

Utility Led Evaluation

Invigorating Public Health in Pennsylvania through Community-based Initiatives

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CDC Standards



All standards are important but leading with utility will help focus all steps of evaluation.

Figure 1. Centers for Disease Control and Prevention

Utilization-Focused Evaluation

“In any evaluation there are many potential stakeholders and an array of possible uses. Utilization-focused evaluation requires moving from the general and abstract, i.e., possible audiences and potential uses, to the real and specific: *actual* primary intended users and their explicit commitments to *concrete, specific* uses.”

-Michael Patton, author, Utilization-focused Evaluation

Background

- The Breast and Cervical Cancer Early Detection Program in Pennsylvania is known as the HealthyWoman Program.
- Services are aimed at low income, uninsured, and underinsured women.
- This is done by both direct screening and Health Systems Interventions to increase the breast and cervical cancer screening rate.

▶ Theory of Change

- HealthyWoman Program = Early detection saves lives.
- Align your logic model to reflect the theory of change.

Logic Model

Short term

Women are screened for breast and cervical cancer

Intermediate

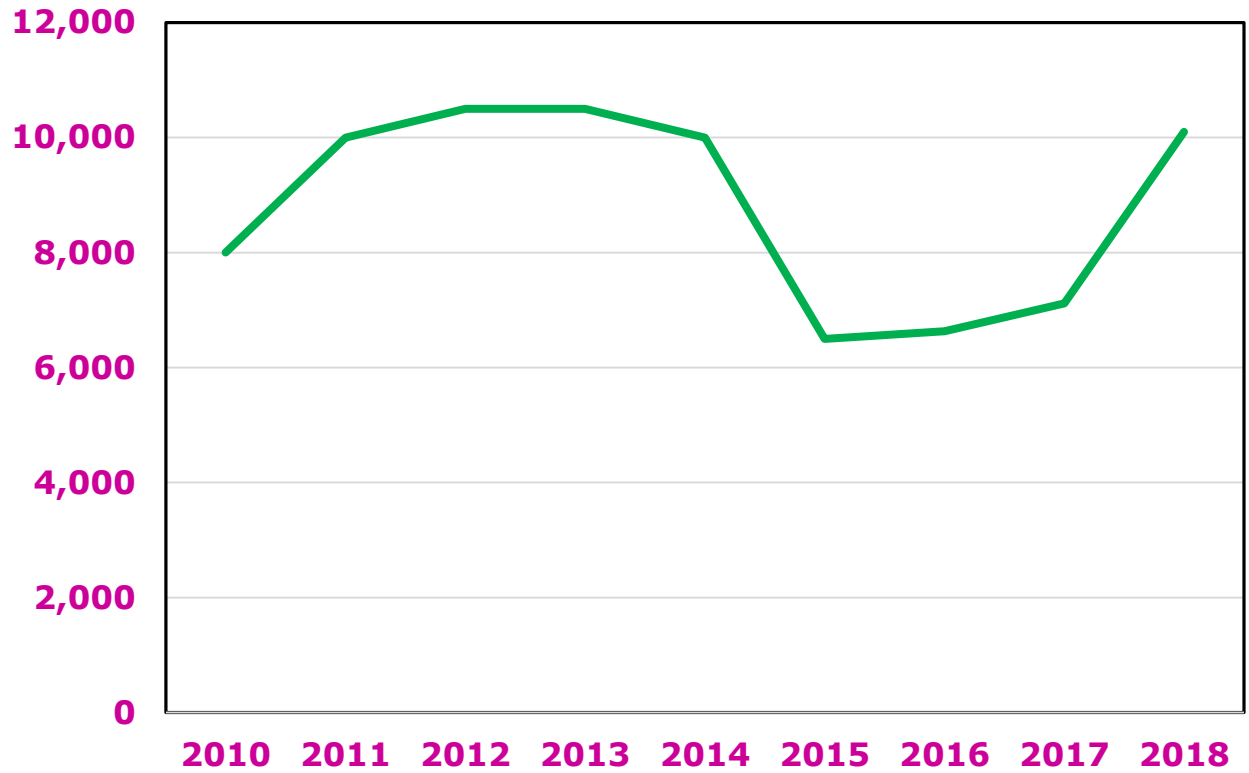
Breast and cervical cancer is diagnosed at an earlier stage

