Comprehensive Cancer Control
Collaborating to Conquer Cancer

Comprehensive Cancer Control Branch Program Evaluation Toolkit

June 2010

National Center for Chronic Disease Prevention and Health Promotion
Division of Cancer Prevention and Control

The finding and conclusions in this toolkit are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.

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ACKNOWLEDGEMENTS

We would like to extend special thanks to the Division of Cancer Prevention and Control, the Office of the Director, and the Comprehensive Cancer Control Branch Management Team for their support, insight, and guidance in creating this resource.

We would also like to acknowledge the contributions of those who worked diligently to prepare this toolkit. Thank you to the members of the CDC-RTI Core Workgroup and Program Advisory Group for their repeated efforts in drafting and reviewing sections. This document would not have been possible without the assistance of these important contributors.

TOOLKIT OVERVIEW

This toolkit is a "how to" guide for planning and implementing evaluation activities in cancer prevention and control programs.

Why Was this Toolkit Developed?

The Comprehensive Cancer Control Branch (CCCB) is part of the Centers for Disease Control and Prevention's (CDC's) Division of Cancer Prevention and Control (DCPC). CCCB developed this toolkit to help funded programs meet the evaluation requirements established for their cooperative agreements. This toolkit provides general guidance on evaluation principles and techniques, as well as practical templates and tools; therefore, grantees can continue to use the toolkit to support their evaluation efforts even as the program evolves and priorities change.

KEY CONTACTS AND DETAILS ON TOOLKIT DEVELOPMENT

See Appendix A for key contacts and additional information on our toolkit development process.

How Should this Toolkit be Used?

This toolkit includes guidance, examples, worksheets, and templates to help grantees plan and implement evaluations of their CCCB-funded programs. Grantees should use the toolkit according to their evaluation skills and program needs. When using this toolkit, grantees should observe the following guidelines:

- ***Adopt when practical***
  Grantees can avoid "reinventing the wheel" and save valuable program resources by using the tools and templates provided in this toolkit to conduct their evaluation activities.
- ***Adapt as needed***
  This toolkit is not intended to be a prescriptive resource. The tools and templates provided in this toolkit should be modified as needed to best align with each grantee's unique program context and needs.
- ***Be flexible***
  Although this toolkit presents information on how to evaluate your CCC program in a series of steps from the CDC Framework, it is important to remember that evaluation is not a linear process. Evaluation is an iterative process and typically requires movement back and forth between steps or work on more than one step at a time.

TIP FOR TOOLKIT USE

Users who are new to program evaluation may need to read each section of the toolkit closely. Others who have some evaluation training may be able to quickly scan through some toolkit sections.

What Is in this Toolkit?

This toolkit comprises five main sections:

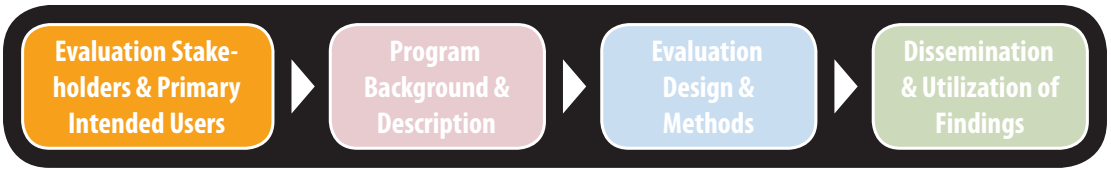
1. **Evaluation Primer—This section introduces novice evaluators to key evaluation concepts.** It includes the definition of program evaluation, a description of the CDC Framework for Program Evaluation in Public Health, and guidance on evaluation planning that is intended to help toolkit users consider important, practical issues before launching evaluation activities.
2. **How To Evaluate Your CCC Program—This section is designed to walk toolkit users through the application of the CDC Framework, and it includes a set of tools and templates to help grantees conduct evaluation activities.** The section begins with a review of the funded program's evaluation requirements.
3. **Glossary of Evaluation Terms—This section presents definitions of key evaluation terms and concepts used throughout the toolkit.** It is important to note that the glossary reflects CCCB's interpretation and application of evaluation concepts and terms. Therefore, definitions may vary slightly from those presented in other evaluation resources.
4. **For Further Study—This section presents a list of additional evaluation resources and selected training opportunities that may help grantees continue to develop and refine their evaluation skills beyond the scope of toolkit content.** We expect that the guidance and examples provided in this toolkit will help grantees meet the evaluation requirements for their CCCB-funded programs. However, we do not consider this toolkit to be an all-inclusive evaluation resource. Evaluation is a broad field of study that cannot be covered completely in a single resource.
5. **Toolkit Evaluation—We will use feedback collected through a future evaluation to improve the toolkit and inform the development of grantee evaluation trainings.** CCCB aims to provide quality technical assistance documents that are both user-friendly and useful for our grantees. To support this ongoing effort, we will implement a toolkit evaluation designed to collect (1) information from users on their level of satisfaction with toolkit content and layout; (2) recommendations for improving the resource; and (3) stories from the field on the challenges, benefits, and results of toolkit use. This section includes a summary of our plans for evaluation.

How Can I Apply this Toolkit?

This toolkit is intended to walk you through completion of the evaluation plan template. Completing the sections in this template will create an evaluation plan that meets the grantee performance expectations specified in the funding opportunity announcement (FOA). However, this template is not intended to be prescriptive and should be modified as needed to best align with the unique context and needs of your program. Once developed, the evaluation plan can be updated on an annual basis or more frequently.

Evaluation Plan Template

Evaluation Stakeholders and Primary Intended Users



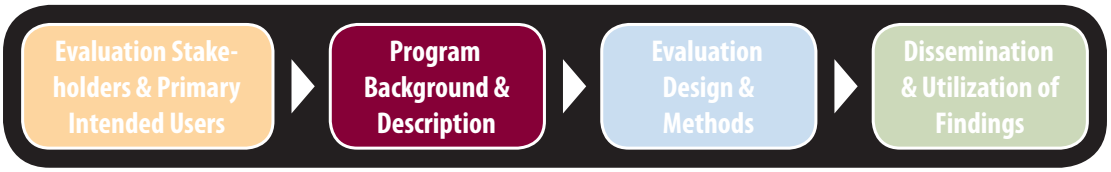
I. **Identifying Stakeholders:** List key individuals or groups who (1) have a stake in the evaluation *and* (2) who will use evaluation results. Identify and document each stakeholder's evaluation interests.

Evaluation Stakeholders	What Stakeholders Want to Know

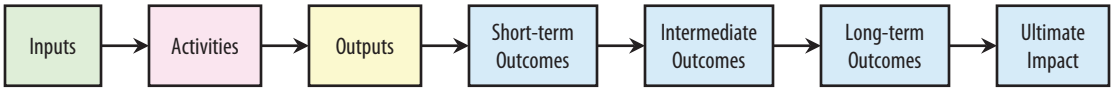
II. Engaging Stakeholders: For each stakeholder listed above, note how and when you might engage them in your program evaluation. Be sure to consider stakeholders' areas of expertise, interests, and availability.

Evaluation Stakeholders	How to Engage Stakeholders	When to Engage Stakeholders

Program Background and Description



I. **Key Comprehensive Cancer Control (CCC) Program Components:** Insert a copy of your program's logic model or provide a tabular and/or narrative description of your program's resources, major activities, and the anticipated outputs and outcomes of program activities.



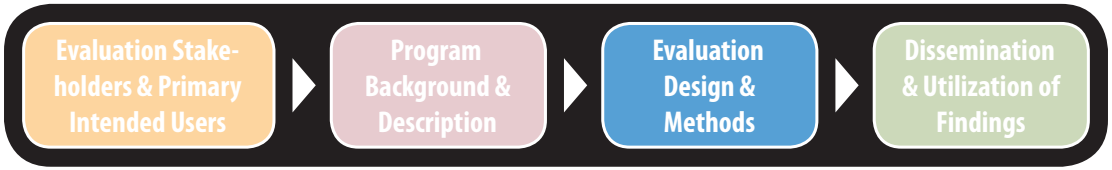
II. **Stage of Development:** Briefly describe your program's stage of development.

- Which major activities have been completed, what are you currently working on, and what work has yet to begin?

III. **Program Context:** Briefly describe any unique program context that may affect the success of your CCC efforts.

- What historical, political, program or organization, and community factors have affected your CCC efforts, and how?

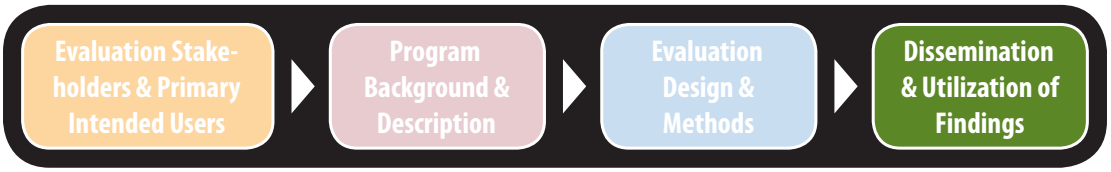
Evaluation Design and Methods



IV. Evaluation Design and Methods Matrix

Focus	Evaluation Questions	Indicators	Data Collection Sources	Data Collection Methods	Data Collection Timing	Data Analysis
The CCC component you will evaluate	*What you want to know*	*The type of data you will need to address the evaluation question*	*Where you will get the data*	*How you will get the data*	*When you will collect the data*	*How you will organize and interpret the data*

Dissemination and Utilization of Findings



I. Checklist for Ensuring Effective Evaluation Reports[1]

- ❑ Provide interim and final reports to intended users in time for use.
- ❑ Tailor the report content, format, and style for the audience(s) by involving audience members.
- ❑ Include an executive summary.
- ❑ Summarize the description of the stakeholders and how they were engaged.
- ❑ Describe essential features of the program (e.g., in appendices).
- ❑ Explain the focus of the evaluation and its limitations.
- ❑ Include an adequate summary of the evaluation plan and procedures.
- ❑ Provide all necessary technical information (e.g., in appendices).
- ❑ Specify the standards and criteria for evaluative judgments.
- ❑ Explain the evaluative judgments and how they are supported by the evidence.
- ❑ List both strengths and weaknesses of the evaluation.
- ❑ Discuss recommendations for action with their advantages, disadvantages, and resource implications.
- ❑ Ensure protections for program clients and other stakeholders.
- ❑ Anticipate how people or organizations might be affected by the findings.
- ❑ Present minority opinions or rejoinders where necessary.
- ❑ Verify that the report is accurate and unbiased.
- ❑ Organize the report logically and include appropriate details.
- ❑ Remove technical jargon.
- ❑ Use examples, illustrations, graphics, and stories.

[1] Adapted from Worthen, B. R., Sanders, J. R., & Fitzpatrick, J. L. (1997). *Program evaluation: Alternative approaches and practical guidelines* (2nd edition). New York, NY: Addison, Wesley Logman, Inc.

