (JBA, 2018a).

Summative evaluations support judgments about the intervention's effectiveness in achieving desired outcomes. A summative evaluation should be conducted once the intervention is no longer being modified through formative evaluation. A summative evaluation may use both process and outcome data to understand and explore an intervention's impact.

Team members may also hear references to "process evaluations" or "implementation evaluations" that describe and assess implementation activities, and "outcome evaluations" that measure an intervention's effects or outcomes and assess whether the intervention produced intended changes (JBA, 2007). Data collected for these types of evaluation (process, implementation, outcome) may contribute to formative and summative evaluations.

> **ℹ** **For more information** on different types of evaluation, see::
> - Center for Disease Control's "Types of Evaluation" https://www.cdc.gov/std/Program/pupestd/Types%20of%20Evaluation.pdf
> - W. K. Kellogg's *The Step-by-Step Guide to Evaluation*, "Chapter 3: Evaluation Types, Methodologies, and Approaches" https://www.wkkf.org/resource-directory/resource/2017/11/wk-kellogg-foundation-step-by-step-guide-to-evaluation
> - JBA's *Formative Evaluation Toolkit: A Step-by-Step Guide and Resources for Evaluation Program Implementation and Early Outcomes* https://www.acf.hhs.gov/cb/resource/formative-evaluation-toolkit

Fidelity Assessment

Fidelity assessment can be an essential part of a formative or summative evaluation. A fidelity assessment measures whether staff are delivering the intervention's core components as intended. Maintaining fidelity to a program's design is important for delivering consistent, quality services in the right amounts and achieving desired outcomes (Proctor et al., 2011). Assessing fidelity and identifying the factors that help or hinder implementation of the intervention can support staff development, systematic program implementation, and CQI efforts.

As part of a formative evaluation, teams can use fidelity assessment to identify needs to improve implementation through training, coaching, technical assistance, or other supports. A fidelity assessment also can strengthen a summative evaluation and the team's understanding of outcomes. Before making judgments about whether or not an intervention is effective, it is important to determine the extent to which and how well the intervention's core components were implemented. For example, if outcomes are not achieved, fidelity assessments can shed light on

whether it was due to the intervention not being implemented as intended (e.g., not following the program model or insufficient dosage) or other reasons (e.g., a poor theory of change or a shift in the needs of the target population).

How Does Evaluation Help Agencies Answer Critical Questions?

As shown in exhibit 1, formative evaluation (including fidelity assessment) and summative evaluation can answer different, yet related, questions.

Exhibit 1. Sample Questions Addressed Through Evaluation

Purpose	Types of Questions Addressed
Formative	◆ Are staff implementing the intervention and delivering services as intended by the program designers and specified in the intervention model?* If not, why? ◆ Is the intervention reaching the intended target population?* If not, what barriers can be addressed? ◆ Are key aspects of the intervention functioning as intended? ◆ Are short-term outcomes on track? ◆ What has worked well, and what has not? ◆ What needs to be improved, and how?
Summative	◆ What changes in outcomes did the intervention cause or contribute to? ◆ Are there different outcomes under different circumstances or for different groups? Under which circumstances and for whom was the intervention most or least effective? ◆ Did the intervention have the intended effects on the child welfare system? On the target population? Were there unintended effects? ◆ How can the intervention be sustained?

* Part of the fidelity assessment.
Sources: W. K. Kellogg Foundation, 2017; JBA, 2018.

What Is a Logic Model and How Does It Support Evaluation?

A program **logic model** is a visual way to present the team's understanding of the relationships between the resources to operate the intervention, the planned activities, and the desired results and changes (W. K. Kellogg Foundation, 2004). In other words, the logic model captures a high-level overview of what teams plan to do and what they expect to happen as result. A logic model can help implementation teams, stakeholders, and evaluators create a shared understanding of the intervention and expected outcomes. It also creates a framework for monitoring and evaluation.

Logic models are related to, but different from, a **theory of change**. A theory of change illustrates the pathway from an identified problem or need to a long-term outcome in which the problem has been addressed and helps explain how and why change will happen. Teams should have developed a theory of change early in their change process.[2] A logic model presents the pathway of change in a structured way with a focus on expected outputs and outcomes. Many teams find it helpful to use a theory of change before an intervention is selected to support selection of the right program or strategy, and a logic model after the intervention has been selected to guide implementation and evaluation.

Logic models may take different forms, but often are presented in a linear format as a series of columns. Exhibit 2 presents key components of a logic model. The logic model provides a systematic way to consider each part of a change process within a holistic picture (Openshaw, Lewellen, & Harr, 2011).

---

[2] For more information on creating a theory of change, see "Change and Implementation in Practice: Theory of Change" brief.

Exhibit 2. Logic Model Key Components

Inputs	Activities	Outputs	Outcomes		
			Short-term	**Intermediate**	**Long-term**
Resources needed to implement the intervention (e.g., funding, staff, office space, curriculum, equipment).	1. Strategies and actions to deliver the intervention (e.g., conduct outreach, parenting classes). 2. Strategies and actions to support implementation (e.g., training and coaching of staff).	Immediate results of the activities (e.g., number of staff trainings conducted, types of services provided, number of parents completing a parenting class).	Intended changes expected as a result of the activities (e.g., changes in awareness or knowledge).	Intended changes expected over time (e.g., changes in skills or behaviors).	The ultimate impact of the intervention, often described in terms of improvements in safety, permanency, and well-being among children, youth, and families.

The creation of a logic model can help frame monitoring and evaluation plans and data collection needs. For example, monitoring may track inputs, activities, outputs, and certain outcomes against plans, projected timeframes, and budgets. Evaluation may explore these same areas in more depth, as well as the relationships among them, to answer specific questions. Steps for creating a logic model appear later in this brief in the section, "Part 1: Setting the Stage for Monitoring and Evaluating."

When Should a Team Begin Planning for Monitoring and Evaluation?

Teams are encouraged to begin planning for monitoring and evaluation while they develop a theory of change and select, adapt, or design an intervention. It is important that these activities become an integral part of the change process so that desired information and data can be documented, and early analyses can inform midcourse corrections. Monitoring and evaluation plans may evolve and solidify over time as teams complete implementation plans[3] and think critically about what they want to know. They will both inform and be informed by intervention testing, piloting, and staging activities. See appendix A for additional considerations on how planning for evaluation can be strengthened during different stages of the change and implementation process.

Who Should Be Involved in Monitoring and Evaluation?

Implementation teams will frequently need support from experienced evaluators with data collection and analysis skills and expertise (see box). Teams also may learn from their peers' experiences in other child welfare agencies.

While teams may need to bring in experienced evaluators to design plans, collect data, and conduct analyses, evaluation is not the job of evaluators alone. It is important to continue with the team approach[4] embraced throughout the Change and Implementation in Practice series. Engaging and gaining buy-in from stakeholders—individuals and groups directly affected by the intervention and carrying it out—will foster valuable input from varied perspectives. Meaningful engagement creates an important shift in mindsets from having evaluation "done to or for" an agency to a collaborative effort (Rabinowitz, n.d.). This also applies to monitoring and CQI.

Evaluation assistance may be available from:

◆ Internal child welfare agency data, CQI, or evaluation staff

◆ Foundations and local universities

◆ Technical assistance and capacity building providers, including the Capacity Building Center for States (find contact information for Liaisons here https://capacity.childwelfare.gov/map/)

---

[3] For more information on implementation plans, see "Change and Implementation in Practice: Implementation Planning and Capacity Building" brief
[4] For more information on teaming see "Change and Implementation in Practice: Teaming" brief

Exhibit 3 shows different groups whose perspectives are important to evaluation. Levels of participation and roles may differ depending on the evaluation's purpose and agency context. Various stakeholders may, for example, help develop and prioritize questions to be answered, provide input into data collection tools and realistic data collection processes, participate by responding to surveys or focus groups, or help interpret, communicate, and apply findings.

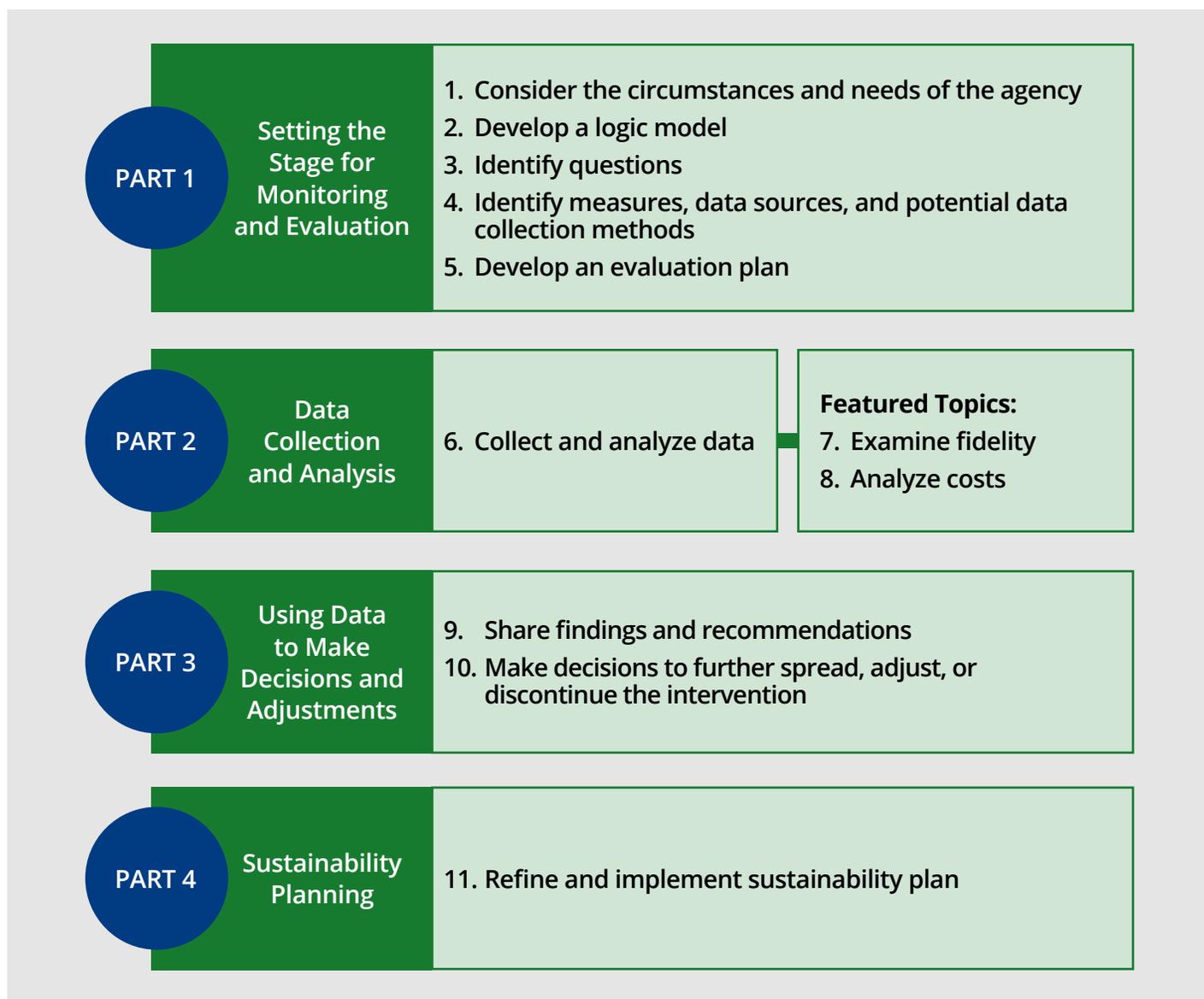**Exhibit 3. Groups to Include in Evaluation Planning and Implementation**

- Individuals with evaluation, CQI, and data expertise
- Program staff that manage and deliver services
- Partner systems (e.g., courts) and community organizations involved in the intervention
- Service recipients (e.g., youth, parents, resource families, or community members)
- Funders, policymakers, and decision-makers
- Program developers

Working with multiple stakeholders may require time and resources to develop relationships and build a shared understanding of evaluation concepts, tools, and requirements. Yet empowering teams of intervention stakeholders to conduct and use their evaluations holds great promise for enhancing the quality of implementation and improving outcomes (Wandersman, Alia, Cook, & Ramaswamy, 2015).