Long Term

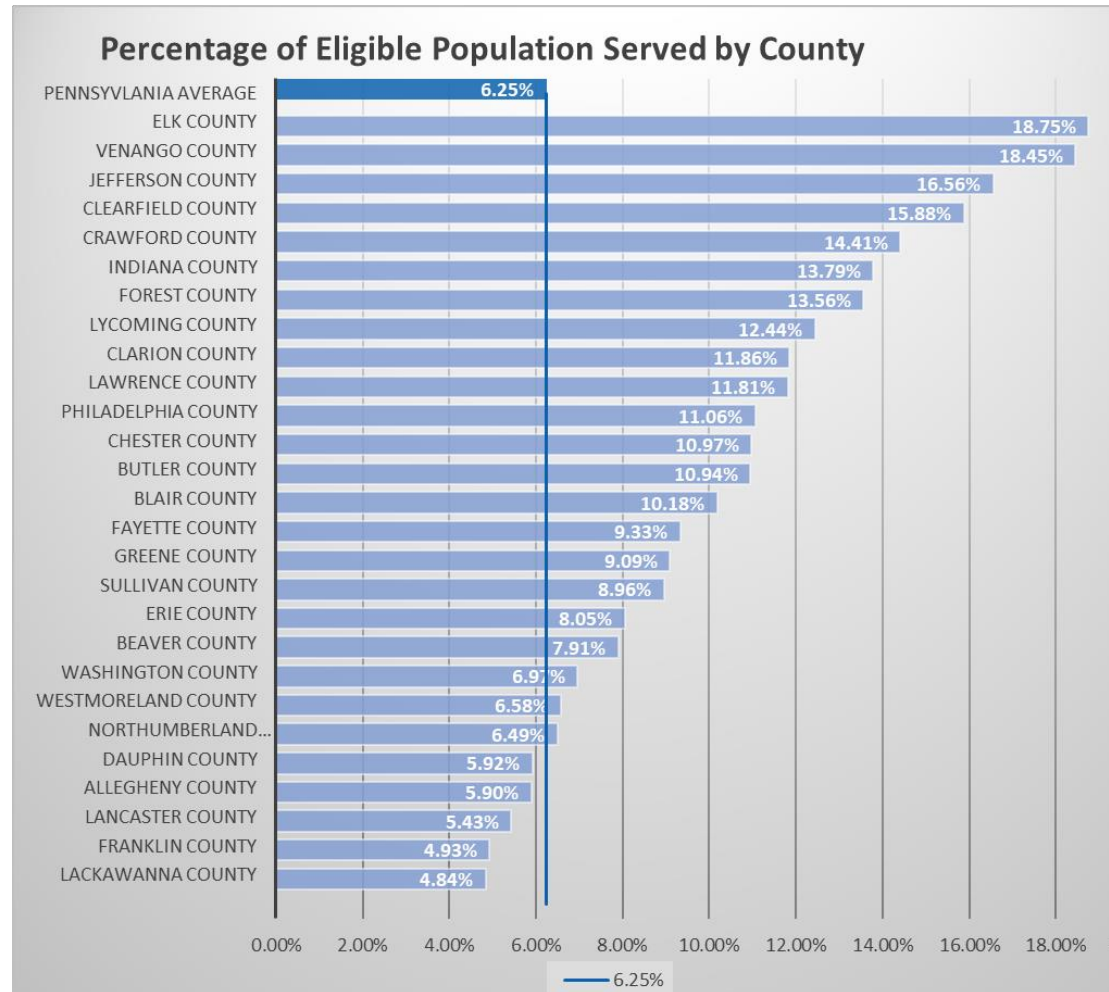
Breast and cervical cancer mortality decreases