II. Dissemination Strategy Matrix

Audience	Format and Channel for Sharing Findings	Timeline	Responsible Person

III. Checklist for Ensuring Utilization of Evaluation Results

- ❑ Share and discuss results at stakeholder meeting.
- ❑ Discuss prioritization of recommendations for program improvement with stakeholders.
- ❑ Discuss operationalization of recommendations for program improvement with stakeholders.
- ❑ Discuss ways stakeholders can apply evaluation findings to improve their organizational practices or CCC-related interventions.
- ❑ Include evaluation results and points of discussion in stakeholder meeting notes.
- ❑ Review evaluation findings and recommendations in regularly scheduled staff meetings.
- ❑ Identify action steps staff members can take to implement recommendations.
- ❑ Identify a program staff member to coordinate, document, and monitor efforts to implement improvement recommendations.

1. EVALUATION PRIMER

This is an introduction to evaluation for novice evaluators. The Evaluation Primer is not an exhaustive resource, but it covers the following foundational topics:

- a definition of program evaluation and descriptions of different types of evaluation,
- distinguishing program evaluation from surveillance and research,
- a description of the CDC Framework for Program Evaluation in Public Health,
- practical approaches to evaluation planning, and
- drafting an evaluation plan.

Key Definitions and Descriptions

Program evaluation is "the systematic collection of information about the activities, characteristics, and outcomes of programs to make judgments about the program, improve program effectiveness, and/or inform decisions about future program development."[2] CCCB operates on the premise that the key purpose of program evaluation is to improve public health practice.

What Are the Different Types of Program Evaluation?

There are several types of program evaluation. Several types of evaluations that are commonly used in the public health field are described below, although this list is not exhaustive:

- **Formative evaluation** refers to assessments conducted to inform the development of a program—for example, conducting community needs and asset assessments and focus groups to identify appropriate cancer control strategies.
- **Process or implementation evaluation** is conducted to assess whether a program has been implemented as intended, and why or why not.
- **Outcome or effectiveness evaluation** is conducted to assess whether a program is making progress on the short-term, intermediate, or long-term outcomes it is intended to yield.

[2] Patton, M. Q. (1997). *Utilization-focused evaluation: The new century text* (3rd edition). Thousand Oaks, CA: Sage Publications.

- **Comprehensive evaluation** is a term that is sometimes used to refer to the assessment of a program's implementation and effectiveness—that is, evaluators conduct both process and outcome evaluation activities for a given program.
- **Efficiency evaluation** is conducted to assess whether program activities are being produced with efficient use of resources, including staff time and funding dollars.
- **Cost-effectiveness evaluation** is conducted to assess whether the benefits of a program sufficiently exceed the cost of producing them.
- **Attribution evaluation** is conducted to assess whether the outcomes being produced can be shown to be related to the program, as opposed to other factors or initiatives that may be occurring at the same time.

CCCB EVALUATION EXPECTATIONS

At minimum, CCCB grantees are encouraged to conduct process and outcome evaluations of their efforts. See Section 2 of this toolkit (How to Evaluate Your CCC Program) for guidance on designing and conducting your program evaluation.

What Is the Difference Between Program Evaluation and Surveillance?

Program evaluation and surveillance are companion processes. Surveillance is the continuous monitoring of, or routine data collection on, various factors (e.g., behaviors, attitudes, deaths). When incorporated into program planning and formative evaluation activities, surveillance data can help focus programs' scope and efforts. Surveillance data can also be a good data source for addressing evaluation questions about program activities, outputs, and outcomes. However, program evaluation is broader in scope than surveillance and requires data collection and analysis methods beyond surveillance.

Evaluations generally involve the collection, analysis, and synthesis of data from a variety of sources, including program document reviews, program participant records, and interviews or focus groups with program staff and participants. Surveillance data alone are often insufficient for addressing program evaluation questions, particularly process evaluation questions. Even in the case of outcome evaluation, there are often limits to how useful surveillance data can be for evaluators. For example, some surveillance systems, such as the Behavioral Risk Factor Surveillance System (BRFSS) can measure behaviors in large populations (such as state cancer screening rates), but these systems often have insufficient sample sizes to measure changes in outcomes at the community level or in small populations that may be targeted by CCCB-funded programs. In addition, it could take several years to see changes in surveillance data related to health status.

What Is the Difference Between Program Evaluation and Research?

Program evaluation and research both make important contributions to the field of public health, but they differ in purpose, priorities, and activities. However, some of these differences are no longer as clear cut because some public health researchers have adopted more participatory and applied models of research. Likewise, some evaluations of public health programs are designed to address attribution.

PRACTICE-BASED EVIDENCE

Program evaluation also helps to build practice-based evidence for interventions, which can (1) inform both public health practice and research agendas and (2) complement rigorously tested evidence-based practices.

The difference between program evaluation and research is often summarized by the adage, "Research seeks to prove; evaluation seeks to improve."[3] Patton expands on this adage in his book, *Utilization-Focused Evaluation*:

> Basic scientific research is undertaken to discover new knowledge, test theories, establish truth, and generalize across time and space. Program evaluation is undertaken to inform decisions, clarify options, identify improvements, and provide information about programs and policies within contextual boundaries of time, place, values, and politics. Research aims to produce knowledge and truth. Useful evaluation supports action.[4] (p. 24)

CDC Framework for Program Evaluation in Public Health

The guidance in this toolkit is aligned with the CDC Framework for Program Evaluation in Public Health. The framework is based on the premise that good evaluation of public health programs does not involve merely gathering accurate evidence and drawing valid conclusions; it should produce results that are used to improve the program.

What Is the CDC Framework for Program Evaluation in Public Health?

The CDC Framework for Program Evaluation in Public Health is a set of six steps and four groups of standards for conducting good evaluations of public health programs.

The six steps of the framework are presented in the outer ring of Figure 1 and described below:

1. ***Engage stakeholders***
   Stakeholders are people or organizations that are invested in the program, are interested in the results of the evaluation, and/or have a stake in what will be done with the results of the evaluation. Addressing stakeholder needs and interests is fundamental to good program evaluation.

2. ***Describe the program***
   A detailed program description clarifies all the components and intended outcomes of your program, which helps you focus your evaluation on the most important questions.

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[3] U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, Office of the Director, Office of Strategy and Innovation. (2005). *Introduction to program evaluation for public health programs: A self-study guide*. Atlanta, GA: Centers for Disease Control and Prevention.

[4] Patton, M. Q. (1997). *Utilization-focused evaluation: The new century text* (3rd edition). Thousand Oaks, CA: Sage Publications.

3. ***Focus the evaluation design***
   This step includes determining the most important evaluation questions and the appropriate design for the evaluation. Focusing the evaluation is based on the assumption that the entire program does not need to be evaluated at any time.

4. ***Gather credible evidence***
   Evidence must be gathered to address your evaluation questions. This step includes developing indicators for the program components of focus in your evaluation and determining data collection methods and sources.

5. ***Justify conclusions***
   Whether your evaluation is conducted to show program effectiveness, help improve the program, or demonstrate accountability, you will need to analyze and interpret the evidence gathered in Step 4. Step 5 includes analyzing the evidence, making claims about the program based on the analysis, and justifying the claims by comparing the evidence against stakeholder values.

6. ***Ensure use and share lessons learned***
   Evaluation findings should be shared with key stakeholders in a timely, consistent, and unbiased manner. Grantees should use findings and recommendations from their evaluations to improve their programs. Evaluation results may also be used to demonstrate program effectiveness, demonstrate accountability, and justify funding.

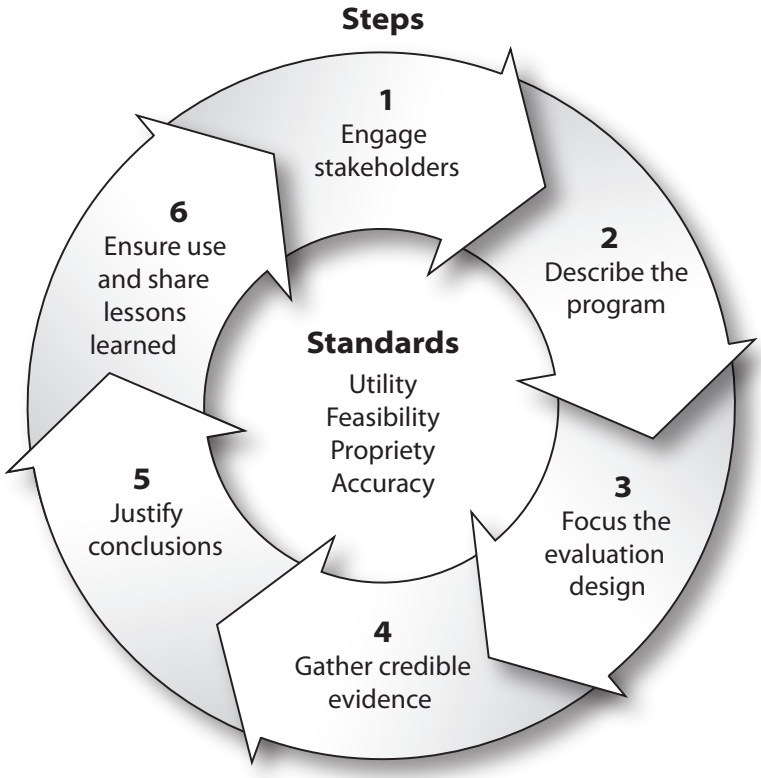
APPLYING THE FRAMEWORK STEPS

Although the framework presents program evaluation in six steps, it is important that evaluators be flexible in their movement among the steps and not approach evaluation as a linear process. For example, the first step of the framework is "Engage stakeholders," and although evaluators should certainly engage stakeholders at the onset of evaluation planning and implementation, there is a benefit to engaging stakeholders throughout the evaluation process. Stakeholders could, for example, be very helpful in ensuring that evaluation findings are shared with key audiences and used to support program improvement (Step 6).

Steps in the framework are informed by a set of standards for evaluation. As the framework steps can be used to guide grantees through the process of program evaluation, the framework standards can inform choices of evaluation activity options within each framework step. There are 30 total framework standards, but they are clustered into the four groups listed in the center box of the framework diagram presented in Figure 1:

- **Utility:** Who needs the evaluation results? Will the evaluation provide useful information in a timely manner for them?
- **Feasibility:** Are the planned evaluation activities realistic given the time, resources, and expertise at hand?
- **Propriety:** Does the evaluation protect the rights of individuals and protect the welfare of those involved? Does it engage those most directly affected by the program, such as participants or the surrounding community?
- **Accuracy:** Will the evaluation produce findings that are valid and reliable?

Figure 1. CDC Framework for Program Evaluation in Public Health



The example below illustrates the ways in which steps of the framework are informed by the standards for evaluation.

EXAMPLE: *APPLYING THE EVALUATION STANDARDS TO STEPS IN THE CDC FRAMEWORK FOR PROGRAM EVALUATION IN PUBLIC HEALTH*

Sometimes the standards broaden your exploration of choices; as often, they help reduce the options at each evaluation step to a manageable number. For example, within the first framework step, "Engage stakeholders," the standards can help you think broadly about who constitutes a stakeholder for your program. However, the standards can also help reduce the potential list of stakeholders to a manageable number by raising important practical considerations.