How to Monitor, Evaluate, and Apply Findings

Exhibit 4 shows the essential functions[5] (tasks) for monitoring, evaluating, and applying findings divided into four parts. While the functions are presented as distinct steps that occur in a linear fashion, in practice, some steps may overlap and teams may need to loop back and forth between functions. In addition, although the functions are described as stand-alone tasks, teams should conduct them alongside and in alignment with activities in other change and implementation phases. For example, teams will benefit from beginning to plan for monitoring and evaluation as part of implementation planning and thinking about sustainability as soon as the intervention has been selected.

Exhibit 4. Essential Functions

PART 1	Setting the Stage for Monitoring and Evaluation	1. Consider the circumstances and needs of the agency 2. Develop a logic model 3. Identify questions 4. Identify measures, data sources, and potential data collection methods 5. Develop an evaluation plan
PART 2	Data Collection and Analysis	6. Collect and analyze data	**Featured Topics:** 7. Examine fidelity 8. Analyze costs
PART 3	Using Data to Make Decisions and Adjustments	9. Share findings and recommendations 10. Make decisions to further spread, adjust, or discontinue the intervention
PART 4	Sustainability Planning	11. Refine and implement sustainability plan

Throughout the process of monitoring, evaluating, and applying findings, three key themes emerge as particularly important: continuous learning, collaboration (among agency staff, evaluators, system partners, and service recipients), and ongoing capacity building for using data and evaluation.

---

[5] In this series, essential functions are tasks that lead to achieving key milestones in a change and implementation process.

Part 1: Setting the Stage for Monitoring and Evaluation

As with all phases of the change and implementation process, preparation and planning lay the foundation for subsequent activities. "Setting the stage" includes five interrelated functions or tasks:

◆ Consider the circumstances and needs of the agency

◆ Develop a logic model

◆ Identify questions

◆ Specify possible measures, data sources, and potential data collection methods

◆ Develop an evaluation plan (including the study design)

Given that monitoring and evaluation are dynamic processes that may evolve throughout a change and implementation initiative, these tasks may be revisited over time.

1. Consider the Circumstances and Needs of the Agency

As teams prepare for monitoring and evaluation, they should determine the "big picture" objectives and scope of their efforts, consider factors related to where they are in the change and implementation process, and think about evaluation capacity.

Consider Circumstances, Select Approaches, and Identify the Scope of Monitoring and Evaluation

To inform change and implementation efforts, teams are encouraged to develop plans and processes for the following interrelated and overlapping approaches, as appropriate:

◆ **Monitoring** inputs, activities, outputs, and outcomes to support management oversight; assessing whether activities are conducted and outputs (including events and products) are generated as planned and according to schedule and budget; and supporting ongoing quality assurance and CQI processes

◆ Conducting a **fidelity assessment** to explore whether the intervention is being delivered as designed, and identify needed changes to implementation and supports

◆ Conducting a **formative evaluation** to point to areas for adjustment, identify facilitators and barriers to implementation, and guide improvements

◆ Conducting a **summative evaluation** to answer questions about whether the intervention is effective and under what circumstances

> **?** Questions to Consider
>
> ◆ How can your intervention benefit from:
>   — Monitoring?
>   — Fidelity assessment?
>   — Formative evaluation?
>   — Summative evaluation?
> ◆ What do funders or administrators require in terms of monitoring, evaluation, and reporting?
> ◆ What questions do you want to be able to answer?
> ◆ What are your monitoring and evaluation objectives?
> ◆ What is your overall proposed approach to meet those objectives?
> ◆ What monitoring and evaluation capacity does your agency have? How can it be further developed, if needed?
> ◆ Is the agency culture supportive of data-informed decision-making?

While each approach can contribute important information to the agency, each also has tradeoffs. Given the cyclical nature of monitoring and evaluation, needs may rise, fall, shift, and return throughout the change and implementation process.

In defining the purpose, scope, and direction of monitoring and evaluation efforts, teams will need to take into account the following considerations:

◆ The evidence-base of the intervention and degree of adaptation or new design (e.g., a newly designed intervention may require more indepth formative evaluation than a well-established, evidence-based practice)

◆ Where the team is in the change and implementation process

◆ What stakeholders want to know about the intervention

◆ Funding and administrative requirements

◆ Available timeframes and pressures (e.g., urgency due to a new law's mandate)

◆ Available resources and capacity for data collection and analysis

◆ Agency, staff, and participant experience with, and attitudes toward, evaluation

Exhibit 5 presents sample scenarios and possible responses.

Exhibit 5. Sample Scenarios and Monitoring/Evaluation Responses

If the agency has:	Then the team may consider:
Selected and adapted an existing intervention to fit the agency's context and community served OR designed a new intervention that aligns with its theory of change	Conducting a formative evaluation to guide improvements Reviewing the intervention to ensure that the core components are clearly articulated and ready to undergo more rigorous evaluation (i.e., assessing evaluability)
Introduced a new intervention and is wondering whether practices are consistent with the program model	Conducting a fidelity assessment
Tested, adjusted, and scaled up a well-defined intervention that showed early signs of success during the pilot	Conducting a summative evaluation to assess effectiveness
Noted interest in determining costs of implementing an intervention	Conducting a cost analysis
Started rolling out a tested intervention and continued to adapt it for application in new areas (e.g., different county systems) with different target populations	Conducting a formative evaluation to guide improvements in new context and measuring changes in capacity to implement
Implemented and evaluated a well-defined intervention (which was shown to be more effective than alternative practices) and replicated it consistently statewide	Continuing to monitor the intervention and integrate data collection into agency CQI efforts

Some agency circumstances may limit the ability to conduct rigorous fidelity assessments, formative evaluations, or summative evaluations. When resources or time are limited, teams may find ways to narrow the scope of monitoring and evaluation activities (e.g., focusing on one or a few core components rather than the full intervention). In addition, teams may consider whether they can—at a minimum—measure short-term and intermediate outcomes even when they cannot fully assess long-term impact.

> **For more information** on the benefits and tradeoffs of different types of monitoring and evaluation, see:
> • JBS International's CQI Training Academy, "Unit 6: Monitoring and Assessing Solutions, Module 1: Selecting and Monitoring Our Assessment Approach," available through CapLEARN (registration required) at https://learn.childwelfare.gov/

Consider Program Evaluability and Agency Evaluation Capacity

To ensure that limited evaluation dollars are well spent, teams should consider **program evaluability**, which explores whether evaluation is feasible and likely to provide useful information (Juvenile Justice Evaluation Center, 2003). Key aspects of evaluability are whether the intervention has realistic objectives and is defined well enough to be implemented with fidelity (e.g., there is a program manual or practice profile that specifies the core components, activities, and related expected behaviors) (JBA, 2018a). Other relevant factors include whether the agency has the capacity to provide needed data about the intervention and whether there is sufficient time to answer evaluation questions. While evaluators can conduct indepth evaluability assessments, it is useful for teams to think about these issues early in the change and implementation cycle.

As part of preparation, teams should also consider their **evaluation capacity**—that is, their ability to conduct, use, and continuously learn from evaluation processes (JBA, 2013; Preskill & Boyle, 2008). Building evaluation capacity involves developing motivation, knowledge, and skills at individual levels while also addressing organizational factors (e.g., culture, leadership) (Labin, Duffy, Meyers, Wandersman, & Lesesne, 2012).

Strategies to address evaluation capacity may involve one or more of the following:

◆ Adding additional members to the implementation team who have data and evaluation expertise

◆ Partnering with external evaluators and/or evaluation technical assistance providers

◆ Identifying evaluation "champions"

◆ Offering training and coaching to build evaluation knowledge and skills among team members

◆ Introducing tools and protocols to guide evaluation efforts and easy-to-use data systems

◆ Fostering a culture that embraces using data to learn and make improvements

These strategies can support monitoring and CQI efforts as well.

> **For more information** on evaluability and evaluation capacity building, see:
> - Juvenile Justice Evaluation Center's *Evaluability Assessment: Examining the Readiness of a Program for Evaluation* at http://www.jrsa.org/pubs/juv-justice/evaluability-assessment.pdf
> - JBA's "Evaluation Brief: Building Evaluation Capacity in Human Service Organizations" at https://www.acf.hhs.gov/cb/resource/building-evaluation-capacity

2. Develop a Logic Model

As described earlier, a program logic model is a visual representation of an intervention that shows inputs, activities, outputs, and outcomes in a structured format. Some logic models also present assumptions (which may be tied to related research and theory), factors that may influence outcomes, and indicators.

For teams implementing an established evidence-supported intervention, program developers may have included a logic model with their program materials. In these cases, teams may want to review and adapt, if needed, for their local context. Other teams will create their own logic models building from their theory of change[6] and the research conducted in selecting an appropriate intervention.

Questions to Consider

◆ What are the key intervention activities?

◆ What inputs or resources are needed to conduct the activities and deliver services?

◆ What outputs will the activities produce?

◆ What short-term and intermediate, outcomes will result from the activities?

◆ What is the desired long-term change?

◆ Are the inputs, activities, outputs, and short-term, intermediate, and long-term outcomes logically connected?

◆ What assumptions underlie your logic model and the related theory of change?

Complete the Logic Model Components

Teams can create a logic model by following the five steps outlined below. Exhibit 6 displays a logic model structure. Some teams may find it easier to enter information from left (inputs) to right (outcomes), while others may prefer starting with the end in mind and working backward. Appendix B presents an example of a completed logic model for a home visiting program.

Exhibit 6. Sample Logic Model Structure

Inputs	Activities	Outputs	Outcomes		
			Short-term	Intermediate	Long-term
1	2	3	4	4	5

---

[6] See "Change and Implementation in Practice: Theory of Change" brief.

1 **Identify inputs.** First, teams indicate the various inputs and resources needed to deliver the intervention. These may include trained staff, curriculum, guidelines, or equipment as well as strategic partnerships. Identifying the inputs allows the team to assess whether there are adequate resources and structures to carry out the activities.

2 **Identify activities.** In the next part of the logic model, teams list activities. These represent the things the team plans to do with the inputs to address the identified problem. These may reflect:

◆ Activities related to the intervention's core components and service delivery (e.g., conduct child assessments, make referrals to mental health services); to inform this step, teams may revisit core components identified as part of intervention selection and design/adaptation[7]

◆ Activities to prepare for and support the intervention's implementation (e.g., train workforce, conduct partner outreach)

3 **Identify outputs.** In the outputs section, teams list the direct results of the planned activities. Typically, these are things that can be counted (e.g., trainings held, staff trained, family meetings conducted, or assessments completed) and may also represent products created (e.g., guidelines or policies developed). Teams should think about outputs at both system and practice levels.

4 **Identify short-term and intermediate outcomes.** Next, teams list the expected short-term and intermediate outcomes that will result from the planned activities and outputs. These may include:

◆ Changes at the system, agency, or community level (e.g., changes in policies, shifts in organizational culture, engagement of community service providers)

◆ Changes related to the target population (service recipients), including changes in awareness, knowledge, attitudes, skills, behaviors, or functioning

Outcomes should be presented in a logical progression showing what may need to happen first before something else happens over time (e.g., changes in knowledge and skills before behavior changes).

5 **Identify long-term outcomes.** Finally, teams identify the long-term outcome(s). This represents the desired conditions for the system, agency, and/or target population as a result of the intervention's activities. In child welfare, long-term outcomes are often expressed in terms of the safety, permanency, and well-being of children, youth, and families. These changes may take several years to occur.

Review the Logic Model, Share With Stakeholders, and Revise as Needed

Once team members have created a logic model that they believe fairly represents their intervention, they should share it with stakeholders outside the core implementation team (e.g., additional partners, potential service recipients, evaluators, technical assistance providers, agency leadership, or funders). In presenting a logic model, teams may find it useful to use "if . . . then . . ." language, as in "if these activities are conducted as intended, then these outcomes are anticipated" (W. K. Kellogg Foundation, 2004). If connections don't seem logical or reasonable, teams may need to clarify and make revisions to their logic model. Keep in mind that teams often need several drafts before landing on a final version.