Direct Screening

HWP Screening Totals



Eligible Population Served



Scorecard

Provider Number	County	Patients Screened FY 17	Patients Screening FY 18 Goal	FY 18 Through Q1 (9/30)	Progress towards Screening Goal	Q2 (10/1 to 12/31)	Progress towards Screening Goal	Q3 (1/1 to 3/30)	Progress towards Screening Goal	Q4 (4/1 to 6/30)	Progress towards Screening Goal	FY 18 Totals	Completion of Goal
1	Allegheny	12	20	2	10%	4	30%	3	45%	7	80%	16	80%
2	Allegheny	11	20	5	25%	5	50%	1	55%	5	80%	16	80%
3	Allegheny	23	25	8	32%	4	48%	14	104%	6	128%	32	128%
4	Allegheny	3	20	2	10%	3	25%	3	40%	11	95%	19	95%
5	Allegheny	5	20	5	25%	3	40%	2	50%	1	55%	11	55%
6	Allegheny	28	40	17	43%	20	93%	16	133%	12	163%	65	163%
7	Luzerne	42	50	13	26%	10	46%	10	66%	9	84%	42	84%
8	Lackawanna	110	150	31	21%	19	33%	17	45%	22	59%	89	59%
9	Northampton	66	100	16	16%	28	28%	18	62%	14	76%	76	76%
10	Schuylkill	10	25	4	16%	5	20%	2	44%	10	84%	21	84%
11	Philadelphia	172	222	58	26%	68	57%	91	98%	52	121%	269	121%
12	Chester	313	371	123	33%	146	73%	144	111%	129	146%	542	146%
13	Montgomery	59	97	19	20%	20	40%	18	59%	14	73%	71	73%
14	Philadelphia	647	725	147	20%	133	39%	113	54%	137	73%	530	73%
15	Philadelphia	36	45	14	31%	3	38%	2	42%	3	49%	22	49%
16	Philadelphia	117	146	76	52%	68	99%	70	147%	85	205%	299	205%
17	Dauphin	53	66	8	12%	12	30%	17	56%	10	71%	47	71%
18	Franklin	88	110	24	22%	15	35%	34	66%	32	95%	105	95%
19	Lancaster	167	209	38	18%	46	40%	29	54%	105	104%	218	104%
20	Lebanon	61	76	4	5%	5	12%	7	21%	8	31%	24	31%
21	Cambria	22	28	6	22%	7	47%	8	76%	10	113%	31	113%
22	York	114	143	28	20%	19	33%	16	44%	23	60%	86	60%
PENNSYLVANIA TOTAL		7,119	8,500	2,630	26%	3,113	56%	2,970	102%	2,921	115%	10,097	115%



▶ Health System Intervention

- The Health System Intervention outcome evaluation compares the baseline screening rate to the subsequent annual screening rate.

▶ Health System Intervention

- Pennsylvania Department of Health (DOH)

Goal:

- ▣ Increase breast and cervical cancer screening among low-income, medically underserved women.

▶ Health System Intervention

- St. Luke's Hospital-Miners Memorial(SLM)

Goal:

- ▣ Improve access to breast and cervical cancer screening and diagnostic services for low-income, uninsured, and underserved women.
- ▣ SLM serves Carbon and Schuylkill counties; a designated a Medically Underserved Area (MUA)

Health System Intervention

Utilization: Who is the end user?

- Clinical Care Staff
- Program Development staff
- Epidemiologists
- State Cancer Control Staff

Health System Intervention

- What measures would bring most value to the end users?
 - ▣ National Quality Forum-screening rates (SLM and DOH)
 - ▣ HEDIS measures (SLM and DOH)
 - ▣ Late stage cancer incidence rates (SLM and DOH)
 - ▣ Breast and cervical cancer mortality rates

Health System Intervention

Make the evaluation useful by:

- Basing success on national and state comparisons;
- Understanding goals of the clinic; and
- Using measures that are meaningful to the clinic (NQF, HEDIS, UDS, etc.).

Summary

- Move from the general to specific
- Clarify the theory of change and logic model
- Use logic model to shape outcome measure
- Ground outcomes in data
- Share progress and outcomes
- Make measures meaningful for stakeholders

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References and Resources

References

- Centers for Disease Control and Prevention Framework for program evaluation in public health *Morbidity and Mortality Weekly Report* 1999;48(RR11):1-40
- Patton M.Q. (2003) Utilization-Focused Evaluation. In: Kellaghan T., Stufflebeam D.L. (eds) *International Handbook of Educational Evaluation*. Kluwer International Handbooks of Education, vol 9. Springer, Dordrecht

Resources

- HWP Hotline: **1-800-215-7494** www.healthywoman.health.pa.gov
- Patton M Q (2013) *Utilization-Focused Evaluation (U-FE) Checklist*. Retrieved from http://www.wmich.edu/sites/default/files/attachments/u350/2014/UFE_checklist_2013.pdf