- Applying the utility standard, you may define your stakeholder group by considering: *Who will use the evaluation results?*
- Applying the feasibility standard may prompt you to consider: *How much time and effort can be devoted to stakeholder engagement?*
- Applying the propriety standard may prompt you to consider certain ethical issues, such as: *To be ethical, which stakeholders need to be involved in the evaluation process (perhaps those served by an intervention being evaluated or leaders of the community the intervention targets)?*
- Applying the accuracy standard may prompt you to consider: *How broadly do I need to engage stakeholders to paint an accurate picture of this program?*

Planning for Program Evaluation

Developing a roadmap or plan for the evaluation is an important step that will help ensure that evaluation efforts are efficiently implemented, properly managed, and useful for program improvement. There are many practical issues program managers and evaluators should consider before initiating evaluation activities for their CCCB-funded programs. For example, some consideration should be given to how program evaluation is viewed within the organization, who should lead and conduct the evaluation, and how the evaluation will be paid for.

WHY IS IT IMPORTANT TO EVALUATE CCCB-FUNDED PROGRAMS?

- CDC requires funded programs to evaluate their programs.
- Program evaluation allows us to monitor progress toward program goals.
- The evaluation process helps us identify opportunities for program improvement.
- The evaluation process helps us identify problem areas before significant resources are wasted.
- The evaluation process helps us identify what is working well so we can celebrate success.
- Evaluation findings can help justify the need for further funding and support.

How Do I Rally Organizational Support for Program Evaluation?

Your organization may have resources that can facilitate the planning, implementation, and utilization of your CCCB-funded program evaluation. For example, there may be evaluators on staff, or your organization may have strong, proven relationships with external evaluators who can provide technical assistance. In addition, managers of related CDC-funded programs may be able to advise on budgeting for evaluation efforts or provide templates for data collection tools and evaluation reports. If your organization routinely conducts program evaluation, there are likely many resources that can be shared and accessed to support evaluation activities for your CCCB-funded program.

Conversely, if program evaluation is not generally considered an essential activity in your organization, it may be necessary to gain buy-in before initiating an evaluation for your CCCB-funded program. Gaining buy-in from your organization and management may help you garner the staff hours, funding, and approvals to pursue partnerships or resources that may be necessary to carry out planned evaluation activities. You may help foster support for program evaluation by educating management, key stakeholders in your organization, and coalition leaders about the importance of evaluating your CCCB-funded program.

Who Will Conduct and Lead our Program Evaluation?

Practically speaking, funding is a major consideration when determining who will conduct and lead the evaluation of your CCCB-funded program. The following are some options to consider:

- **External evaluation contractors:** You may contract individuals outside of your organization to conduct an evaluation of your CCCB-funded program. Contractors may work through universities or research firms, or they may provide evaluation services as independent consultants.
- **Internal evaluation team:** Your organization may have a team of cross-unit professionals who assist programs with planning and implementing evaluations.
- **Evaluation advisory group within your coalition:** Many CCCB-funded programs have evaluators serving on their CCC coalition or strategic planning partnerships. It may be useful to establish a subcommittee of partners with evaluation experience and skills that can advise your key program staff on important evaluation activities, including identifying evaluation questions and indicators.
- **Other public health personnel:** Several public health professionals, including epidemiologists and biostatisticians, have skills that can support evaluation activities, particularly data collection, analysis, and reporting activities.

Although these options are listed separately, you do not have to take an either/or approach to choosing evaluators. For example, you may decide to establish an evaluation advisory group within your coalition to assist in the search for an appropriate external evaluation contractor. Throughout the evaluation, the evaluation advisory group could review and provide feedback on the contractor's planned methods. The evaluation advisory group could also assist with the development of evaluation reports and the dissemination of findings. As another example, if you decide that an evaluation advisory group should lead and conduct your evaluation, a biostatistician from your organization may assist the group with developing a survey to collect data about local program activities.

Visit the American Evaluation Association online for an evaluator search tool: http://www.eval.org

IDENTIFYING AN EVALUATOR

Be sure to review evaluator candidates' levels of professional training and experience, as well as their references. It is important to work with evaluators whose principles, training, and experience align with the CCCB approach to evaluation described throughout this toolkit.

Table 1 presents some pros and cons of working with various types of evaluators. The table also includes a funding indicator to give you an idea of how much working with each type of evaluator may cost. Ultimately, who you select to lead and conduct your evaluation will depend on your program's unique evaluation needs, expectations, and resources. It is important to work with evaluators whose approach to evaluation, training, and experience align with evaluation requirements for CCCB-funded programs, as well as the principles inherent in the CDC Framework—namely, that evaluation is a participatory process and should yield results that can be used to improve programs.

Table 1. Who Will Lead and Conduct Your Program Evaluation—Weighing the Pros and Cons

Evaluator Option	Pros	Cons	Costs[a]
External evaluation contractor	• Minimizes workload burden of program staff and coalition partners • Participants in evaluation data collection activities may be more forthcoming with someone they do not know • Can provide high levels of evaluation expertise from an objective point of view	• May plan evaluations that are not attuned to a programs' unique context • University-based evaluators may take a more research/academic approach vs. a practical and utilization-focused approach to evaluation • Can be costly	$$$
Internal evaluation team	• Can be an efficient option—your program can benefit from adopting or adapting evaluation approaches that have worked well in related federally funded programs • Facilitates program integration	• Can be a lengthy process depending on the workload and priorities of the team • Your program may not have staff dedicated specifically to your program evaluation • Your program may have to cover a portion of several team members' time	$$
Evaluation advisory group	• Facilitates ongoing engagement of stakeholders • Helps ensure that evaluation findings will be used	• May add additional work to possibly overburdened volunteers • Some accountability may be lost in the absence of one evaluation lead	$
Other public health personnel	• Can help save limited program resources • Facilitates program integration	• May focus more heavily on quantitative methods and miss rich qualitative data that is useful for informing program improvement • Can be a lengthy process depending on the workload and priorities of the tea	$

[a] $$$= resource intensive: could require 10% or more of funding award; $$ = requires a moderate funding investment, such as a portion of an existing staff member's time; $ = generally requires a minimal funding investment: most evaluation expenses are covered through in-kind contributions (e.g., program staff time, meeting space).

A **participatory evaluation approach** will help you design an evaluation that is appropriate for your unique program context, that is aligned with CCCB-funded program requirements, and that can be used by program staff and stakeholders to enhance your program and maximize its impact. The participatory approach to evaluation is reflected in the CDC Framework around which this toolkit is designed. The first step of the framework is to engage stakeholders. Ultimately, the "aim [of participatory evaluation] is to encourage every voice to be heard and at the very least taken into consideration when deciding on

the focus and design."[5] Maintaining this high level of stakeholder involvement throughout the evaluation process can be challenging. However, a participatory approach will enrich the evaluation process and help optimize utilization of evaluation findings.

PARTICIPATORY APPROACH

Whether evaluations are led by internal staff, a group of stakeholders, or external consultants, CCCB grantees are encouraged to adopt a participatory approach to their program evaluations.

How Will We Pay for our Program Evaluation?

In addition to staffing your evaluation, funds are often required to support evaluation meetings, collect and analyze evaluation data, and disseminate findings. Perhaps the most obvious approach to paying for program evaluation is to use a portion of your CDC funding. However, there are creative ways to minimize evaluation costs or eliminate them altogether.

SELECTED OPTIONS FOR PAYING FOR PROGRAM EVALUATION

- Use a portion (e.g., 10%) of your CDC funding.
- Partner with local schools of public health or related graduate programs.
- Solicit in-kind contributions from partners.

Doctoral and advanced master's-level students are often well trained in evaluation methods and may evaluate your program or provide data collection and analysis services for free in order to fulfill practicum, thesis, or dissertation requirements. Committees of experienced faculty members usually review and monitor students' practicum or dissertation activities. Graduate students generally have the support needed to successfully complete evaluation activities. Partnering with graduate students can also help increase evaluation capacity in your program because a lot could be learned by serving on, or participating in open meetings of, the students' dissertation or practicum committees. Table 2 may assist you in negotiating evaluation partnerships with local public health or evaluation-related graduate programs. It lists some of the services and products you may want to request, and services and products you can offer to help ensure that such partnerships are mutually beneficial.

[5] Minkler, M., & Wallerstein, N. (Eds.) (2008). Community-based participatory research for health: From process to outcomes (2nd edition). In *Chapter 12: Issues in participatory evaluation* (pp. 199–215). San Francisco: Jossey-Bass.

Table 2. Negotiating Evaluation Partnerships with Graduate Schools—Communicating Program Needs and Potential Benefits to Students

Program Needs	Benefits to Students
• Student evaluator's participation in relevant staff and stakeholder meetings • Written evaluation plan • Logic model developed in partnership with key stakeholders • Written protocols and recommendations for collecting evaluation data and utilizing existing program data and data sources • Draft of data collection tools, including surveys or interview guides • Qualitative data collection (e.g., conducting interviews and/or focus groups with local grantees and stakeholders to address evaluation questions) • Written evaluation report, including recommendations for program improvement	• Practice-based experience that will help student fulfill graduation requirements • Service on student's dissertation or practicum committee • Letters of recommendation to support student's applications for fellowships and jobs • Opportunities for student to participate in related CDC trainings (as budget and program guidelines allow) • Waived registration fee for student's participation in training or conference hosted by the CCCB-funded program • Participation in school health and/or career fairs • Provision of guest lecture or seminar on real-world public health practice and the work of the CCCB-funded program

When working with student evaluators, it is important to confirm that their planned work has been reviewed and approved by the appropriate advising faculty members. This may involve a meeting between school faculty and key program staff. It is also important to develop and document a clear timeline and task list for the project to ensure that both the student's and the program's needs and expectations are met.

Another budget-friendly option for covering the cost of an evaluation is to solicit in-kind contributions from your CCC coalition or strategic planning partnership. For example, some partners may be able to offer space for evaluation planning meetings or data collection activities, such as focus groups. You may be able to share resources within your organization, such as digital recorders and evaluation tool templates that can facilitate data collection activities. Partners with experience in evaluation and related research methods may volunteer to conduct interviews or focus groups to obtain data from local grantees and stakeholders that will help address evaluation questions. Lastly, partners may already be collecting data relevant to evaluation questions in each of their organizations. They may be able to have staff members organize these data so that your program staff can analyze and interpret them for the evaluation.

Understanding that your program partners' time is extremely valuable, it may be helpful to offer low- or no-cost rewards for in-kind contributions. For example, invite contributing partners to coauthor manuscripts or abstracts for professional conferences. This will help the partnering agency promote their work and offer an achievement that agencies can include in applications for funding. Public recognition of contributions in CCCB-funded program publications or on the program Web site, or through awards or thank you letters from the health department are additional low- or no-cost expressions of gratitude. Lastly, providing mileage or travel reimbursement, meeting space, meals, and/or clerical support for evaluation groups made up of volunteers may also help sustain the participation and enthusiasm of the group.