ℹ **For more information, tips, and tools** to develop a logic model, see:
- JBA's "Evaluation Brief: Developing a Logic Model" at https://www.jbassoc.com/wp-content/uploads/2018/03/Developing-Logic-Model.pdf
- W. K. Kellogg Foundation's *Logic Model Development Guide* at https://www.wkkf.org/resource-directory/resource/2006/02/wk-kellogg-foundation-logic-model-development-guide
- Child Welfare Information Gateway's and FRIENDS' *Logic Model Builder* https://www.childwelfare.gov/topics/management/effectiveness/logic-model/

---

[7] See also "Change and Implementation in Practice: Intervention Selection and Design/Adaptation" brief.

3. Identify Questions

Teams—with input from agency leaders, evaluators, staff, system partners, and service recipients—can use logic models to guide ideas for questions to explore. These questions set the direction for monitoring and evaluation and influence which data will be collected, and which analyses will be conducted to best answer the questions. Note that at this point in the process, teams may brainstorm general questions of interest. When developing an evaluation plan, evaluators typically will help teams refine and operationalize the questions into more specific research questions that can be answered using best practices in measurement.

Considering different parts of the logic model and the theory of change can help prompt several possible questions. For example, were the intervention activities implemented as expected? Did services reach the intended participants? To what extent did the intervention generate expected outputs? What factors affected implementation and outcomes? Did the intervention result in expected short-term, intermediate, and long-term outcomes? Was the intervention cost-effective? Appendix A presents additional questions organized by different aspects of the change and implementation process. Exhibit 7 presents sample questions specific to a home visiting program.

Exhibit 7. Sample Evaluation Questions for a Home Visiting Program

In the home visiting program in the logic model in appendix B, possible questions might reflect:
- **Activities (fidelity assessment)**
  - Was the home visiting program delivered in a manner consistent with the program model? At the practice level, did staff implement the core components of outreach, home visits, screenings, and referrals?
  - If not, what changes can be made to support fidelity?
- **Activities/outputs/short-term outcomes (formative evaluation)**
  - To what extent did the program reach eligible families? Were they satisfied with services?
  - What factors affected implementation? Were there barriers to parent outreach efforts, home visits, or community service provision? How can these barriers be addressed? How could readiness be improved?
  - Is there evidence of change in staff and parental awareness of community services and supports? If not, what can be improved to foster greater awareness?
  - To what extent did parents and children receive needed community services and supports? What helped in connecting them to services that met their needs?
- **Intermediate and long-term outcomes (summative evaluation)**
  - As compared with families not receiving home visits, were families receiving home visits more likely to experience improvements in family functioning? In positive parent-child interactions? In child health and development?
  - Did the home visiting program lead to reductions in reports of child abuse and neglect?
  - Was fidelity to the home visiting program model associated with better outcomes?
  - How did parental characteristics (e.g., history of substance abuse) affect program outcomes?

Teams may identify more questions of interest than they have the capacity to explore, and will need to work with leadership and other stakeholders to prioritize. Selected questions should help teams improve the intervention and make decisions.

4. Identify Measures, Data Sources, and Potential Data Collection Methods

Next, teams should identify the data they need to answer selected questions and understand their intervention's functioning, progress toward goals, and effects on desired changes.

Develop a Preliminary Measurement Framework

A **measurement framework** is a useful stepping stone in moving from the logic model to a plan for monitoring and evaluation. Thinking about identified questions to be answered, teams can consider the following elements (W. K. Kellogg, 2017):
- **Measures** – information and data that can be used to assess whether progress was made toward the desired change (these may include process, fidelity, and outcome measures)

◆ **Data collection sources** – where relevant data come from (e.g., administrative database, program records and logs, case files, staff, service participants)

◆ **Data collection methods** – strategies for collecting the data from the sources, which may include:

◆ Examining administrative data

◆ Reviewing program or case records

◆ Conducting surveys, interviews, or focus groups with program staff or service participants

◆ Observing staff service delivery and completing checklists

◆ Administering assessment instruments

◆ **Data collection frequency** – how often data will be collected

Measures should reflect how the intervention is functioning. They may be expressed in quantitative terms (numbers, percentages, rates) or qualitative terms (e.g., "the extent to which parents are engaged in case plans"). Exhibit 8 presents sample entries for a measurement framework for a home visiting program.

Exhibit 8. Sample Measurement Framework Entries for Home Visiting Program

Question	Output or Outcome	Measures	Data Collection Method/Source	Frequency of Data Collection
Did the program reach eligible families?	◆ Outreach and enrollment	◆ Number of families enrolled in the program* ◆ Percent of eligible families enrolled*	◆ Review program records	◆ Monthly
Was the home visiting component delivered as intended?	◆ Home visits	◆ Number of visits* ◆ Duration of visit* ◆ Percentage of time spent on various topics ◆ Family engagement behaviors	◆ Case file review ◆ Home visitor logs ◆ Observation ◆ Survey of home visitors and parents	◆ Monthly ◆ Every 3 months among sample
Are families receiving home visits more likely to experience improvements in positive parent-child interactions?	◆ Positive parent-child interactions	◆ Use of identified positive parenting and discipline techniques	◆ Observation ◆ Interviews with home visitors and parents	◆ Upon entering the program and every 3 months after

*Measures with an asterisk may be used for ongoing monitoring as well as to inform evaluation.

Identify Data Sources and Collection Methods

Data help teams answer their evaluation questions and gain a better understanding of the underlying "story." A single source rarely reveals the full story, so teams should examine multiple sources where feasible. Answering questions is strengthened by using both:

◆ **Quantitative data** – numerical data that measure and quantify what, who, and when

◆ **Qualitative data** – narrative data that explore and provide context about how and why

Both quantitative and qualitative data can be collected through various methods, such as review of records or administrative data, observation, surveys, interviews, focus groups, tests, or assessment tools.

When thinking about data collection, teams should also look into:

◆ Steps needed to make related changes to documentation and reporting requirements

◆ Availability of data collection instruments/tools that have been developed, validated, and/or used by other jurisdictions with similar interventions

◆ Data sharing with other agencies or community organizations that serve the target population and the necessary agreements that facilitate such sharing

Developing and implementing data collection tools and processes can take time and are best done early in the implementation process. These and other issues related to data transmittal, storage, security, and confidentiality may be addressed further during the development of an evaluation plan.

Consider Monitoring as Well as Evaluation

The measurement framework described above may be useful for thinking about needs for both ongoing monitoring and specific evaluation efforts. Routine monitoring of a home visiting program, for example, may track and report on items that tell the story of what happened when (e.g., the number of families enrolled, percentage of eligible families enrolled, number and duration of home visits). Typically, information for monitoring will be accessible through program records, administrative databases, or case reviews. Teams should consider how and when such data will be reported, in alignment with agency and funder requirements

Exploring more complex questions about why (or why not), how, and with what results generally fall to evaluation, and typically involve additional data sources and study designs. The next section and remainder of the brief focus specifically on planning for evaluation.

> **i** **For more information** on selecting measures and data collection sources:
> - W. K. Kellogg's *The Step-by-Step Guide to Evaluation*, Chapter 7, "Developing a Logic Model, Evaluation Questions, Measurement Framework, and Evaluation Plan," at
>   https://www.wkkf.org/resource-directory/resource/2017/11/wk-kellogg-foundation-step-by-step-guide-to-evaluation
> - JBA's *Formative Evaluation Toolkit: A Step-by-Step Guide and Resources for Evaluation Program Implementation and Early Outcomes* at https://www.acf.hhs.gov/cb/resource/formative-evaluation-toolkit
> - Children's Bureau's *A Guide for Implementing Improvement Through the CFSP and CFSR*, "Step 8: Select Measures and Establish Methods for Monitoring," available from https://training.cfsrportal.acf.hhs.gov/resources/3105#CFSR

5. Develop an Evaluation Plan

An evaluation plan provides the blueprint for evaluation activities. Sample plan elements are presented in exhibit 9. The evaluation plan will pull together the elements discussed in functions 1 through 4 and other key pieces, described below.

Teams are encouraged to begin thinking about their evaluation plan as they develop a theory of change and select an intervention. The evaluation plan should be integrated into the team's implementation plan.[8]

Exhibit 9. Sample Evaluation Plan Elements

- ◆ Background information about the intervention
- ◆ Logic model and theory of change
- ◆ Evaluation purpose and objectives
- ◆ Evaluation questions
- ◆ Evaluation design (study design, measures, data elements, sources, data collection methods, proposed analyses)
- ◆ Plans for managing data and ensuring data quality
- ◆ Plans for using and sharing findings
- ◆ Timeframes and milestones
- ◆ Roles and responsibilities
- ◆ Potential challenges and solutions

? Questions to Consider

- ◆ What is the purpose of the evaluation?
- ◆ What questions will evaluation explore?
- ◆ What methods will be used to answer the questions?
- ◆ How frequently will data be collected? By whom?
- ◆ How will data be analyzed? By whom?
- ◆ How will findings be communicated? To whom?
- ◆ What are possible challenges in conducting evaluation? What solutions can address these challenges?
- ◆ What are the costs of conducting the evaluation as specified in the plan? What resources are available to conduct desired data collection and implement the evaluation plan?
- ◆ What additional supports are needed? (e.g., new documentation and reporting requirements, training for data collectors, other)

---

[8] For more information on implementation plans, see "Change and Implementation in Practice: Implementation Planning and Capacity Building" brief.

Describe the Intervention and Evaluation Context

As context for an evaluation and to set the foundation, an evaluation plan often begins with:

◆ A description of the intervention, its purpose and goals, core components, and target population

◆ Relevant information on the history of the intervention, prior evaluations, and existing evidence

◆ The intervention's logic model and theory of change

◆ The purpose and objectives of the evaluation

The plan also will describe the evaluation's scope and subcomponents. For example, a formative evaluation may include usability testing of implementation processes or evaluation tools,[9] a fidelity assessment, and exploration of implementation processes and initial outcomes.

Many considerations may shape the evaluation plan, including funding or administrative requirements, the scope and existing evidence base of the intervention, available resources and time for data collection and analysis, and the agency and target population context.

Identify the Study Design

Building from the evaluation questions, implementation teams should work with experienced evaluators to identify an appropriate study design. Evaluators will help teams make decisions about design, which will be informed by multiple factors, including the extent to which an agency wants to make conclusions about its population as a whole (generalizability). In turn this will drive decisions about the cases to include in data collection (sampling).

Study designs often incorporate **comparisons** to explore and draw conclusions about changes. For example, a formative evaluation looking at initial trends in short-term outcomes may assess whether parents' knowledge of child development increased after the home visits as compared with knowledge before the program started (this before and after comparison may be referred to as a **pre-posttest**). Formative evaluations also may examine whether other changes appear to be trending in the right direction (e.g., changes in family functioning, reductions in child abuse reports). This analysis may be informative in showing changes have occurred. However, it cannot connect changes specifically to the intervention.

To assess whether changes in outcomes can be attributed to an intervention, summative evaluation (and some formative evaluation) may incorporate more **rigorous designs**, such as:

◆ An **experimental design**, which randomly assigns participants to receive intervention services or an alternative (e.g., the standard practice in the agency before the new intervention) and then makes systematic comparisons in outcomes across groups

◆ A **quasi-experimental design**, which does not require randomized assignment, but makes comparisons in outcomes between a group of individuals who receive intervention services and another group of comparable individuals who do not

Teams will want to achieve the highest rigor possible while also balancing available resources, feasibility, and agency and population context (Framework Workgroup, 2014). While experimental designs often are considered the "gold standard" of rigorous evaluation, random assignment of children and families to child welfare services is often not appropriate or doable. Quasi-experimental designs may be a good next choice when statistical methods can be used to create credible comparison groups.

In some cases, agencies may consider **nonexperimental designs**, such as:

◆ A **time-series design**, in which evaluators observe the intervention group multiple times before and after the intervention and analyze trends

◆ A **posttest-only design**, in which evaluators observe the intervention group at one point in time after the intervention, focusing particularly on comparing responses of subgroups based on such characteristics as age, sex, ethnicity, education or level of exposure to the intervention

---

[9] Usability testing is intended to quickly test and guide rapid adjustment to tools and processes and is described in a companion brief, "Change and Implementation in Practice: Intervention Testing, Piloting, and Staging."

◆ A **goal-based evaluation model**, which uses predetermined program goals and the underlying program theory (as outlined in the program logic model) as the standards for evaluation and measurement activities

◆ **Case studies**, which focus on understanding the experience of program implementation within a specific context, typically relying on qualitative research

Evaluators can lead design decisions regarding these and other options with input from decision-makers and program staff. Decisions may reflect the evaluation's objectives, available resources and timeframes, available samples to study, and the circumstances under which each design is most appropriate.

> **i** **For more information** on creating comparisons and selecting evaluation designs, see:
> - Children's Bureau's "What's the Difference: Constructing Meaningful Comparison Groups" [video] available at https://www.acf.hhs.gov/cb/capacity/program-evaluation/virtual-summit/comparison-groups
> - JBA's "Selecting an Evaluation Approach" at https://www.jbassoc.com/resource/selecting-evaluation-approach-2/

Specify Data Elements, Sources, Collection Approaches, and Data Analyses

Building from the evaluation questions, study design, and preliminary measurement framework, the evaluation plan should include information on:

◆ Identified measures, data elements, and data sources

◆ Data collection methods, tools, and procedures

◆ Data collection training

◆ Documentation and reporting requirements

◆ Data sharing and related agreements

◆ Approaches for data transmittal and storage, security, and confidentiality

◆ Proposed data analyses

There are important considerations related to data collection to think through:

◆ *What* **data should be collected.** To be meaningful, teams will want to secure data that are relevant to areas of interest, accurate, complete, timely, and actionable (JBA, 2018b).

◆ *How* **to collect the needed data.** Sometimes data collection tools (surveys, focus group protocols, observation checklists, other) will be available; often they will need to be created or adapted for the specific intervention and measures of interest. Internal or external evaluators or data analysts can help develop or adapt tools.

◆ *Who* **will collect data.** The data collectors can be from outside the agency (such as external evaluators) or inside (e.g., agency staff). Considerations may include the individual's objectivity, the ability to obtain honest responses from respondents (e.g., participants don't feel they are compelled to answer one way or another), and skills in collecting information from respondents in respectful and culturally appropriate ways (W. K. Kellogg Foundation, 2017).

◆ *From whom* **to collect data.** Evaluators or data experts can help decide whether data should be collected from the full population experiencing the intervention or a representative group, and how to sample appropriately.

◆ *What approvals* **are needed.** Data collection instruments and procedures may require specific approvals (e.g., from an agency's Institutional Review Board). Other processes may be needed to gain permission from potential respondents for use of their information. In addition, teams may need approvals for processes to ensure data security and storage.

Developing tools, obtaining the required approvals, and establishing data collection processes may take time, which should be accounted for in the evaluation plan. Starting early in the implementation planning process will allow teams to capture data at earlier stages and track changes over time. (Some aspects of data collection and analysis will be addressed further in Part 2.)

Identify Roles, Timeframes, and Milestones

The plan should clearly outline:

◆ Roles and responsibilities of evaluation and program staff for carrying out various evaluation activities

◆ Strategies to build the agency's capacity to evaluate

◆ Timeframes for beginning and completing different phases of the evaluation (e.g., preparation, data collection, data analysis, reporting)

◆ Milestones, including completion of key activities and submission of reports

These elements may need to be updated periodically over time. In addition, a high-level overview should be incorporated into the team's implementation plan.

Develop Plans for Communicating Findings and Using Results

It is important that before an evaluation is conducted teams consider how they plan to:

◆ Communicate plans for the evaluation to key stakeholders

◆ Engage potential participants, including incentives for participation

◆ Report evaluation findings, to whom, and in what format

These strategies should be incorporated into implementation team communication plans.[10]

Evaluation products should be designed to meet stakeholder needs and answer their questions, which may vary for different stakeholder groups (e.g., funders, agency leadership, or community members).

In addition to reporting, teams should plan for how they will use findings as a feedback loop to improve the intervention and its implementation and to make decisions about spreading, adjusting, or discontinuing the intervention (See Part 3).

Review Plans With Stakeholders

Before finalizing the evaluation plan, teams should have a variety of stakeholders review and provide input. This enables varied perspectives on the plan elements and feasibility.

As part of the review, stakeholders should identify potential barriers or challenges to completing the evaluation and strategies to address them. Challenges may include barriers to data collection, difficulties in getting sufficient response rates, concerns over data quality, short timeframes, or other obstacles. Planning proactively can help teams overcome challenges and strengthen the quality of their evaluation efforts.

> **For more information and tools** for developing an evaluation plan, see:
> - The Centers for Disease Control's *Developing an Effective Evaluation Plan*, available at https://www.cdc.gov/obesity/downloads/cdc-evaluation-workbook-508.pdf
> - W. K. Kellogg's *The Step-by-Step Guide to Evaluation*, Chapter 7, "Developing a Logic Model, Evaluation Questions, Measurement Framework, and Evaluation Plan" at https://www.wkkf.org/resource-directory/resource/2017/11/wk-kellogg-foundation-step-by-step-guide-to-evaluation
> - FRIENDS' Evaluation Toolkit, "Evaluation Planning" at https://www.friendsnrc.org/evaluation-toolkit/evaluation-planning

---

[10] See "Change and Implementation in Practice: Teaming" brief, Function 4, "Develop a Team Communication Plan and External Strategies"

Conducting Evaluation With a Cultural Lens

When planning and conducting an evaluation, it is important to be responsive to the cultural context of the community where the intervention is delivered (Frierson, Hood, Hughes, & Thomas, 2010). The processes of sharing information, interpreting data, and applying findings are all influenced by the participants' culture. As such, it is important that evaluators and team members engage in "reciprocal learning" with stakeholders, including program participants (Lee, 2007).

To promote cultural competence in evaluation (Centers for Disease Control, 2014):
◆ Involve stakeholders throughout the evaluation process
◆ Be mindful of personal culture and biases
◆ Recognize potential cultural implications when selecting an evaluation design, framing questions, choosing and adapting data collection tools, analyzing data, and interpreting findings
◆ Tailor dissemination of results to stakeholder needs and encourage the use of findings

For example, historically many tribes have experienced intrusive and biased research that has contributed to harmful policies and a mistrust of evaluation (Tribal Evaluation Workgroup, 2013). Starting with building relationships, teams can work collaboratively on evaluation plans that honor cultural ways and values, tap into traditions of storytelling, and respect ownership of data and findings (Tribal Evaluation Workgroup, 2013).

For more information on conducting evaluation with a cultural lens:
- Centers for Disease Control and Prevention's *Practical Strategies for Culturally Competent Evaluatio*n, https://www.cdc.gov/dhdsp/docs/cultural_competence_guide.pdf
- Tribal Evaluation Workgroup's *A Roadmap for Collaborative and Effective Evaluation in Tribal Communities,* https://www.acf.hhs.gov/sites/default/files/cb/tribal_roadmap.pdf
- National Science Foundation's *Guide to Conducting Culturally Responsive Evaluations,* https://www.purdue.edu/research/docs/pdf/2010NSFuser-friendlyhandbookforprojectevaluation.pdf

Part 2: Data Collection and Analysis

Following the processes and methods set out in the evaluation plan (described in Part 1), evaluators and/or selected team members will collect and analyze data. The sections below first discuss collecting and analyzing data generally, and then focus on two areas of particular interest, examining fidelity and conducting cost analyses. While fidelity assessment is often part of a formative or summative evaluation, it is addressed separately in this brief because of its critical role in the change and implementation process. Cost analysis (also referred to as economic evaluation) can be done on its own or coupled with other types of evaluation to answer cost-related questions.

6. Collect and Analyze Data

This step puts into action the evaluation plan (discussed under function 5).

Build Buy-in and Encourage Participation

An important part of monitoring and evaluation success is securing participation and sufficient response rates. Toward that end, teams need to clearly explain to participants (e.g., survey or interview respondents, subjects of observation) why they are collecting data and how the findings will be used to improve services. Evaluation "champions" (e.g., program managers with positive experiences using data) may help with communicating the value of good data to decision-making.

In addition, teams may encourage participation by offering incentives, as appropriate. Assuring anonymity and confidentiality can help improve participant comfort levels with responding openly, particularly in surveys and interviews.

Collect Data

To support data collection and promote data quality, teams develop protocols, distribute guidance, and conduct training, as needed. In turn, teams can systematically collect data from identified sources using the selected tools and procedures established in the evaluation plan.

Analyze Data and Interpret Results

Internal or external evaluators, data analysts, or CQI specialists can lead data analyses, as appropriate. Analyses of quantitative data may present counts, frequencies, or percentages that help teams understand the number and characteristics of services provided and their recipients; identify patterns and relationships; and highlight trends in outcomes over time. Depending on the evaluation design, analyses may present comparisons (e.g., positive parent-child interactions before and after participation in a home visiting program or changes in child abuse reports among parents participating in the program and a comparison group) along with rigorous methods of analysis (statistical tests). Analyses of qualitative data can identify common themes to further explain patterns and trends.

Visual displays (e.g., charts, pie graphs, data maps) and presentations may support analyses and interpretation. Data specialists may use techniques like data visualization to help a team see patterns, trends, and variations.

Interpretation is at the core of the evaluation process: What do the patterns and findings mean? What lessons or conclusions for next steps emerge?

? Questions to Consider

◆ To what extent do the data and analyses answer the evaluation questions?

◆ What do the numbers, patterns, or trends mean?

◆ What, if any, patterns are evident over time, across geographic locations, target populations, and/or participation levels?

◆ How can qualitative information (e.g., from interviews and focus groups) help explain the patterns?

◆ Is there confidence in the data? Where are there gaps or limitations?

◆ What else would be helpful to know? What additional analyses might be useful?

The "questions to consider" boxes below present considerations for formative and summative evaluations. Teams can use questions like these—and their identified evaluation questions—to think about evaluation findings in light of their expectations of implementation and their theory of change.

? Questions to Consider

For formative evaluation:

◆ How has implementation unfolded?

◆ Has the intervention been implemented consistently and as intended?

◆ Is the intervention meeting initial expectations?

◆ Are staff and target population members satisfied with service delivery?

◆ What are the key successes and challenges?

◆ What do the data say about needs for adjusting the intervention or improving implementation processes?

◆ What are priority areas for moving forward?

◆ How will teams continue to track progress over time?

? Questions to Consider

For summative evaluation:

◆ What evidence is there that the intervention is effective?

◆ Is the intervention meeting the objectives and desired short-term and intermediate outcomes?

◆ Is there data to assess long-term outcomes? If not, do intermediate outcomes suggest that the intervention is making progress in the right direction?

◆ Are there differences in effectiveness under certain conditions, for different settings, or for particular populations?

◆ What do the findings suggest for spreading or scaling up the intervention?

◆ What can others in child welfare learn from the findings?

ⓘ **For more information** on data collection and analysis, see:
- Children's Bureau's *Formative Evaluation Toolkit: A Step-by-Step Guide and Resources for Evaluating Program Implementation and Early Outcomes*, at https://www.acf.hhs.gov/sites/default/files/cb/formative_evaluation_toolkit.pdf
- Children's Bureau's "A Framework to Design, Test, Spread, and Sustain Effective Child Welfare Practice: Develop & Test and Compare & Learn" [video 3], at https://www.acf.hhs.gov/cb/capacity/program-evaluation/virtual-summit/framework/video3
- JBS International's CQI Training Academy "Unit 6: Monitoring and Assessing Solutions," available through CapLEARN (registration required) at https://learn.childwelfare.gov/
- JBS International's *Evidence Building Strategies in Child Welfare*, available through CapLEARN (registration required) at https://learn.childwelfare.gov/
- W. K. Kellogg's *The Step-by-Step Guide to Evaluation*, Chapter 8 "Data Collection and Analysis" https://www.wkkf.org/resource-directory/resource/2017/11/wk-kellogg-foundation-step-by-step-guide-to-evaluation
- RANDS' *Getting to Outcomes® for Home Visiting*, Step 8 at https://www.rand.org/pubs/tools/TL114/manual/step8.html#topic4

⚑ Sample Home Visiting Program Evaluations

See examples of state evaluations and related data analyses for home visiting programs at https://www.childwelfare.gov/topics/preventing/prevention-programs/homevisit/evaluate-programs/examples

7. Examine Fidelity

As described earlier, a fidelity assessment is an essential part of an effective change and implementation process and can overlap with and inform evaluations.