How Do We Develop an Evaluation Plan?

The CCC funding opportunity announcement (FOA) specifies that each grantee is responsible for developing a formal annual evaluation plan. Developing and implementing this evaluation plan is a cornerstone of effective program management. At minimum, your evaluation plan should cover the following four topics:

- Evaluation Stakeholders and Primary Intended Users,
- Program Background and Description,
- Evaluation Design and Methods, and
- Planned Approach for Dissemination and Utilization of Findings.

HAVING AN EVALUATION PLAN IS A REQUIREMENT OF ALL CCC GRANTEES

As specified in the recipient activities section of the CCC FOA, grantee performance will be measured by the extent to which a formal annual evaluation plan has been developed and implemented.

These topics are all addressed in Section 2 of this toolkit: How to Evaluate Your CCC Program.

Capturing all of these topics in a single document (i.e., evaluation plan) can help your evaluation run smoothly. A checklist for developing an evaluation plan is provided on page 20. The components of this checklist are aligned with the six steps of the CDC Framework for Program Evaluation in Public Health. Although there is no one "right" way to develop an evaluation plan, the CDC Framework may serve as a useful resource for programs seeking guidance on how best to get started.

Section 2 of this toolkit includes additional tools and templates that you may find useful to include in your evaluation plan. These tools and templates are designed to help you to plan your evaluation activities and to monitor data collection activities and record findings throughout the evaluation process.

The Evaluation Plan Checklist and guidance provided in Section 2 of this toolkit are designed to help you develop and carry out a sound evaluation program plan for your CCC porgram.

Tools and Templates: Evaluation Plan Checklist[6]

Evaluation Stakeholders and Primary Intended Users

- ❑ List individuals or groups who have a stake in the evaluation and who will use evaluation results.
- ❑ Describe any evaluation expectations these key stakeholders may have.
- ❑ Describe how and when you plan to engage these key stakeholders (e.g., we will ask our university partner to review data collection tools).

Program Background and Description

- ❑ Provide a brief description of your program's resources, activities, planned products, and intended outcomes. This information may be summarized in a narrative or in a logic model.
- ❑ Briefly describe your program's stage of development (i.e., what major activities have been completed, what are you currently working on, what work has yet to begin).
- ❑ Include a brief description of any contextual factors (e.g., hiring freezes, new legislation, or staff turnover) that may affect program success.

Evaluation Design and Methods

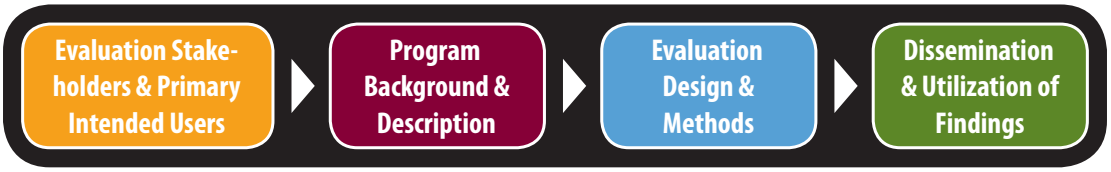
- ❑ Identify the focus of your planned evaluation efforts.
- ❑ List specific evaluation questions for each evaluation focus.
- ❑ For each evaluation question, describe indicators, data sources, data collection methods and timing, and data analysis plans.
- ❑ If possible, identify who is responsible for conducting data collection and analysis activities.

Planned Approach for Dissemination and Utilization of Findings

- ❑ Describe your plans for disseminating evaluation findings (i.e., with whom you will share findings, when, and how).
- ❑ Describe steps program managers will take to ensure that evaluation findings will be used to inform program improvement efforts (e.g., hold program staff meeting to review evaluation findings and prioritize recommendations).

[6] Adapted from CDC Division for Heart Disease and Stroke Prevention WISEWOMAN Program Evaluation Plan Template.

2. HOW TO EVALUATE YOUR CCC PROGRAM



This section is designed to be a practical "how to" guide for evaluating your program.

It begins with a brief review of CCC grantee evaluation requirements then presents evaluation guidance under the following topic headings to facilitate practical application of the CDC Framework:

- Evaluation Stakeholders and Primary Intended Users (page 22),
- Program Background and Description (page 30),
- Evaluation Design and Methods (page 37), and
- Dissemination and Utilization of Findings (page 50).

Each of these four sections opens with background information on the topic, followed by tools and templates to help programs apply the information. Each section ends with a checklist to help programs make sure they have addressed all the key elements of the topic.

Review of Evaluation Requirements

During the 5-year funding period, grantees of the National Comprehensive Cancer Control Program (NCCCP) are required to evaluate the three Ps:

- **Partnerships:** the quality, contributions, and impacts of your CCC coalition;
- **Plan:** the quality and implementation of the statewide CCC plan; and
- **Program:** the extent to which interventions outlined in your CCC action plan are executed and yield intended results.[7]

NCCCP grantees are required to submit an annual evaluation plan.

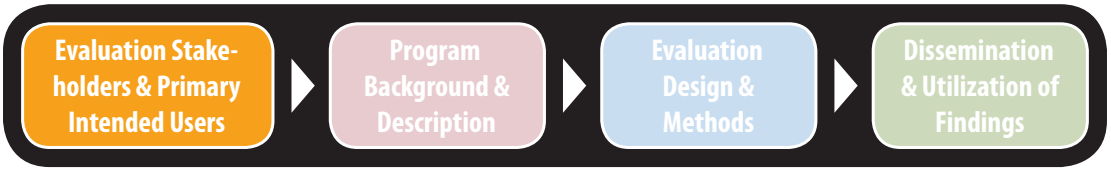
[7] CDC does not require evaluation of interventions implemented with non-CDC funding. However, programs may choose to evaluate these interventions in an effort to assess the effectiveness of the overall (CDC-funded and non–CDC-funded) program.

EVALUATION AND PERFORMANCE MONITORING

CCC program evaluations are also expected to complement grantee performance monitoring requirements, including the completion of the performance measures worksheet and the development of action plans with measures of effectiveness.

2.1

Evaluation Stakeholders and Primary Intended Users



This section provides guidance on engaging stakeholders throughout the evaluation process. It is intended to help you

- identify key individuals or groups that should be involved in your CCC program evaluation,
- determine how and when to engage stakeholders in your evaluation, and
- apply these skills by using the worksheet template provided on page 26.

Evaluation stakeholders are key individuals or organizations that are invested in the program, interested in the results of the evaluation, and have a stake in what will be done with the results of the evaluation. Stakeholders can make meaningful contributions during all phases of the evaluation, including evaluation planning, implementation, and the sharing and use of findings.

Visit the Robert Wood Johnson Foundation for *A Practical Guide for Engaging Stakeholders in Developing Evaluation Questions:*
http://www.rwjf.org/files/research/49951.stakeholders.final.1.pdf

CCC program evaluation stakeholders may include, but are not limited to, program staff and leadership; tribal leadership; donors and funders, such as CDC's DCPC or national cancer organizations; collaborating organizations; cancer control and evaluation experts from academic institutions or other state and local health departments; and participants in your interventions, including cancer patients, survivors, and their families.

How Do I Identify and Engage Evaluation Stakeholders?

A simple **stakeholder assessment** can help you identify key individuals or groups that should be engaged throughout the evaluation of your CCC program. We use the term stakeholder assessment to refer to a systematic process for thinking through which partners have a stake in the evaluation, what evaluation components are of interest to those stakeholders, and what roles they can play throughout the evaluation process. Program managers can complete a stakeholder assessment with key program staff, or, if a decision has already been made to hire an external evaluator or to establish an evaluation committee (see Section 1: Evaluation Primer), program managers can work with those individuals to identify evaluation stakeholders.

The stakeholder assessment worksheet template provided on page 26 of this section and in Appendix B is designed to help you think through who your evaluation stakeholders are and their roles in the evaluation.

What Factors Are Important to Consider When Identifying and Engaging Evaluation Stakeholders?

- ***Evaluation stakeholder group composition***
  The composition of the evaluation stakeholder group has a strong influence on the development of thoughtful evaluation questions that will generate evaluation findings that are useful, relevant, and credible (assuming the evaluation applies the appropriate design and data collection and analysis methods). Ideally, the evaluation stakeholder group should consist of individuals who
  - have expertise in evaluation or the CCC program;
  - represent diverse perspectives;
  - are responsible for program implementation, monitoring, and/or maintenance;
  - are influential in the grantee agency, CCC coalition, state, tribe, or territory;
  - have an intense interest in comprehensive cancer control and the desire to help; and
  - are advocates of evaluation who can help gain buy-in and support.
- ***Engaging the opposition***
  It may be tempting to exclude stakeholders who raise a lot of questions or concerns about the operations of your program. However, these critics could help identify weaknesses or gaps in planned evaluation efforts. Their input could help you anticipate criticism and help you address opposing views when reporting evaluation findings. If you are concerned that your critics may disrupt your evaluation planning or implementation process, consider working with them outside of the larger evaluation stakeholder group; ask them to serve as an external reviewer or data source. At this level of engagement, you can collect, review, and respond to critics'

feedback in a very structured manner, helping to ensure that criticism is constructive in your program evaluation.

- ***Recruiting a manageable number of stakeholders***
  Remember that your evaluation stakeholder group needs to be managed, similar to the way your CCC coalition is managed. Roles and responsibilities for members need to be clearly identified, meetings need to be planned and facilitated, and regular channels of communication need to be established. Think practically about how large of a group you are able to manage effectively when developing your evaluation stakeholder group. Consider the level of resources you have to devote to this task, including staff time and meeting funds. It may only be feasible for you to work closely with a small group of evaluation stakeholders—preferably primary users of evaluation findings in the overall development and implementation of the evaluation. However, this does not preclude valuable stakeholders, such as your CCC coalition members, from receiving key communications regarding your evaluation efforts. It is important to continue to share information with all stakeholders throughout this process, no matter what functional role they choose to play in the development and implementation of the evaluation.

- ***Disclosing resource limitations***
  Limited resources can pose challenges for stakeholder recruitment and slow the momentum of stakeholder groups. However, it is important to be forthcoming about the level of resources your program is able to dedicate to evaluation efforts. This transparency will help you work with stakeholders to create a realistic and useful evaluation design; it may even lead to partner contributions and expand your evaluation resources.

- ***Addressing evaluation requirements***
  It is critical to balance participatory approaches to evaluation with your need to respond to evaluation requirements. **Be forthcoming with stakeholders about the evaluation expectations of your funders** (i.e., all evaluation activities that you must complete as a recipient of CCC funding). Stakeholders need to know (1) what your evaluation requirements are and (2) that responding to requirements is a priority of your evaluation work.

The evaluation standards from the CDC Framework can help you avoid common pitfalls when identifying and engaging evaluation stakeholders. Table 3 includes considerations for applying the standards in your work with the evaluation stakeholder group.