Fidelity assessments generally measure two types of information (PII-TTAP, 2016a):

◆ The extent to which the intervention's core components are delivered (referred to as "adherence")

◆ The quality with which the core components are delivered (referred to as "competence")

Fidelity assessments can help teams:

◆ Ensure that a selected intervention is being implemented as designed

◆ Identify needs for training, coaching, practice guidelines, or other implementation supports

◆ Bring attention to system barriers that need to be addressed (e.g., policies that don't support new practices)

Teams can assess fidelity through the steps outlined below, starting with identifying fidelity measures and assessment procedures.

Identify Fidelity Measures and Assessment Procedures

Teams that implement an established evidence-supported intervention may find that a fidelity assessment protocol already exists, which can be used as is or adjusted to fit the new context. Teams that have designed a new intervention or substantially modified core components will need to develop a new assessment.

The starting point for creating a fidelity assessment is for the team (or a subgroup) to look at the intervention's program manual, **practice profiles**,[11] or other detailed guidance that describe expected behaviors (competencies) associated with core components and core activities. Based on the expected behaviors, the team identifies possible measures that show whether or not an activity is being conducted and conducted well. Teams also will need to consider how measures will be assessed and whether specific thresholds will be set.

Next, teams identify possible data sources for each measure. Sources may include documents or case records, a management information system, structured observation, surveys or interviews with staff or service recipients, or other sources.

Exhibit 10 presents examples of fidelity measures and sources, building on the home visiting program introduced earlier. In addition to tracking tangible actions (e.g., completion of assessments) and service dosage (e.g., weekly 1-hour home visits), fidelity assessments may also explore intangibles reflected in the core components. For example, in a home visiting program, fidelity assessments should pay attention to the dynamic relationships between service providers and recipients (e.g., engagement of the parent by the home visitor) (Daro, 2010).

Exhibit 10. Examples of Expected Behaviors and Fidelity Measures in a Home Visiting Program

Core Component	Expected Behavior	Fidelity Measures	Data Source
Screen and assess child and family needs	Conduct child development screening within 90 days of enrollment in the program.	◆ Screening of new children completed within 90 days ◆ Screenings reflect assessment of child's cognitive, emotional, and motor development	◆ Case files
Make connections to needed services	Provide referrals to community services.	◆ Number of referrals made ◆ Types of services received	◆ Case files ◆ Parent interview
Engage parents	Invite participation of parents in selecting services; cue and shift directions based on parental interests/requests.	◆ Parent involvement in service selection	◆ Observation ◆ Parent interviews

To make a fidelity assessment practical, teams may need to prioritize measures and sources. Measures are not necessary for every behavior associated with every core component, but the fidelity assessment should reflect the most relevant and critical program aspects. Teams should circulate the list of fidelity measures for review and feedback among team members, frontline staff and other practitioners who will deliver the intervention, and other program stakeholders.

For more information and a tool for developing fidelity measures, see:
- Permanency Innovations Initiative Training and Technical Assistance Project's (PII-TTAP's), Development, Implementation, and Assessment Toolkit, "Section 7: Develop or Adapt Implementation Supports, Fidelity Assessment, Module 1," and "Fidelity Assessment Tool," available through CapLEARN (registration required) at https://learn.childwelfare.gov/

---

[11] For information on creating or adapting a practice profile, see "Change and Implementation in Practice: Intervention Selection and Design/ Adaptation" brief (Part 2: A Well-Defined Intervention).

Develop Tools and Protocols

After identifying measures, teams develop related tools and processes for using the fidelity assessment and collecting related data. By developing and communicating a practical, uniform approach, teams can encourage consistency in its application.

As teams develop fidelity tools and procedures, they should consider (PII-TTAP, 2016a):

◆ How they plan to use fidelity results

◆ The desired frequency of conducting the fidelity assessment

◆ Whether all staff/cases will be reviewed or a sample

◆ Who will be responsible for conducting fidelity assessments (e.g., independent observers, CQI staff, program managers, supervisors)

◆ How individuals assessing fidelity will be trained and how consistency will be ensured

◆ How data should be collected, aggregated, stored, and maintained, and how confidentiality will be protected

◆ How fidelity assessment findings and recommendations will be shared (e.g., with supervisors/coaches for developmental purposes and in aggregate form for wider distribution)

Many of these decisions will require a balance between a desire for the best information available and practical realities of what is feasible. To help develop fidelity assessment instruments, teams should include individuals with expertise in data collection and analysis as well as program developers.

> ### Sample Fidelity Tool: MiTEAM Practice Model Fidelity
>
> See an example of a fidelity tool used to collect and assess information and reinforce practices in Michigan's trauma-informed practice model. This fidelity tool relies on a mix of observation, document review, interviews, and supervisory meetings to collect data. https://miteam-vls.michigan.gov/MiTEAM-Fidelity

Collect Fidelity Data and Use Findings to Make Improvements

Applying the fidelity tools and procedures developed above, agencies should collect and monitor fidelity data over time. Assessing fidelity and making adjustments will be particularly important:

◆ When an intervention is first introduced to help identify areas in need of particular attention

◆ When an intervention has been implemented but the actual practice of it is unclear

◆ When reassessed over time to prevent "program drift"

◆ When anticipated outcomes are not occurring

Staff often view fidelity assessments as compliance driven; it is important that teams clearly communicate the purpose and use of fidelity assessments as a support for putting new skills and behaviors in place. Fidelity assessment is not about performance compliance, but rather it focuses on development and improving an agency's ability to implement effectively.

Questions to Consider

◆ To what extent do the fidelity assessment findings suggest the intervention is being implemented as intended?

◆ Are there one or more components not being implemented as intended?

◆ Is there consistency across implementing sites?

◆ What are possible barriers to fidelity?

◆ What implementation supports should be put in place or adapted to improve fidelity?

◆ What other organizational or systemic changes will improve the fidelity and sustainability of the intervention?

Teams should analyze fidelity data to understand whether the intervention is being implemented as intended and consistently across sites. Teams can further analyze findings to:

◆ Recognize strengths to build from

◆ Identify areas needing improvement and assess underlying causes for a lack of fidelity (e.g., lack of needed knowledge or skills among service providers, worker overload)

◆ Develop plans for strengthening implementation supports, (e.g., training, coaching, additional practice guidance, or other supports)

◆ Recognize organizational barriers or system issues getting in the way of implementation (e.g., a mismatch between practice guidelines and policy requirements or performance rewards) and brainstorming solutions to address

Keep in mind that teams should not use fidelity assessments for punitive purposes or to single out individuals with performance issues. Doing so can discourage staff from trying new approaches and applying new skills or from providing true data.

> ## ⚑ Sample Scenario
>
> Through a fidelity assessment of a home visiting program, the implementation team found that home visitors were not consistently engaging parents, a critical part of program success. After considering different options, the team decided to supplement training with home visitor coaching sessions. New home visitors were paired with more experienced partners who provided individualized guidance on engagement techniques as they related to specific cases. Subsequent fidelity assessments continued to monitor family engagement activities.

> **ℹ️ For more information** on fidelity assessment, see:
> - PII-TTAP's Development, Implementation, and Assessment Toolkit, "Section 7: Fidelity Assessment, Modules 1 and 2" and "Fidelity Assessment Tool" available through CAPLEARN (registration required) at https://learn.childwelfare.gov/
> - JBAs' "Evaluation Brief: Measuring Implementation Fidelity" at https://www.jbassoc.com/wp-content/uploads/2018/03/Measuring-Implementation-Fidelity.pdf
> - Children Bureau's *A Framework to Design, Test, Spread, and Sustain Effective Child Welfare Practice: Replicate & Adapt and Apply & Improve* [Video 4] at https://www.acf.hhs.gov/cb/capacity/program-evaluation/virtual-summit/framework/video4
> - JBS International's CQI Training Academy, "Unit 6: Monitoring and Assessing Solutions, Module 2: Implementation Integrity—Can We Implement as Planned?" available through CapLEARN (registration required) at https://learn.childwelfare.gov/

8. Analyze Costs

A cost analysis estimates the value of resources used to implement an intervention, and can support decision-making and allocation of limited child welfare resources (Children's Bureau, 2013). Increasingly, federal agencies and other funders require cost analyses as part of broader evaluations of projects they fund. Calculating program-level costs can be important at different stages of the change and implementation process—when selecting an intervention, piloting, scaling up, and as part of planning for sustainability.

Calculate Program-Level Costs Based on the Value of "Ingredients"

The "ingredient method" can be a practical way to calculate intervention costs (Children's Bureau, 2013). This approach begins by itemizing all resources used to conduct activities and deliver services. These may include costs associated with:

◆ Personnel salaries and benefits (including direct service staff, supervisors, managers, and administrators)

◆ Materials, supplies, and equipment

◆ Facility space and utilities

◆ Transportation (for staff or participants)

◆ Contracted services

◆ Other indirect costs (overhead costs that support delivery of program services yet are shared across programs, such as training, accounting, human resources, and information systems)

> ## ❓ Questions to Consider
>
> ◆ What items or "ingredients" make up the full cost of implementing the intervention?
>
> ◆ How might true costs differ from the program budget (e.g., inclusion of volunteer hours, shared indirect costs)?
>
> ◆ Which components are using the least/most resources?
>
> ◆ Are costs expected to change over time (when piloting, scaling up, sustaining widespread implementation)?
>
> ◆ Do benefits outweigh the costs?
>
> ◆ What are the implications of cost analyses for sustainability?

Costs should include not just what the agency pays for, but also the value of donations and volunteer time. Data may be collected on the above items through tailored templates or surveys. Such tools can help determine how much of each resource is used for different intervention components.

Conduct Various Analyses

Based on the above data, analyses can result in:

◆ Estimated total program-level costs

◆ Estimated costs of specific intervention components or activities

◆ Estimated costs per participant (combining intervention cost data with participation data)

On their own, cost analyses can offer valuable insight into the costs of implementing and sustaining an intervention. If a consistent approach is used, cost analyses can support comparisons across programs. By coupling cost analysis with program outcome studies, agencies may conduct:

◆ **A cost-effectiveness analysis** – a way to examine the relationship between costs and a unit of program effectiveness, for example, the cost per case of child maltreatment prevented (Children's Bureau, 2013)

◆ **A cost-benefit analysis** – a way to compare an intervention's costs with its benefits, which are expressed in monetary terms; for example, comparing the costs of a home visiting program with the benefits (or costs avoided) through prevention of out-of-home care and trauma-related health care (similarly, agencies can calculate **return on investment**, which is expressed as a ratio of net gains divided by costs)

While an agency can generally conduct program-level cost analyses using available management and accounting systems, it may need deeper levels of data collection and technical expertise for these latter analyses.

---

i **For more information, tools, and examples** related to analyzing costs, see:
- Children's Bureau's *Cost Analysis in Program Evaluation: A Guide for Child Welfare Researchers and Service Providers*, available at https://www.acf.hhs.gov/sites/default/files/cb/cost_analysis_guide.pdf and the related video series, available at https://www.acf.hhs.gov/cb/capacity/program-evaluation/virtual-summit/cost-analysis-videos
- JBA's Waiver Demonstration Cost Evaluation Toolkit, available at https://www.jbassoc.com/resource/cost-evaluation-toolkit/
- FRIENDS' Cost Analysis webpage with resources for prevention programs, at https://www.friendsnrc.org/activities-that-support-collaboration/cost-analysis

Part 3: Using Data to Make Decisions and Adjustments

This part of the brief addresses how teams apply what they learn from monitoring and evaluation activities to make decisions to further spread, adjust, or discontinue an intervention. While presented sequentially in this brief, findings should be applied and necessary adjustments made throughout the change and implementation process, not just at the end.

9. Share Findings and Recommendations

Following data collection and analysis, teams will want to summarize findings for different target audiences and share findings and related recommendations as specified in their communication plans. There may be several different forms in which teams can tell their intervention's "story," including written evaluation reports, articles, visual displays, briefings, or a combination. Some funders may have specific reporting requirements.

> **? Questions to Consider**
>
> ◆ What key findings should be shared with stakeholders, and in what format?
>
> ◆ What key findings and lessons may be of interest to others working in child welfare, and how can they be shared?

Beyond funding agencies, teams should think about who else should know about the results, why, and what may help them understand and learn from the findings. Sharing evaluation findings can help guide stakeholders in making needed improvements for future implementation, advocate for additional resources, and expand the knowledge base in child welfare about what works. Teams should be sensitive, however, to potential concerns among some populations about sharing findings widely.

Regardless of the format and audience, it will be important to:

◆ Summarize the evaluation design and findings simply and clearly—know the audience and adapt technical language as appropriate

◆ Explain considerations for interpreting the data

◆ Reflect how the findings support or counter the team's theory of change

◆ Share insights from multiple stakeholder perspectives

◆ Explain the implications for scaling up the intervention or replication of the intervention elsewhere

◆ Include practical recommendations for next steps to make intervention or implementation improvements and to strengthen data collection and analysis

Keep in mind that **evaluation is part of a learning process**. While it can be difficult to identify weaknesses or address potentially negative findings (e.g., the failure to achieve expected outcomes), powerful lessons can emerge from honest reflection on findings and their implications for improvements.

> **⚑ Example: Presentation of Evaluation Findings**
>
> For a sample presentation of formative evaluation findings, see "Washington County Presentation of Formative Evaluation Findings" in the Formative Evaluation Toolkit at https://www.acf.hhs.gov/sites/default/files/cb/formative_evaluation_toolkit.pdf

> **ⓘ For more information** on communicating findings, see:
> - Children's Bureau's *Guide to Data-Driven Decision Making: Using Data to Inform Practice and Policy Decisions in Child Welfare Organizations*, Chapter 4: "Communicating Results to Decision Makers," at https://www.acf.hhs.gov/cb/resource/guide-to-dddm
> - OPRE's *Program Manager's Guide to Evaluation*, Chapter 9: "How Can You Report What You Learned," at http://www.acf.hhs.gov/programs/opre/research/project/the-program-managers-guide-to-evaluation
> - W. K. Kellogg's *The Step-by-Step Guide to Evaluation*, Chapter 9 "Summarize, Communicate, and Reflect on Evaluation Findings," at https://www.wkkf.org/resource-directory/resource/2017/11/wk-kellogg-foundation-step-by-step-guide-to-evaluation

10. Make Decisions to Further Spread, Adjust, or Discontinue the Intervention

Ideally, the change and implementation process will reflect continuous learning with data collection informing subsequent actions. Sometimes these actions will be rapid responses (e.g., quick adjustments following usability testing), while at other times it may be slower and more deliberate (e.g., determining long-term sustainability of a large program). The following subsections present considerations for general reflection and for specific formative and summative evaluation findings.

Reflect on Monitoring and Evaluation Findings With Stakeholders

At key points in the monitoring and evaluation processes (e.g., semiannual check-in, completion of a pilot test, following a fidelity assessment or evaluation analysis), teams should bring stakeholders with various perspectives together to review findings, discuss implications, and identify next steps. These are valuable opportunities to reflect on what the data reveal about what has worked, what hasn't, what it means, and lessons learned for moving forward.

Make Decisions About Next Steps Following a Formative Evaluation

As shown in Exhibit 11, teams use formative evaluation findings to determine next steps and further develop their intervention. Any time the team discovers the intervention is causing harm to children, youth, or families, they should stop implementation. More commonly, data may point to areas for adjustment in implementation processes or to the intervention.

Increasingly, agencies are looking for faster ways to use data-driven approaches to make improvements. Teams may turn to rapid learning methods, such as "Plan-Do-Study-Act" cycles that use data quickly to provide feedback on implementation and program improvement activities (Taylor et al., 2014).

Questions to Consider

- What are the implications of monitoring and evaluation findings for next steps?
- Has the intervention been fully implemented as intended?
- Is there evidence of effectiveness?
- Is there evidence of progress toward short-term and intermediate outcomes?
- Is there evidence of progress toward long-term outcomes?
- Have there been unintended side effects or harm?
- Is the intervention sustainable?
- Should the intervention be adapted? Would it be more effective to address needs in a different way?
- If the intervention was successful and is sustainable, should it be expanded?

When making adjustments to an intervention, teams should continue to be mindful of maintaining the integrity of the intervention model and its core components. Before modifying intervention components, teams should examine whether failure to achieve outcomes was caused by poor or incomplete implementation processes or poor fidelity to the program model (Children's Bureau, 2014). In some circumstances, however, research-informed adaptations may be appropriate to better suit the setting or the population served (Durlak, 2011).

Teams also use formative evaluation findings to decide if and when the intervention may be ready to move to a summative evaluation. At this point, adjustments should have been made and the intervention and its implementation supports should be in place.

Moving ahead after a formative evaluation, teams should revisit plans and processes for continuing to collect and analyze process data and track progress.

Exhibit 11. How Formative Evaluation Findings May Shape Subsequent Actions

If formative evaluation findings show:	Then teams should:
The initial results indicate harm for children, youth, or families	Stop implementing the intervention
The intervention fidelity (integrity) is weak AND the intervention does not appear to result in expected outputs or short-term outcomes	Make improvements to fidelity, target population exposure to the intervention, quality of service delivery, receptiveness to the intervention, and/or intervention components
The intervention fidelity (integrity) is high BUT the intervention does not appear to result in expected outputs and short-term outcomes	Assess limitations in the evaluation and conduct further analyses, as appropriate, OR revisit problem exploration and intervention selection, OR make adaptations to the intervention, OR stop implementing
The intervention fidelity (integrity) is high AND the intervention results in expected outputs AND short-term outcomes are trending in the expected direction	Proceed to summative evaluation

Adapted from PII-TTAP & PII Evaluation Team, 2013, p. 14.

Make Decisions About Next Steps Following a Summative Evaluation

If evaluation findings show that the intervention has been successfully implemented and desired outcomes for the target population have been achieved, then teams may want to continue implementation and perhaps spread the intervention to new areas. Other possible scenarios are shown in exhibit 12.

Exhibit 12. How Summative Evaluation Findings May Shape Subsequent Actions

If summative evaluation results show:	Then teams should:
The intervention was implemented as designed AND there is strong evidence of effectiveness	Proceed with further replication and spread the intervention AND continue to conduct formative and summative evaluation regularly
Intervention was implemented as designed AND long-term outcomes were not affected	Assess limitations in the evaluation and conduct further analyses, as appropriate, OR return to problem exploration for further analysis, OR modify the intervention based on data, OR discontinue the intervention
Intervention was not implemented as designed AND long-term outcomes were not achieved	Adapt the intervention to improve fidelity to the design OR discontinue the intervention
Short-term, intermediate, or long-term outcomes indicate harm for children, youth, or families	Stop implementing the intervention

Adapted from PII-TTAP & PII Evaluation Team, 2013, p. 17.

In some cases, teams may not yet have evidence of long-term outcomes, but may decide to sustain a program based on early indicators. Several criteria should inform decisions about whether to sustain an intervention, including (PII-TTAP, 2016c):

◆ Evaluation findings show the intervention is affecting the target population as intended
◆ The intervention addresses a significant identified need and is supported by a solid theory of change

◆ The intervention aligns with agency or organization priorities and capacity

◆ Internal and external stakeholders—including target population and community members— support the intervention

If findings do not show desired outcomes, it is important to disentangle whether the intervention was implemented as designed and did not have expected results (i.e., intervention failure), or the intervention was not implemented as designed and so did not lead to expected results (i.e., implementation failure). If the latter is the case, teams may need to identify ways to strengthen implementation with fidelity. If findings do not show desired outcomes, teams also may want to consider potential limitations in the study design, measurement, or analyses.

Not all interventions should be sustained. A critical reason for discontinuing an intervention is if evaluations indicate harm to children, youth, and families. Or, it may be that the intervention was costlier or did not result in more favorable outcomes when compared with alternatives. Other reasons may be that initial goals were fulfilled and there is no longer a need to continue. Finally, there may not be sufficient leadership and other stakeholder support or adequate capacity and funding to continue. In some cases, evaluation findings may suggest that some components of the intervention or implementation processes should be sustained, but that other parts should be adapted or discontinued.

Think About Readiness, Ongoing Capacity, and Motivation

When making decisions about whether to sustain and/or expand an intervention, teams should consider not only evaluation findings but also readiness. Capacity considerations may reflect:

◆ **Leadership** – Is there ongoing leadership support for the intervention?

◆ **Program champions** – Are there visible stakeholders that advocate and garner ongoing support?

◆ **Culture and climate** – Does the organizational culture foster its success? Does the external environment (e.g., broader child welfare system, state legislation and policies) promote sustainment? How does workforce morale affect implementation?

◆ **Resource availability** – Is there sufficient funding and staff to support continuation or expansion?

◆ **Knowledge and skills** – Have intervention-specific knowledge and skills been institutionalized to carry on practices?

◆ **Supportive structures** – Can implementation supports, such as training, coaching, fidelity monitoring, and data systems, be sustained to build capacity for ongoing implementation and improvements? Will contracts with service providers need modifications?

◆ **Relationships and networks** – Have key stakeholders been adequately engaged? Are partnerships with external systems and community organizations that contribute to service delivery intact?

Motivation issues relate to whether agency staff see the intervention as a priority, consider it compatible with values and practices, perceive it as advantageous to other alternatives, and find it manageable. Motivation may also be tied to the degree to which stakeholders recognize positive outcomes.

Earlier in the change process, teams may have used readiness assessments to examine factors contributing to intervention-specific capacity and motivation, and may want to reassess these factors again to consider the current levels of readiness and the implications for expansion and sustainability.[12] Evaluation can help explore changes in readiness over time and its effect on outcomes

---

> ℹ️ **For more information** on using data to make decisions, see:
> • Children Bureau's "A Framework to Design, Test, Spread, and Sustain Effective Child Welfare Practice: Tying it All Together" [video 5], at https://www.acf.hhs.gov/cb/capacity/program-evaluation/virtual-summit/framework/video5
> • PII-TTAP's Development, Implementation, and Assessment toolkit, "Section 10: Plan for Sustaining the Innovation." Available through CapLEARN (registration required) at https://learn.childwelfare.gov/

---

[12] For more information on conducting a readiness assessment, see "Change and Implementation in Practice: Readiness" brief and tool at https://capacity.childwelfare.gov/states/focus-areas/cqi/change-implementation/readiness/

Part 4: Sustainability Planning

While sustainability planning is addressed here as a final task, teams should be thinking about sustainability as soon as they select, adapt, or design an intervention. Development of a sustainability plan will also coincide with plans to scale up.

11. Refine and Implement a Sustainability Plan

Once a decision has been made about whether an intervention will be continued or adapted, teams should finalize a sustainability plan. This plan will reflect thinking that started when the intervention was first selected or designed. Exhibit 13 presents common elements in a sustainability plan.