Table 3. Applying Evaluation Standards to Stakeholder Identification and Engagement

Evaluation Standards	Considerations
Utility	• Who will use the evaluation results?
Feasibility	• What level of resources can our program dedicate to stakeholder recruitment and management?
Propriety	• Are we being honest and upfront with stakeholders about anticipated workload and opportunities for participation? • Have we clearly communicated with our stakeholders about evaluation requirements and potential challenges (e.g., limited resources)?
Accuracy	• What skill sets and perspectives should be represented in our stakeholder group to ensure that we paint an accurate picture of our program?

What Roles Can Stakeholders Play in our Program Evaluation?

Stakeholders can make meaningful contributions during all phases of the evaluation, including evaluation planning, implementation, and the sharing and use of findings. Based on evaluation needs and stakeholders' skills and interests, members of the evaluation stakeholder group can be engaged as

- external reviewers of evaluation plans and methods,
- members of the evaluation advisory committee,
- data sources (i.e., participants in evaluation interviews and surveys),
- data collectors,
- data analysts,
- interpreters of findings,
- writers (e.g., of final evaluation reports, manuscripts, briefs) and presentation developers, and
- presenters or advocates who share findings with community partners and policymakers.

Remember that all stakeholders may not participate in all phases of your program evaluation. Some stakeholders may contribute only to evaluation planning, while others' participation may be limited to providing implementation support or sharing evaluation findings.

Tools and Templates for Identifying and Engaging Stakeholders

In this section, we provide worksheets to help programs apply the information provided above. We first provide blank templates of the worksheets, followed by completed examples for programs to use as a reference.

Tools and Templates: Stakeholder Assessment Worksheet (blank template)

I. **Evaluation Stakeholders and Primary Intended Users:** List key individuals or groups who (1) have a stake in the evaluation *and* (2) who will use evaluation results. Identify and document each stakeholder's evaluation interests.

Evaluation Stakeholders	What Stakeholders Want to Know

II. Engaging Stakeholders: For each stakeholder listed above, note how and when you might engage them in your program evaluation. Be sure to consider stakeholders' areas of expertise, interests, and availability.

Evaluation Stakeholders	How to Engage Stakeholders	When to Engage Stakeholders

Tools and Templates: Stakeholder Assessment Worksheet (completed example)

I. Evaluation Stakeholders and Primary Intended Users: List key individuals or groups who (1) have a stake in the evaluation *and* (2) who will use evaluation results. Identify and document each stakeholder's evaluation interests.

Evaluation Stakeholders	What Stakeholders Want to Know
Health department leadership	• Document the resources that have been leveraged to support CCC program efforts.
Legislators	• Identify the number of people receiving services and the extent to which interventions are yielding intended awareness, behavioral and/or health outcomes for participants.
Intervention participants	• Determine the extent to which interventions are yielding intended awareness, behavioral and/or health outcomes for participants.
CDC's DCPC	• Review the quality, contributions, and impact of the CCC coalition. • Review the quality and implementation progress of the statewide CCC plan. • Determine to what extent interventions outlined in the CCC action plan are being executed and yielding intended results.
Local American Cancer Society partner	• Determine whether American Cancer Society products are being incorporated effectively into the efforts of the CCC program.

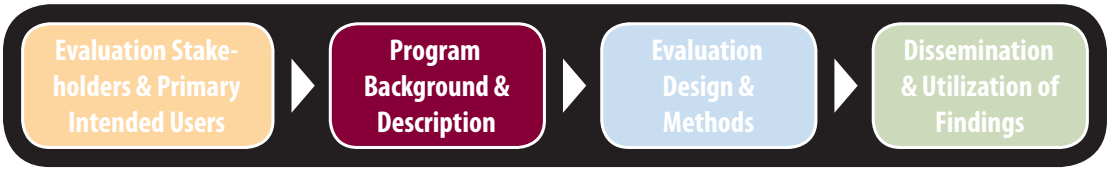
II. Engaging Stakeholders: For each stakeholder listed above, note how and when you might engage them in your program evaluation. Be sure to consider stakeholders' areas of expertise, interests, and availability.

Evaluation Stakeholders	How to Engage Stakeholders	When to Engage Stakeholders
Health department leadership	• Members of the evaluation advisory committee • Presenters/advocates who share findings with state and community partners	• All phases of the evaluation process via regular evaluation advisory committee meetings
Legislators	• External reviewers of evaluation plans and methods	• Evaluation planning phase
Intervention participants	• Members of the evaluation advisory committee • Data sources (i.e., participants in evaluation interviews and surveys)	• Two representatives to participate in all phases of the evaluation process via regular evaluation advisory committee • Evaluation implementation phase
CDC's DCPC	• External reviewers of evaluation plans and methods	• Evaluation planning phase
Local American Cancer Society partner	• Data analysts • Presenters/advocates who share findings with state and community partners	• Evaluation implementation phase • Dissemination phase

Checklist for Identifying and Engaging Evaluation Stakeholders

- ❑ Consider the level of resources (e.g., staff time, funding, meeting space) available for convening, managing, and sustaining an evaluation stakeholder group.
- ❑ Address key considerations regarding the composition of our evaluation stakeholder group, such as identifying partners who offer diverse perspectives and evaluation and program expertise.
- ❑ Communicate clearly and openly with evaluation stakeholders about key issues, including, but not limited to, evaluation resources and priorities, anticipated challenges, opportunities for participation, and workload.
- ❑ Work with stakeholders to identify mechanisms that support ongoing communication throughout the evaluation process.
- ❑ Identify how and when stakeholders will be engaged in the evaluation based on their availability, interests and skills, and program needs.

Program Background and Description



This section provides guidance on describing your program, which is an important precursory step to developing the evaluation design and methods. It is intended to help you

- engage stakeholders in the development of a detailed program description,
- draft a detailed description of your CCC program, and
- apply these skills by using the worksheet template provided on page 34.

We use the term **detailed program description** to refer to a summary of the following:

- ***Program resources***
  Program resources include the people on the ground doing the work (e.g., coalition members or member organizations, health department staff, academic partners), as well as funding streams. Your funding sources may include state appropriations, federal agencies, or foundations.
- ***Key activities, tangible products produced by activities, and the intended outcomes of your program activities***
  Common cancer control activities include training providers and implementing a community-wide social marketing campaign. Tangible products from these activities would include the number of training participants or community members reached by a campaign. Intended outcomes for these activities would include increases in awareness or changes in behavior related to preventing or controlling cancer.
- ***The stage of development of your CCC program***
  Within CCC, we generally refer to two stages of program development: (1) planning, which involves applying the building blocks to develop a comprehensive cancer control plan, and (2) implementation, during which programs work with partners to put their plans into action. We encourage grantees to be as specific as possible when describing their program's stage of development. For example, if your program is in the implementation phase, has work begun to revise the plan? Is your program in a stage of reprioritization, perhaps shifting focus or expanding interventions in response to what has been done successfully in the past?

- ***Unique program context that may affect the success of your comprehensive cancer control efforts***
  Program context includes historical, political, program or organization, and community factors that affect CCC efforts. Specific examples include, but are not limited to, unique health beliefs of diverse communities; health department budget constraints; and changes in state, tribe, or territory leadership that redirect the focus of public health agencies and programs.

The outline provided on page 34 of this section is designed to help you draft a detailed description of your CCC program.

Developing a detailed program description with your evaluation stakeholders will help establish a common understanding of program activities and intended outcomes, as well as the context in which your program operates. Thus, developing a detailed program description will facilitate later evaluation tasks related to developing and focusing your evaluation design (see the next section on Evaluation Design and Methods).

How Should the Information in a Detailed Program Description Be Presented?

There are several ways you can present information about your program. You may choose to describe your program in narrative form, or you may use tables or diagrams to present key program components and the intended relationships between them. Logic models are graphic depictions of the relationships between a program's resources, activities, and intended outcomes. They are useful tools for developing and presenting a program description. However, CCC programs are not required to develop logic models.

LOGIC MODELS

CCC programs are not required to develop logic models. However, logic models are used in CCCB's national evaluation efforts, and the branch considers them useful tools for describing programs and for planning and monitoring evaluation activities.

What Are the Components of a Logic Model, and What Would a Logic Model for a CCC Program Look Like?

Logic models commonly include the following components:

- **Inputs** are the resources invested in a program or intervention. Inputs include financial, personnel, and in-kind resources.
- **Activities** are actions or events undertaken by the program to produce desired outcomes.
- **Outputs** are direct, tangible results of program activities, or work products.

- **Outcomes** are the desired results of the program. Outcomes can be categorized as short-term, intermediate, or long-term. Short-term outcomes often focus on changing the knowledge and attitudes of a program's target audience. Behavioral, normative, and policy changes are generally classified as intermediate outcomes. Long-term outcomes refer to the desired results of a program that can take several years to achieve, such as changes in population health status.

See the CCC Comprehensive Program Description on page 35 of this section and in Appendix C for an example CCC program logic model.

How Do I Engage Stakeholders in the Development of a Detailed Program Description?

Your approach to working with evaluation stakeholders to develop a detailed program description may vary based on several factors, including the program resources and the size of your stakeholder group. The following are tips for working with stakeholders to develop a detailed program description.

- ***Don't reinvent the wheel***
  You likely have most, if not all, of the components of a detailed program description at your fingertips. Detailed program descriptions are often included in CCC state plans and applications for funding. Descriptions from these documents are likely to have been developed with input from stakeholders, so they may only need to be summarized in a more concise format and reviewed by evaluation stakeholders.
- ***Build on grantee requirements***
  CCC grantees are expected to conduct certain activities (e.g., build strong partnerships and assess the burden of cancer) and to work toward certain shared outcomes (e.g., risk reduction and enhanced survivorship). In addition to existing program descriptions that may have been developed for the state plan or funding application, grantee performance expectations are a good starting point for drafting logic models or inventorying activities and intended outputs and outcomes.
- ***Draft and share***
  Rather than planning a meeting with stakeholders to develop a program description from scratch, consider drafting a program description from the existing resources mentioned in the tips above and working with stakeholders to identify and address gaps or inconsistencies in the draft. This draft-and-share approach may be particularly useful for programs who are working with limited resources for stakeholder engagement and evaluation planning. If your draft is closely aligned with existing program descriptions (i.e., what program and key stakeholders said they would do) and grantee performance expectations (i.e., what program and key stakeholders are expected to do with funding), stakeholders are likely to respond well to the draft-and-share approach. Try to avoid presenting drafts that differ drastically from existing program plans and guidelines; they may cause confusion among stakeholders.

- ***Work with a facilitator***
  In cases where existing program descriptions are outdated, vague, or otherwise offer little to build on, you may need to engage your stakeholders in both drafting and finalizing a detailed program description. In these instances, it may be helpful to work with a facilitator who can guide your evaluation stakeholder group in thinking through the key components of your program, unique program context, and stage of program development. The facilitator may be an external contractor or a health department staff member with strong group facilitation and evaluation skills. If you plan to include a logic model in your program description, be sure that your facilitator has the experience and skills necessary to lead a group through the logic modeling process. Sharing relevant sections of this toolkit with your facilitator may help them prepare for meetings with your evaluation stakeholder group.