Exhibit 13. Sustainability Plan Elements

- Purpose and objectives
- Evidence for sustaining or adapting an intervention
- Plans for continuing the full intervention or selected components
- Action steps
- Timelines, roles, and responsibilities
- Projected costs and potential funding sources
- Needed supports
- Monitoring, fidelity assessment, and CQI approaches
- Anticipated challenges and solutions

In their sustainability plans, teams should incorporate proposed strategies to maintain and foster organizational capacities in the following areas:

- **Resources** – including funding, staffing, and materials
- **Infrastructure** – including implementation supports that facilitate staff recruitment and retention, training, coaching, fidelity assessment, data systems, and communication avenues
- **Knowledge and skills** – focusing not only on intervention-specific knowledge and skills to carry out service delivery but also program management and evaluation knowledge and skills
- **Culture and climate** – including strategies that encourage continued buy-in and motivation for the intervention throughout the agency as well as its continuous improvement
- **Engagement and partnership** – partnering with system partners, community organizations, families, and youth to support service delivery

Teams should think through what, if anything, needs to change in moving the intervention forward (e.g., what new policies need to be put in place, where the program will be housed, how staff will be organized). Teams may also need to spend some time researching ongoing funding streams to cover anticipated costs, particularly if a grant or special project is ending.

? Questions to Consider

- Do the outcomes merit ongoing investment in the intervention?
- Does the team want to sustain the full intervention or selected key components? If not, which parts should not be sustained?
- Are there fiscal and staffing resources to sustain the intervention?
- Is there continued leadership support? Is there staff, community, and other stakeholder support?
- Are the implementation supports (e.g., training, coaching, and data systems) maintainable?
- What key changes need to be made (policies, procedures) to support intervention sustainability?
- What partners can help prepare for sustainability?
- How can effective communication help achieve sustainability?
- Have lessons learned been shared?
- Are plans in place for continuation and sustainability?

Exhibit 14 presents common sustainability planning mistakes and related tips.

Exhibit 14. Common Sustainability Planning Mistakes and Tips

Common Mistakes	Do This Instead
Start sustainability planning too late, as an afterthought.	Start sustainability planning early in the implementation process, and revisit the sustainability plan routinely.
Fail to include key stakeholders who will be vital to sustainability.	Involve partners and other key stakeholders in sustainability planning team.
Begin with the question, "How will we pay for it?"	Begin by asking, "What do we want to sustain, and why?" Then move into, "How will we sustain it?"

Source: Child Welfare Information Gateway, 2018.

Example: Sustainability Plan

See a sample sustainability plan within PII-TTAP's Development, Implementation, and Assessment Toolkit
https://learn.childwelfare.gov/toolkit/sites/default/files/resources/Example_Sustainability_Plan.pdf

---

For more information on sustainability planning and related tools, see:
- PII-TTAP's Development, Implementation, and Assessment toolkit, "Section 10: Plan for Sustaining the Innovation," and "Sustainability Planning Tool." Available through CapLEARN (registration required) at https://learn.childwelfare.gov/
- Child Welfare Information Gateway's Sustainability webpage at https://www.childwelfare.gov/topics/management/funding/planning/sustainability/
- Children's Bureau's "Sustainability Planning Worksheet for Children's Bureau Discretionary Grantees" at https://www.acf.hhs.gov/cb/resource/cbdg-toolkit-sustainability-planning-worksheet

Conclusion

Monitoring, evaluating, and applying findings lie at the core of continuous improvement. For a child welfare agency and its system partners, these activities can inform decision-making for moving forward and improving the implementation of a specific intervention to address an identified problem or need.

For the local community and broader child welfare field, monitoring and evaluation findings can show evidence of success. These findings may inform the knowledge base of both what works and what doesn't, as well as lessons learned along the way. As such, current findings can inform later change and implementation processes—supporting research for exploring problems, developing a theory of change, and selecting or adapting an intervention, and helping shape processes for testing, piloting, staging, monitoring, and evaluating. Ultimately, these continuous improvement cycles can help child welfare systems achieve their goals to improve outcomes for children, youth, and families.

Getting Help

Many teams will need support to plan and conduct evaluations. Teams that do not have internal experience or skills in this area can seek help by:

- Exploring opportunities for assistance from the Center for States (find contact information for Liaisons here: https://capacity.childwelfare.gov/map/)
- Contacting local universities
- Reaching out to other evaluation and technical assistance providers for potential assistance

Key Milestones for Monitoring, Evaluating, and Applying Findings*:

- Logic model developed and documented
- Evaluation plan developed
- Fidelity data collected and analyzed
- Formative evaluation data related to outputs, implementation, and short-term outcomes collected and analyzed
- The intervention and/or implementation processes have been adjusted, as needed, based on usability testing, piloting, and formative evaluation
- Summative evaluation data related to intervention effectiveness and short-term, intermediate, and long-term outcomes collected and analyzed
- Evaluation findings discussed with key stakeholders and disseminated
- Decision made to adjust, sustain, spread, or discontinue the intervention based on the evidence collected
- Sustainability plan developed and discussed with stakeholders

* Agencies may meet these milestones at various points over the course of the change and implementation process, and may circle back to some milestones multiple times.

Related Resources and Tools

For related videos, webinars, and other resources on monitoring, evaluating, and applying findings, see:
https://capacity.childwelfare.gov/states/focus-areas/cqi/change-implementation/monitoring-evaluating/

Training Resources

◆ Center for States' "Monitoring, Evaluating, and Applying Findings." Videos and video workbook at https://capacity.childwelfare.gov/states/focus-areas/cqi/change-implementation/monitoring-evaluating/

◆ JBS International's "Unit 6: Monitoring and assessing solutions." In *CQI Training Academy*. Available through CapLEARN (registration required) at https://learn.childwelfare.gov/

◆ PII-TTAP's "Section 9: Monitor and Assess the Innovation" and "Section: 10. Plan for Sustaining the Innovation" in Development, Implementation, and Assessment toolkit. Available through CapLEARN (registration required) at https://learn.childwelfare.gov/

◆ Children's Bureau's "A framework to design, test, spread, and sustain effective practice in child welfare." Video series available at https://www.acf.hhs.gov/cb/capacity/program-evaluation/virtual-summit/framework

Website

◆ Building Capacity to Improve Program Evaluation in Child Welfare. Children's Bureau. https://www.acf.hhs.gov/cb/capacity/program-evaluation

Publications

◆ Framework Workgroup. (2014). *A framework to design, test, spread, and sustain effective child welfare practice*. Children's Bureau, Administration for Children and Families, U.S. Department of Health and Human Services. Retrieved from https://www.acf.hhs.gov/sites/default/files/cb/pii_ttap_framework.pdf

◆ OPRE. (2010). *Program manager's guide to evaluatio*n. Second edition. Retrieved from: http://www.acf.hhs.gov/programs/opre/research/project/the-program-managers-guide-to-evaluation

◆ W. K. Kellogg Foundation. (2017). *The step-by-step guide to evaluation. How to become savvy evaluation consumers*. Available from https://www.wkkf.org/resource-directory/resource/2017/11/wk-kellogg-foundation-step-by-step-guide-to-evaluation

◆ James Bell Associates. (2018). *Formative evaluation toolkit: A step-by-step guide and resources for evaluation program implementation and early outcomes*. Children's Bureau, Administration for Children and Families, U.S. Department of Health and Human Services. Retrieved from https://www.acf.hhs.gov/cb/resource/formative-evaluation-toolkit

◆ Calculating the Costs of Child Welfare Services Workgroup. (2013). *Cost analysis in program evaluation: A guide for child welfare researchers and service providers*. Children's Bureau, Administration for Children and Families, U.S. Department of Health and Human Services. Retrieved from https://www.acf.hhs.gov/sites/default/files/cb/cost_analysis_guide.pdf

◆ James Bell Associates. (2018). *Guide to data-driven decision making: Using data to Inform practice and policy decisions in child welfare organizations*. Children's Bureau, Administration for Children and Families, U.S. Department of Health and Human Services. Retrieved from https://www.acf.hhs.gov/sites/default/files/cb/guide_to_dddm.pdf (Related video series https://www.acf.hhs.gov/cb/resource/data-driven-decision-making-series)

◆ Children's Bureau. (2018). *Evaluation resource guide for Children's Bureau discretionary grantees*. Retrieved from https://www.jbassoc.com/wp-content/uploads/2018/11/Evaluation-Resource-Guide-final-508.pdf

References

Calculating the Costs of Child Welfare Services Workgroup. (2013). *Cost analysis in program evaluation: A guide for child welfare researchers and service providers*. Washington, DC: Children's Bureau, Administration for Children and Families, U.S. Department of Health and Human Services. Retrieved from https://www.acf.hhs.gov/sites/default/files/cb/cost_analysis_guide.pdf

Centers for Disease Control and Prevention. (2011). *Developing an effective evaluation plan*. Atlanta, Georgia: Centers for Disease Control and Prevention, National Center for Chronic Disease Prevention and Health Promotion, Office on Smoking and Health, Division of Nutrition, Physical Activity, and Obesity. Retrieved from https://www.cdc.gov/obesity/downloads/cdc-evaluation-workbook-508.pdf

Centers for Disease Control and Prevention. (2014). *Practical strategies for culturally competent evaluation*. Atlanta, GA: U.S. Department of Health and Human Services. Retrieved from https://www.cdc.gov/dhdsp/docs/cultural_competence_guide.pdf

Children's Bureau. (2014). A *guide for implementing improvement through the CFSP and CFSR*. Washington, DC: Children's Bureau, Administration for Children and Families, U.S. Department of Health and Human Services. Retrieved from https://training.cfsrportal.acf.hhs.gov/resources/3105#CFSR

Children's Bureau. (2015). *Evaluation of implementation and outcomes. Supporting change in child welfare: An evaluation of training and technical assistance*. Washington, DC: Children's Bureau, Administration for Children and Families, U.S. Department of Health and Human Services. Retrieved from https://www.acf.hhs.gov/sites/default/files/cb/brief_implementation.pdf

Child Welfare Capacity Building Collaborative. (2015a). *Building capacity to manage change and improve child welfare practice* [Brief #2]. Available from https://library.childwelfare.gov/cwig/ws/library/docs/capacity/Record?w=NATIVE%28%27BASIC+ph+is+%27%27child+welfare+capacity+building +collaborative +brief%27%27%27%29&upp=0&order=native%28%27year%2FDescend%27%29&rpp=25&r=1&m=2

Child Welfare Information Gateway. (2018). *Sustainability planning tips*. Retrieved from https://www.acf.hhs.gov/sites/default/files/cb/sustainability_plan.pdf

Daro, D. (2010). *Replicating evidence-based home visiting models: A framework for assessing fidelity*. Children's Bureau, Chapin Hall at the University of Chicago, and Mathematica Policy Research, Inc. Retrieved from https://www.mathematica-mpr.com/our-publications-and-findings/publications/replicating-evidencebased-home-visiting-models-a-framework-for-assessing-fidelity

Durlak, J. (2011). *The importance of quality implementation for research, practice, and policy*. Office of the Assistant Secretary for Planning and Evaluation, U.S. Department of Health and Human Services. Retrieved from https://aspe.hhs.gov/report/importance-quality-implementation-research-practice-and-policy

Framework Workgroup. (2014). *A framework to design, test, spread, and sustain effective child welfare practice*. Children's Bureau, Administration for Children and Families, U.S. Department of Health and Human Services. Retrieved from https://www.acf.hhs.gov/sites/default/files/cb/pii_ttap_framework.pdf

Frierson, H. T., Hood, S., Hughes, G. B., & Thomas, V. (2010). A guide to conducting culturally responsive evaluations. In *The 2010 User-Friendly Handbook for Project Evaluation*. National Science Foundation. Retrieved from https://www.purdue.edu/research/docs/pdf/2010NSFuser-friendlyhandbookforprojectevaluation.pdf

James Bell Associates. (2007). *Evaluation brief: What's the difference? Understanding process and outcome evaluation*. Retrieved from https://www.jbassoc.com/wp-content/uploads/2018/03/Understanding-Process-Outcome-Evaluation.pdf

James Bell Associates. (2013). *Evaluation brief: Building evaluation capacity in human service organizations*. Washington, DC: Children's Bureau, Administration for Children and Families, U.S. Department of Health and Human Services. Retrieved from https://www.acf.hhs.gov/cb/resource/building-evaluation-capacity

James Bell Associates. (2017). *Waiver demonstration cost evaluation toolkit: Introduction and module A: Program-level cost analysis*. Children's Bureau, Administration for Children and Families, U.S. Department of Health and Human Services. Retrieved from https://www.jbassoc.com/resource/cost-evaluation-toolkit/

James Bell Associates. (2018a). *Formative evaluation toolkit: A step-by-step guide and resources for evaluation program implementation and early outcomes*. Washington, DC: Children's Bureau, Administration for Children and Families, U.S. Department of Health and Human Services. Retrieved from https://www.acf.hhs.gov/cb/resource/formative-evaluation-toolkit

James Bell Associates. (2018b). *Guide to data-driven decision making: Using data to inform practice and policy decisions in child welfare organizations*. Washington, DC: Children's Bureau, Administration for Children and Families, U.S. Department of Health and Human Services. Retrieved from https://www.acf.hhs.gov/cb/resource/guide-to-dddm

Juvenile Justice Evaluation Center, Justice Research and Statistics Association. (2003). *Evaluability assessment: Examining the readiness of a program for evaluation*. Retrieved from http://www.jrsa.org/pubs/juv-justice/evaluability-assessment.pdf

Labin, S. N., Duffy, J. L., Meyers, D. C., Wandersman, A., & Lesesne, C. A. (2012). A research synthesis of the evaluation capacity building literature. *American Journal of Evaluation, 33*(3), 307–338. Retrieved from https://www.academia.edu/14340302/A_Research_Synthesis_of_the_Evaluation_Capacity_Building_Literature

Lee, K. (2007). *The importance of culture in evaluation: A practical guide for evaluators*. The Colorado Trust. Retrieved from http://www.communityscience.com/pdfs/CrossCulturalGuide.r3.pdf

Office of Planning, Research, and Evaluation (OPRE), Administration on Children and Families. (2010). *Program manager's guide to evaluation*. Second edition. Retrieved from: http://www.acf.hhs.gov/programs/opre/research/project/the-program-managers-guide-to-evaluation

Openshaw, L. L., Lewellen, A., & Harr, C. (2011). A logic model for program planning and evaluation applied to a rural social work department. *Contemporary Rural Social Work, 3*, 40–48.

Permanency Innovations Initiative Training and Technical Assistance Project. (2016a). *Guide to developing, implementing, and assessing an innovation*. (Volume 3: Installation). Washington, DC: U.S. Department of Health and Human Services, Administration for Children and Families, Children's Bureau. Retrieved from https://www.acf.hhs.gov/sites/default/files/cb/guide_vol3_installation.pdf

Permanency Innovations Initiative Training and Technical Assistance Project. (2016b). *Guide to developing, implementing, and assessing an innovation*. (Volume 4: Initial Implementation). Washington, DC: U.S. Department of Health and Human Services, Administration for Children and Families, Children's Bureau. Retrieved from https://www.acf.hhs.gov/sites/default/files/cb/guide_vol4_initial_implementation.pdf

Permanency Innovations Initiative Training and Technical Assistance Project. (2016c). *Guide to developing, implementing, and assessing an innovation*. (Volume 5: Full Implementation). Washington, DC: U.S. Department of Health and Human Services, Administration for Children and Families, Children's Bureau. Retrieved from https://www.acf.hhs.gov/sites/default/files/cb/guide_vol5_full_implementation.pdf

Permanency Innovations Initiative Training and Technical Assistance Project & Permanency Innovations Initiative Evaluation Team. (2013). *The PII approach: Building implementation and evaluation capacity in child welfare* (Rev. ed). Washington, DC: U.S. Department of Health and Human Services, Administration for Children and Families, Children's Bureau, and Office of Planning, Research, and Evaluation. Retrieved from https://www.acf.hhs.gov/sites/default/files/cb/pii_approach_report.pdf

Preskill, H., & Boyle, S. (2008). A multidisciplinary model of evaluation capacity building. *American Journal of Evaluation, 29*(4), 443–459. Retrieved from http://www.unm.edu/~marivera/522%20readings%203/Multidisciplinary%20model%20of%20evaluation%20capacity%20building.pdf

Proctor, E., Silmere, H., Raghavan, R., Hovmand, P., Aarons, G., Bunger, A., ... Hensley, M. (2011). Outcomes for implementation research: Conceptual distinctions, measurement challenges, and research agenda. *Administration and Policy in Mental Health and Mental Health Services Research, 38*(2), 65–76.

Rabinowitz, P. (n.d.) Introduction to evaluation, section 6: Participatory evaluation. In *Community Toolbox*. Center for Community Health and Development, University of Kansas. Retrieved from https://ctb.ku.edu/en/table-of-contents/evaluate/evaluation/participatory-evaluation/main

Taylor, M. J., McNicholas, C., Nicolay, C., Darzi, A., Bell, D., & Reed, J. E. (2014). Systematic review of the application of the plan-do-study-act method to improve quality in healthcare. *BMJ Quality & Safety, 23*(4), 290–298. https://doi.org/10.1136/bmjqs-2013-001862

Tribal Evaluation Workgroup. (2013). *A roadmap for collaborative and effective evaluation in tribal communities*. Children's Bureau, Administration for Children and Families, U.S. Department of Health and Human Services. Retrieved from https://www.acf.hhs.gov/sites/default/files/cb/tribal_roadmap.pdf

Wandersman, A., Alia, K. A., Cook, B., & Ramaswamy, R. (2015). Integrating empowerment evaluation and quality improvement to achieve healthcare improvement outcomes. *BMJ Quality & Safety, 24*(10), 645–52.

W. K. Kellogg Foundation. (2004). *Logic model development guide. Using logic models to bring together planning, evaluation, and action*. Retrieved from https://www.wkkf.org/resource-directory/resource/2006/02/wk-kellogg-foundation-logic-model-development-guide

W. K. Kellogg Foundation. (2017). *The step-by-step guide to evaluation. How to become savvy evaluation consumers*. Battle Creek, MI: Author. Retrieved from https://www.wkkf.org/resource-directory/resource/2017/11/wk-kellogg-foundation-step-by-step-guide-to-evaluation

Appendix A:
Questions Related to Evaluation and the Change and Implementation Process

Stage/Topic	Questions to Consider to *Prepare for* Evaluation	Sample Questions That May be *Answered Through* Evaluation
Problem exploration	◆ Has the **problem** and its **root cause**(s) been clearly identified? Is there confidence that the true root cause has been identified? ◆ Can data examined as part of problem exploration serve as a **baseline** for examining changes in outcomes over time? To what extent can the same data sources be used for evaluation? ◆ Has the **target population** been clearly defined?	◆ To what extent does the intervention contribute to desired changes that address the identified problem?
Teaming	◆ Does the implementation team include (or have support from) individuals with **data and evaluation expertise**?	◆ How did the team's composition affect implementation?
Theory of change	◆ Is there **a clear theory of change** based on data? ◆ To what extent is the theory of change **credible**? ◆ Is there a clearly defined **long-term outcome** and expected pathway of change? ◆ What **indicators** can help track progress at each part of the pathway of change? ◆ What **target population** is expected to experience change at each part of the pathway of change? ◆ Are underlying **assumptions** clearly identified? To what extent are these assumptions informed by evidence?	◆ To what extent do evaluation findings support the pathway of change illustrated in the theory of change? ◆ To what extent do the causal links and assumptions hold true? If not, why not?
Intervention selection and design/ adaptation	◆ Does the intervention align with the theory of change and **fit** agency and target population needs? ◆ Is the intervention and its **core components** sufficiently defined to evaluate? (evaluability) ◆ Is there a **program manual or practice profile** that clearly specifies core components, activities, and expected behaviors? ◆ Have there been **prior evaluations** of the intervention? ◆ Have **adaptations** or new components to the intervention model been clearly documented?	◆ How did adaptations to the intervention improve fit with the agency or target population? How did they affect the intervention's effectiveness? ◆ What additional modifications (if any) to the intervention are needed to ensure fit, feasibility, and effectiveness?

Stage/Topic	Questions to Consider to *Prepare for* Evaluation	Sample Questions That May be *Answered Through* Evaluation
Readiness	◆ Has **readiness for change and implementation** been assessed? ◆ Were strengths and **areas for development** identified? ◆ Does the agency have sufficient internal and/or external **capacity** and resources to evaluate? ◆ Does the agency culture support a **learning environment**?	◆ How has readiness changed over time? ◆ In what ways did capacity building strategies contribute to improvements in readiness? ◆ How did readiness and capacity affect implementation? ◆ What (if any) additional capacity building strategies are needed to promote continued readiness?
Implementation planning and capacity building	◆ Have **strategies** been developed to address readiness needs and build capacity? ◆ Has a thorough **implementation plan** been documented? ◆ Have **implementation supports** been put in place? ◆ Have **indicators of success** been identified and discussed with stakeholders? ◆ Have **processes for collecting data** to monitor fidelity, implementation, and outcomes been identified?	◆ To what extent were intervention components implemented as intended? (fidelity) ◆ To what extent were implementation supports adequate to support implementation? ◆ What factors supported or hindered implementation? ◆ How can facilitators be leveraged, and barriers be addressed to ensure implementation fidelity?
Intervention testing, piloting, and staging	◆ Did key processes and tools undergo **usability testing**? ◆ Was a **pilot** conducted of the intervention on a small scale? ◆ Were **adjustments** made to intervention components and implementation strategies based on usability testing and pilot findings?	◆ What has worked well during the pilot and what needs to be improved? ◆ How feasible is it to scale the intervention across the state and obtain the intended results? What would it take to scale up? ◆ What would scaling up cost?
Monitoring, evaluating, and applying findings	◆ Has a **logic model** been developed with clearly stated and measurable inputs, activities, outputs, and outcomes? ◆ Has the purpose and importance of evaluation been communicated to stakeholders? Have **communication** plans to share findings been developed? ◆ Have **evaluation questions** been identified and discussed with stakeholders? ◆ Has a **detailed evaluation plan** been prepared? (Including proposed study design, data sources, data collection methods, data analyses, etc.) ◆ What **comparisons** can be made to understand whether the intervention is responsible for changes in outcomes?	◆ To what extent did the intervention achieve desired short-term, intermediate, and long-term outcomes? ◆ What (if any) were the unintended outcomes? ◆ Under what conditions and for whom was the intervention most and least effective? ◆ To what extent was desired fidelity achieved? ◆ What was the relationship between fidelity and outcomes? ◆ How are the intervention components related to outcomes? Are some intervention components more critical to achieving outcomes than others? ◆ How does exposure (or dosage) affect outcomes? ◆ What was the cost of implementation? Given the calculated costs, how sustainable is this intervention? ◆ Do benefits outweigh costs?

Appendix B:
Sample Logic Model for a Home Visiting Program

Inputs	Activities	Outputs	Outcomes		
			Short-term	Intermediate	Long-term
◆ Collaborative partnership state/local agencies/university ◆ Home visiting grant funding and technical assistance ◆ Home visiting model and related program materials ◆ State program manager ◆ Skilled home visiting staff and supervisors ◆ Data information system	◆ Form collaborative agreements* ◆ Provide cross-system training* ◆ Implement outreach strategies to high-risk populations ◆ Conduct home visits to new parents ◆ Engage parents ◆ Facilitate parent-child activities ◆ Conduct parent and child screenings ◆ Provide referrals to community services and coordinate the intake and follow-up	◆ # of partnership agreements signed* ◆ # of collaborative meetings* ◆ # of trainings and participants* ◆ # of families enrolled in program ◆ #, frequency, and duration of home visits ◆ # of screenings conducted ◆ # and type of referrals ◆ #, type, and dosage of services received by families	◆ Increased communication between partner organizations* ◆ Increased staff and parental awareness of community services ◆ Improved parental understanding of child development and needs ◆ Increased parental knowledge of nurturing parenting behaviors and positive discipline techniques ◆ Increased parental connections with needed services, including health and mental health services and support groups	◆ Improved coordination between partner organizations* ◆ Improved family functioning ◆ Increased parental resilience ◆ Increased positive parent-child interactions ◆ Improved child health and development ◆ Decreased child abuse and neglect	◆ **Thriving families that reflect child safety and child and family well-being**

Note: Items with ***** represent system-level activities, outputs, and outcomes.