- ***Be flexible***
  CCC programs change over time based on population needs, program resources, and other contextual realities. Thus, the logic models, tables, and narratives that describe programs will need to be reviewed and revised regularly to reflect program changes. Reminding program staff and stakeholders that program descriptions are not set in stone and can be refined throughout the evaluation and implementation process may keep the group from getting stuck on minor details. It is important to provide a thorough "big picture" of your program, but it is also important to make efficient use of resources—including stakeholder and staff time—when implementing your CCC program and evaluation.

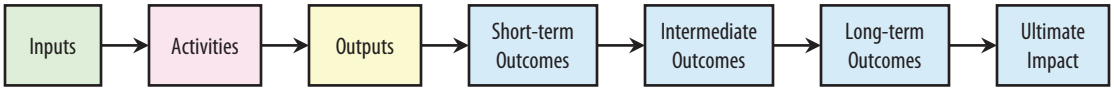
- ***Be realistic***
  It is extremely important that your program description paint a realistic picture of program activities and intended outcomes. The program evaluation design is linked to this description of what your program does and what outcomes the program activities are intended to achieve. If your program description is not realistic and accurate, achievements will be difficult to document, and it is unlikely that your program evaluation will produce useful findings.

Tools and Templates for Describing the Program

In this section, we provide tools to help programs apply the information provided above. We first provide blank templates of each tool, followed by completed templates for programs to use as a reference.

Tools and Templates: Detailed Program Description Outline (blank template)

I. Key CCC Program Components: Insert a copy of your program's logic model or provide a tabular and/or narrative description of your program's resources, major activities, and the anticipated outputs and outcomes of program activities.



II. Stage of Development: Briefly describe your program's stage of development.

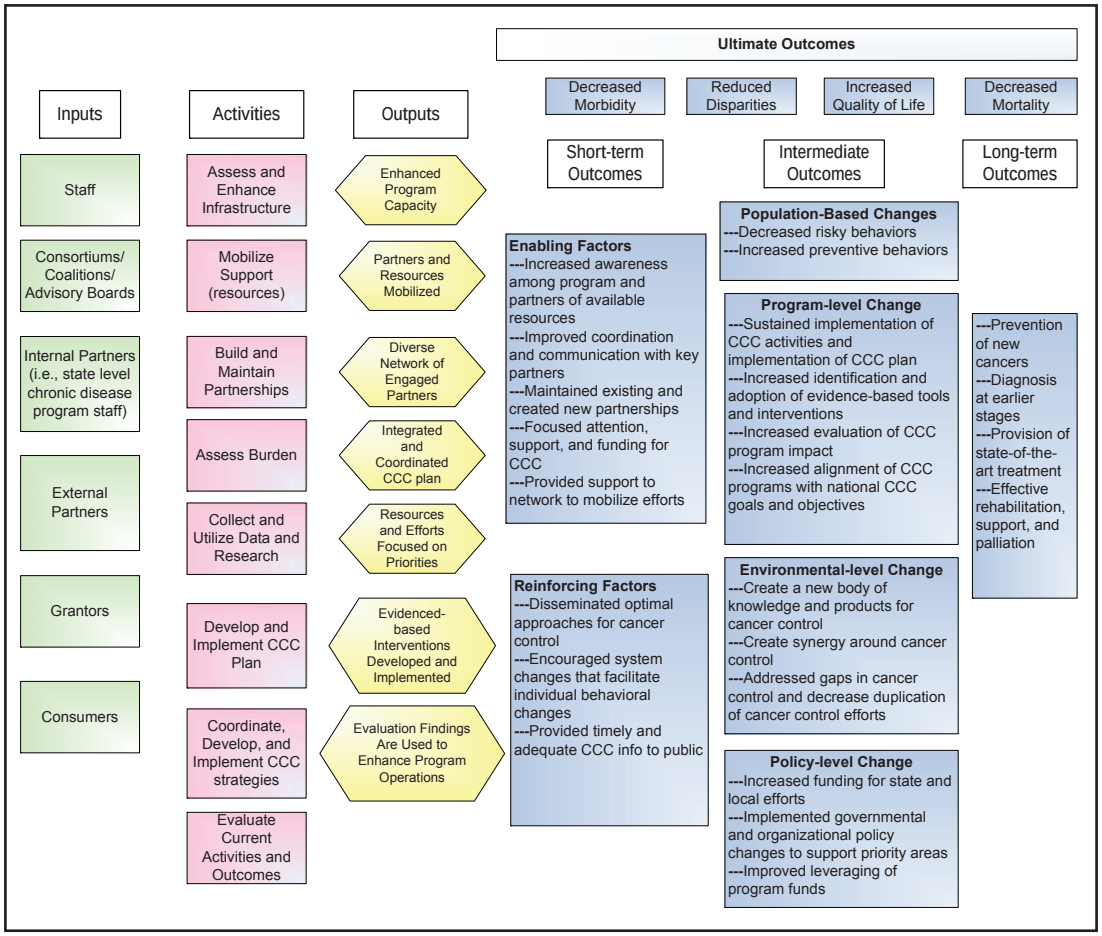
- Which major activities have been completed, what are you currently working on, and what work has yet to begin?

III. Program Context: Briefly describe any unique program context that may affect the success of your CCC efforts.

- What historical, political, program or organization, and community factors have affected your CCC efforts, and how?

Tools and Templates: Detailed Program Description Outline (completed example)

I. Key CCC Program Components: Insert a copy of your program's logic model, or provide a tabular and/or narrative description of your program's resources, major activities, and the anticipated outputs and outcomes of program activities.[8]



[8] A full-size version of this sample logic model is available in Appendix C.

II. Stage of Development: Briefly describe your program's stage of development.

Our program is in the implementation phase.

- Major activities completed:
  - Implemented social marketing campaign to increase awareness among African Americans regarding colorectal cancer
  - Implemented provider education series via American Medical Association
- Currently working on:
  - Evaluating interventions
  - Revising CCC plan
  - Revising burden report
- Work has yet to begin on:
  - Dissemination of new CCC Plan and burden report
  - Implementation of new CCC plan

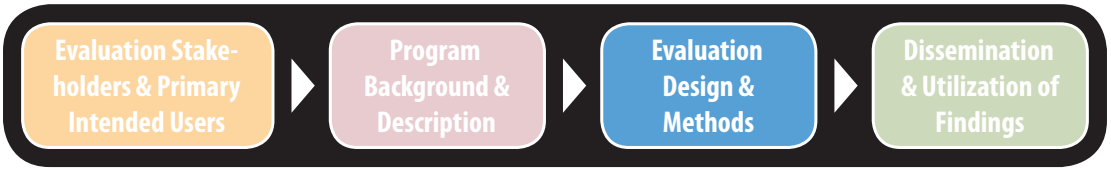
III. Program Context: Briefly describe any unique program context that may affect the success of your CCC efforts.

- ***Reduction of state appropriations***
  A reduction in state appropriations for cancer prevention and control has reduced our CCC budget by 10%. In response to this budget decrease, we have not renewed our contracts with academic partners to revise the burden report and are completing much of this work in house. Unfortunately, this adjustment means that it is taking us much longer to revise the burden report this year (several months) than it has in the past (1 month).
- ***Tobacco policy passes***
  A comprehensive smoke-free campus policy has been adopted in our state's highest-performing school district. Information from our CCC burden document was used to help educate policymakers during this effort, and the CCC coalition provided a forum for state tobacco control champions to partner with cancer control champions and advocate for this policy change. Leadership from the school district has agreed to work with the cancer and tobacco control champions to encourage other school districts throughout the state to enhance their smoke-free policies.

Checklist for Developing a Detailed Program Description

- ❑ Work with key stakeholders to clearly describe (in narrative, tabular, and/or logic model format) our program's resources, key activities, and the tangible products and intended outcomes of activities.
- ❑ Document our program's stage of development, including a brief description of major accomplishments, current work, and work that has yet to begin.
- ❑ Identify and describe contextual factors that are affecting CCC efforts.

Evaluation Design and Methods



This section provides guidance on focusing the evaluation and establishing appropriate methods for your CCC program evaluation. It is intended to help you

- identify the program areas the evaluation will focus on and the specific questions the evaluation will address;
- develop indicators and identify data sources, data collection methods, and data analysis plans for each evaluation question; and
- draft a detailed evaluation design and methods matrix for your program using the worksheet template provided on page 46.

We use the term **evaluation design and methods** to refer to a description of the evaluation focus, questions, and data collection and analysis methods. This step of the evaluation process builds on previous efforts to engage stakeholders and develop a detailed program description. Having a clear picture of the program and a clear understanding of what information about the program is important to stakeholders helps evaluators determine what components of a program will be evaluated and how.

See the matrix on page 46 of this section. It is designed to help you develop and document your evalation design and methods.

Evaluation Focus

Generally speaking, your evaluation can focus on program implementation (or process), program outcomes, or both—for a review of types of evaluations, see Section 1: Evaluation Primer. However, we use the term **evaluation focus** to refer to the specific CCC program component to be evaluated.

What Are Examples of Evaluation Focus Areas for CCC Programs?

During the 5-year funding period, NCCCP grantees are required to evaluate the three Ps:

- **Partnerships** refers to the quality, contributions, and impacts of your CCC coalition.
- **Plan** refers to the quality and implementation of the statewide CCC plan.
- **Program** refers to the extent to which interventions in your CCC action plan are executed and yield intended results.

In addition to the three Ps, evaluations may focus on other program components of interest to key stakeholders, including the following:

- **Products** refers to the quality or use of CCC resource material produced by the program.
- **Training** refers to the quality and impact of CCC-related training provided by the program.
- **Integration** refers to the extent to which your CCC program is integrated with related chronic disease programs in your state, tribe, or territory.
- **Efficiency** refers to the value and volume of outputs produced by the resources invested in the program.

How Do I Select Among a Long List of Potential Evaluation Focus Areas?

The following are factors that will influence decisions regarding evaluation focus areas:

- **Stakeholder interests:** When narrowing the focus of your evaluation, it is important to consider what is of interest to your key stakeholders, including funders.
- **Evaluation resources:** Consider the amount of funding, time, and staff resources available to support evaluation efforts. It may not be feasible for programs with limited resources to expand their evaluation focus beyond the three Ps.
- **Stage of program development:** You will likely be able to rule out some focus areas based on your program's stage of development. For example, if a program is in the process of updating the statewide CCC plan and dedicating significant program resources to that activity, the CCC plan should be the main focus of the program evaluation design (rather than other efforts, such as training, that may not be a priority for the program at the time).

BUILD ON EARLY EVALUATION ACTIVITIES

Recall that you have already documented stakeholder interests in the first step of evaluation: ***Evaluation Stakeholders and Primary Intended Users***. In addition, during the second step, ***Program Background and Description***, you have documented evaluation resources and described the program's stage of development. Refer back to this work as you engage stakeholders in focusing the evaluation and developing evaluation questions.

Evaluation Questions

Once you have worked with stakeholders to identify focus areas for the evaluation, you can begin to draft evaluation questions for each focus area. **Evaluation questions** detail what you want to know. Table 4 presents sample evaluation questions for the three Ps.

How Many Evaluation Questions Are CCC Programs Expected to Address?

There is no hard rule regarding how many evaluation questions to include in your evaluation design. CCC programs are expected to identify questions that are important to key stakeholders and facilitate program improvement efforts. The number of evaluation questions programs are able to address will depend on the level of resources and evaluation expertise available to CCC them. You should identify at least one evaluation question related to each of the three Ps (partnerships, plan, and program) and expand your evaluation design beyond that scope as feasible.

Table 4. Example Evaluation Questions

Evaluation Focus	Evaluation Questions
Partnerships	• How strong is the CCC partnership? • Are stakeholders satisfied with the work of the partnership? • What factors are affecting (positively or negatively) partnership maintenance?
Plan	• Is the CCC plan a high-quality plan? • Are the goals, objectives, and strategies of the plan being implementing as intended? Why or why not? • How are partners using the plan?
Program	• Are evidence-based interventions in our annual action plan being implemented as planned? Why or why not? • Are target audiences satisfied with the delivery of evidence-based interventions? • Are our evidence-based interventions yielding desired outcomes?

How Do I Select Among a Long List of Potential Evaluation Questions?

The same factors that influence decisions regarding evaluation focus areas should guide the selection of evaluation questions:

- **Stakeholder interests:** Maximize limited evaluation resources by selecting evaluation questions that are of interest to the majority of key stakeholders. It may be helpful to have stakeholders rank a potential list of evaluation questions according to the usefulness of information that will be produced.
- **Evaluation resources:** Although programs and stakeholders may want to address a wide range of evaluation questions, such comprehensive evaluations may not be feasible due to resource limitations. It is important to strike a balance between planning sound evaluation activities and developing an evaluation design that your program has sufficient resources to implement.

- **Stage of program development:** It is important that evaluation questions are appropriate for the CCC program's stage of development. For example, programs that are in the process of launching a new intervention would not be able to address evaluation questions about that intervention's long-term health impacts. Instead, such a program may want to develop evaluation questions related to the implementation of their new intervention and the anticipated short-term and intermediate outcomes for the intervention.
- **Process and Outcome:** It is important to incorporate both process and outcome questions as you evaluate your program. Process evaluation documents and assesses how a program was implemented and operates. Outcome evaluation assesses the impact of a program, presents conclusions about the merit or worth of a program, and makes recommendations about future program direction or improvement.

Do We Have to Include New Evaluation Questions in Each Annual Evaluation Plan?

Grantees are required to submit annual evaluation plans. However, we expect that plans will include many of the same evaluation questions from year to year. This is because some questions will take more than 1 year to answer and will require ongoing data collection over the course of the 5-year funding period. Of course, as priorities change, evaluation questions may also change.

Indicators

After working with stakeholders to identify focus areas for the evaluation and evaluation questions for each focus areas, you should identify indicators for each of the evaluation questions. The term **indicators** refers to the type of data and measures required to answer an evaluation question. Indicators are visible, measurable signs of program performance. Note that an evaluation question may have more than one indicator. Table 5 presents sample indicators for an evaluation question related to partnerships.

HOW DO PERFORMANCE MEASURES RELATE?

Performance measures are a way for CDC to understand the overall efforts and impact of its grantees and a way to gather information to improve the technical assistance it provides to programs. Performance measures characterize a distinct set of indicators around partnerships and plan implementation. A detailed program evaluation that focuses on the three Ps incorporates these measures and provides additional indicators that measure program performance and impact.

Table 5. Example Indicators for Partnership, Plan, and Program Evaluation Questions

Evaluation Question	Indicators
Have we built a strong CCC partnership?	• Meeting participation rates • Types and number of sectors represented • Representativeness of key target groups • Types and number of partner contributions
Are we implementing the plan as intended?	• Extent to which CCC plan objectives are implemented as intended • Number of CCC member organizations that implement an activity related to the CCC plan
Does our new sun safety intervention improve knowledge and behavior among participants as intended?	• Individual participants' knowledge of sun safety and behavior before the educational session • Individual participants' knowledge of sun safety and behavior after the educational session

How Do I Identify Appropriate Indicators for our Evaluation Questions?

Indicators for some of your evaluation questions may seem obvious. For example, consider the following evaluation question from Table 4: "Are stakeholders satisfied with the work of the partnership?" The data you need to address this question are referenced in the question itself. An obvious indicator for this evaluation question is "Stakeholders' reported levels of satisfaction with the partnership."

However, identifying indicators for evaluation questions may not always be such a straightforward step. Consider another evaluation question from Table 4: "How strong is the CCC partnership?" Before identifying indicators for this question, you have to qualify the evaluation question, that is, you have to clarify what constitutes a "strong" partnership to your program.

- We consider the following to be characteristics of a strong partnership, and thus good indicators:
  - meetings have high attendance,
  - key cancer care sectors are represented on the partnership,
  - target populations are represented on the partnership, and
  - members contribute to the work of the partnership.

Qualifying the evaluation questions makes it easier to identify appropriate indicators.

Data Sources

Once the focus of the evaluation has been determined, evaluation questions have been developed for each focus area, and indicators have been developed for each evaluation question, data sources must be identified for each indicator. As the name implies, the **data source** indicates where you will go to gather information on your indicators. Information used for evaluation is generally a combination of two types: quantitative (i.e., observations that are numerical, such as counts and assessment scores) and qualitative (i.e., observations that are descriptive, such as interview notes or written program records). Note that more than one data source may provide information for each indicator. In some instances, you may be able to use existing data sources such as administrative databases or surveillance systems like the BRFSS. In other instances, you may need to develop a new survey to collect the data you need.

What Are Examples of Data Sources that Grantees are Using in their CCC Program Evaluations?

Examples of data sources include the following:

- **Surveys and surveillance systems (**e.g., BRFSS, Youth Risk Behavior Survey [YRBS], and state- or program-developed surveys or surveillance systems, as well as pre- and post-test surveys designed for specific interventions);
- **Cancer registries (**e.g., National Program of Cancer Registries [NPCR] and/or Surveillance, Epidemiology, and End Results [SEER]–funded registry data);
- **National and state vital statistics systems (**e.g., vital registration system data reported via National Vital Statistics Reports);
- **Program documents (**e.g., partnership member rosters, meeting attendance records, memoranda of understanding, financial records, product distribution records);
- **Interviews with key informants or focus groups (**e.g., notes from discussions with program staff or other key personnel); and
- **Observation (**e.g., of partnership meetings or on-the-job performance).

PILOT TEST NEW DATA COLLECTION TOOLS

If your program is developing a survey or an interview or focus group guide to collect data, be sure to pilot test these tools to make sure that they are user-friendly and that they capture the information they were designed to collect. In most cases, data collection tools need to be revised based on pilot results, so build time for revisions into your evaluation timeline.

Data Collection Methods

Once the evaluation focus, questions, indicators, and data sources have been identified, you need to adopt appropriate data collection methods. We use the term **data collection methods** to refer to how data will be collected, when data will be collected, and who will be responsible for data collection. Table 6 provides an example description of data collection methods for a partnership evaluation question.

Table 6. Example Data Collection Methods for a Partnership Evaluation Question

Focus	Evaluation Question	Indicators	Data Collection Source	Data Collection Method	Data Collection Timing
Partnership	Have we built a strong CCC partnership?	• Meeting participation rates • Types and number of sectors represented • Representativeness of key target groups • Types and number of partner contributions	• Program records	• Program Coordinator will abstract relevant data from CCC coalition database	• Twice a year (6 months into the fiscal year and at the end of each fiscal year)
Plan	Are we implementing the plan as intended?	• Extent to which CCC plan objectives are implemented as intended • Number of CCC member organizations that implement an activity related to the CCC plan	• CCC plan • Program records—memorandum of understanding, contracts, system for tracking member activities	• Evaluator will abstract data from program records and/or database • Evaluator will survey CCC members (Web-based)	• Annual abstraction of program records • Annual survey of CCC member organization
Program	Does our new sun safety intervention improve knowledge and behavior among participants as intended?	• Individual participants' knowledge of sun safety and behavior before the educational session • Individual participants' knowledge of sun safety and behavior after the educational session	• Key informants: participants receiving the sun safety education	• Educators will administer confidential pre- and post-paper-based surveys • Evaluators will conduct follow-up phone interviews	• Before and immediately following each educational session • 3 months after the intervention

How Do I Identify the Right Data Collection Methods?

Think of the right data collection method as one that

- collects the information you need in the most straightforward way possible;
- is feasible for your program to apply given the evaluation resources at your disposable;
- minimizes burden on program staff, partners, and intervention participants;
- ensures confidentiality and protection of sensitive information;
- produces unbiased, accurate, and reliable results; and
- is relevant and sensitive enough to answer the evaluation question.

Data Analysis Methods

In addition to identifying data collection methods, you will need to specify data analysis methods. We use the term **data analysis methods** to refer to how data will be organized, manipulated, and interpreted, as well as who is responsible for data analysis.

What Level of Data Analysis Is Sufficient?

Your data analysis methods should be rigorous enough to address related evaluation questions. In addition, you should be prepared to justify your choice of data analysis methods and note the weaknesses and strengths of chosen methods when reporting evaluation findings.

Some evaluation questions will only require you to conduct a basic level of data analysis, which might include

- entering data into a spreadsheet (such as Microsoft Excel);
- checking the data for missing or strange entries and making corrections, if possible, or deleting and documenting unusable data;
- importing the data into a statistical software program (such as SPSS or SAS); and
- calculating totals, frequency counts, and percentages based on your indicators—note that for some indicators, data will have to be stratified or grouped based on variables of interest before calculating totals and percentages.[9]

Evaluation questions related to associations between your program activities (e.g., training or intervention service delivery) and desired outcomes (e.g., changes in knowledge, attitudes, behavior, health care systems, or health status) require more advanced statistical analysis, such as means comparison (e.g., using t-tests) or regression analysis. Evaluation stakeholders or state health department staff may be able to provide assistance with more advanced levels of data analysis.

[9] For surveys such as the BRFSS with complex survey designs (i.e., designs other than a simple random sample or entire sampling [total enumeration] of the population), statistical software that takes into account the design of the survey in the analysis will need to be used to obtain weighted percentages and the correct confidence intervals. Some examples of software are SAS, SUDAAN, Stata, and SPSS.

Applying sound methods is equally important to qualitative data analysis as it is to quantitative data analysis. A basic level of qualitative data analysis may include

- transcribing audio recordings or entering narrative comments from surveys into a word processing or qualitative data analysis program;
- closely reading and coding the text (i.e., highlighting key themes found in the text); and
- grouping text by themes, then reexamining and coding the data to determine if sub-themes or key issues emerge within higher-level themes.

More advanced levels of qualitative analysis involve within and between case analysis and the use of multiple coders and calculation of interrater reliability. Again, your evaluation stakeholders or state health department staff may be able to assist you with more advanced levels of analysis.

Tools and Templates for Evaluation Design

In this section, we provide a tool to help programs apply the information provided above. We first provide a blank template of the worksheet, followed by a completed template for programs to use as a reference.

Tools and Templates: Evaluation Methods and Design Matrix (blank template)

Focus	Evaluation Questions	Indicators	Data Collection Sources	Data Collection Methods	Data Collection Timing	Data Analysis
The CCC component you will evaluate	*What you want to know*	*The type of data you will need to address the evaluation question*	*Where you will get the data*	*How you will get the data*	*When you will collect the data*	*How you will organize and interpret the data*

Tools and Templates: Evaluation Methods and Design Matrix (completed examples)

Focus	Evaluation Questions	Indicators	Data Collection Sources	Data Collection Methods	Data Collection Timing	Data Analysis
The CCC component you will evaluate	*What you want to know*	*The type of data you will need to address the evaluation question*	*Where you will get the data*	*How you will get the data*	*When you will collect the data*	*How you will organize and interpret the data*
Partnership	Have we built a strong partnership?	• Meeting participation rates • Types and number of sectors represented • Representativeness of key target groups • Types and number of partner contributions	• Program/ coalition records • Partners (self-report)	• Program Coordinator will abstract records from program database • Program Evaluator will survey partners (Web-based)	• Quarterly abstraction • Annual survey	Program Evaluator: • Totals and percentages of partners in each sector and target group • Percentages of partners participating in meetings over time • Totals and percentages of partners providing various contributions • Cross-check of program record and survey data

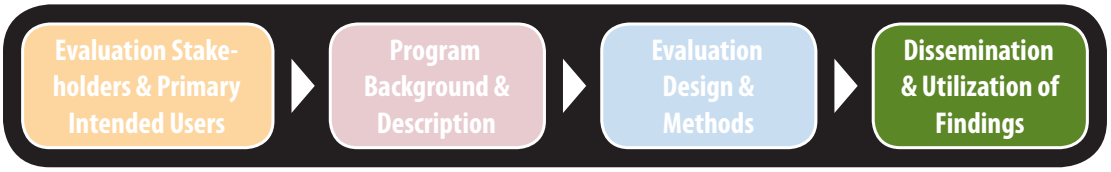
Focus	Evaluation Questions	Indicators	Data Collection Sources	Data Collection Methods	Data Collection Timing	Data Analysis
The CCC component you will evaluate	*What you want to know*	*The type of data you will need to address the evaluation question*	*Where you will get the data*	*How you will get the data*	*When you will collect the data*	*How you will organize and interpret the data*
Plan	Was the CCC plan successfully implemented?	• Extent to which CCC plan objectives are implemented as intended • Number of CCC member organizations that implement an activity related to the CCC plan	• Program data—CCC plan • Program data—MOUs, contracts, system for tracking member activities	• Program Evaluator will abstract data from program records and/or database • Program Evaluator will survey CCC members (Web-based)	• Annual abstraction of program records • Annual survey of CCC member organizations	Program Evaluator: • Number of CCC plan objectives implemented • Number of CCC members who report implementing an activity that is related to the CCC plan • Number of CCC plan activities implemented by CCC members
	Are CCC plan activities evidenced based and culturally appropriate?	• Number of implemented CCC plan activities that are evidence based • Number of implemented CCC plan activities that are culturally appropriate	• Program data—program reports, MOUs, contracts, system for tracking Evidence-Based Interventions. • Program data—program reports, MOUs, contracts, system for tracking activities that meet the Culturally and Linguistically Appropriate Services (CLAS) standards	• Program Coordinator will abstract data from program records or database and compare to list of evidence-based practices for cancer control and CLAS standards	• Annual abstraction (less frequently if there are no changes in the CCC plan and implementation strategies)	Program Coordinator: • Number of CCC plan activities that are evidence based • Number of CCC plan activities that are aligned with the CLAS standards

Focus	Evaluation Questions	Indicators	Data Collection Sources	Data Collection Methods	Data Collection Timing	Data Analysis
The CCC component you will evaluate	*What you want to know*	*The type of data you will need to address the evaluation question*	*Where you will get the data*	*How you will get the data*	*When you will collect the data*	*How you will organize and interpret the data*
Program	Does our new sun safety intervention improve knowledge and behavior? • Did sun safety knowledge improve immediately following the educational session? • Was the knowledge retained 3 months after the educational session? • Did the percentage of participants receiving the sun safety education who indicated they used sun screen or protective clothing increase from pre-test to 3 months post-test?	• Individual participants' knowledge of sun safety and behavior before the educational session • Individual participants' knowledge of sun safety and behavior after the educational session	• Participants (self-report)	• Educators will administer confidential pre- and post-test paper-based surveys • Evaluators will conduct follow-up phone interviews	• Before and immediately following each educational session and 3 months after the intervention	Program Evaluator: • Pre- and post-test percentages for each survey question assessing knowledge (percent differences and t-tests) • Pre- and 3-month post-test percentages for each survey question assessing behavior (percent differences and t-tests)

Checklist for Developing the Evaluation Design and Methods

- ❑ Work with key stakeholders to determine the focus of our evaluation efforts.
- ❑ Develop specific evaluation questions under each evaluation focus area.
- ❑ Identify appropriate indicators and data sources for each evaluation question.
- ❑ Establish a realistic timeline for data collection and feasible and appropriate data analysis plans.
- ❑ Identify leads for major data collection and analysis activities.

Dissemination and Utilization of Findings



This section provides guidance on sharing and using CCC program evaluation findings. It is intended to help you

- identify the key components of an evaluation report,
- determine who to share your evaluation results with, and when and how to share findings,
- describe the steps program managers will take to ensure that evaluation findings will be used to inform program improvement efforts, and
- apply these skills by using the tools provided in this section (pages 55 and 56).

We encourage grantees to take a practical and creative approach to dissemination, the process of communicating evaluation methods and findings to relevant audiences in a timely, unbiased, and consistent manner. Program staff should brainstorm early on in the evaluation process about what steps they will take to ensure evaluation findings are used to inform program improvement and expansion efforts.

Planning for the dissemination and utilization of evaluation findings builds on previous efforts to engage stakeholders, describe the program, and focus the evaluation design. Having a clear picture of the program, stakeholder interests, and evaluation priorities and activities will help the evaluation team identify appropriate strategies for sharing and utilizing evaluation findings. The first step toward dissemination is effective reporting.

Reporting

How Should I Report Evaluation Findings?

There are several options for summarizing and reporting evaluation results, including the following:

- a detailed evaluation report,
- an executive summary to the evaluation report,
- a slide presentation,
- a briefing,
- a brochure,
- a Web site,
- an article in a newsletter, or
- a radio or television spot.

Many of these options can be presented in electronic and hardcopy format.

PRACTICAL DISSEMINATION CONSIDERATIONS

Keep in mind that it takes time, staff, and funding resources to disseminate evaluation findings. However, even programs with limited resources can develop and carry out effective dissemination strategies. For example, a brief slide presentation at existing coalition meetings is an efficient approach to sharing evaluation findings.

What Information Should Be Included in a Detailed Evaluation Report?

It may be helpful to draft and finalize a full findings report with evaluation stakeholders, then pull from the detailed report to develop more concise results documents that are tailored to specific audiences. In general, a detailed evaluation report should include a description of the following:

- the evaluation background and purpose,
- evaluation methods,
- evaluation results and limitations, and
- recommendations for program improvement.

See the *Checklist for Ensuring Effective Evaluation Reports* below for tips on developing an evaluation report.

Also visit The Evaluation Center at Western Michigan University online for a free evaluation report checklist: http://www.wmich.edu/evalctr/checklists/checklistmenu.htm (click reports link under Evaluation Management header).

Tools and Templates for Reporting

In this section, we provide a checklist to help programs apply the information provided above.

Tools and Templates: Checklist for Ensuring Effective Evaluation Reports[10]

- ❑ Provide interim and final reports to intended users in time for use.
- ❑ Tailor the report content, format, and style for the audiences by involving audience members.
- ❑ Include an executive summary.
- ❑ Summarize the description of the stakeholders and how they were engaged.
- ❑ Describe essential features of the program (e.g., in appendices).
- ❑ Explain the focus of the evaluation and its limitations.
- ❑ Include an adequate summary of the evaluation plan and procedures.
- ❑ Provide all necessary technical information (e.g., in appendices).
- ❑ Specify the standards and criteria for evaluative judgments.
- ❑ Explain the evaluative judgments and how they are supported by the evidence.
- ❑ List both strengths and weaknesses of the evaluation.
- ❑ Discuss recommendations for action with their advantages, disadvantages, and resource implications.
- ❑ Ensure protections for program clients and other stakeholders.
- ❑ Anticipate how people or organizations might be affected by the findings.
- ❑ Present minority opinions or rejoinders where necessary.
- ❑ Verify that the report is accurate and unbiased.
- ❑ Organize the report logically and include appropriate details.
- ❑ Remove technical jargon.
- ❑ Use examples, illustrations, graphics, and stories.

[10] Adapted from Worthen, B. R., Sanders, J. R., & Fitzpatrick, J. L. (1997). *Program evaluation: Alternative approaches and practical guidelines* (2nd edition). New York, NY: Addison, Wesley Logman, Inc.

Dissemination

Managing your program evaluation involves planning and implementing dissemination strategies. To support the use of findings, you will need to share findings with evaluation stakeholders (i.e., people or organizations that are invested in the program, are interested in the results of the evaluation, and/or have a stake in what will be done with the results of the evaluation). In addition to sharing findings with evaluation stakeholders, you may want to promote your program by sharing results with the general public or participants in your CCC-related interventions.

Although documentation of the evaluation is needed, a formal report is not always the best format for sharing evaluation findings. Effective dissemination planning requires consideration of the timing, style, tone, message, source, vehicle, and format of information products. Regardless of how communications are constructed, the goal for dissemination is to achieve full disclosure and impartial reporting. The tips provided in this section will help you develop and carry out a dissemination strategy that best suits your program.

What Factors Are Important to Consider When Developing a Dissemination Strategy?

When developing your dissemination strategy, carefully consider the following:

- With which target audiences or groups of stakeholders will you share findings?
- What formats and channels will you use to share findings?
- When and how often do you plan to share findings?
- Who is responsible for carrying out dissemination strategies?

Use the *Dissemination Strategy Matrix* to develop and guide your dissemination efforts. A completed matrix is provided below as an example

Should our Program Tailor Evaluation Documents?

As resources allow, programs should tailor their dissemination efforts to target audiences. Consider what findings stakeholders are most interested in and how those stakeholders prefer to receive information. Funders may want to review a detailed evaluation report, but a brochure promoting the services provided and early outcomes of a specific intervention may be more appropriate for target intervention participants. As a representative body of stakeholders, your CCC coalition can provide helpful insight into which dissemination strategies are most appropriate for various target audiences.

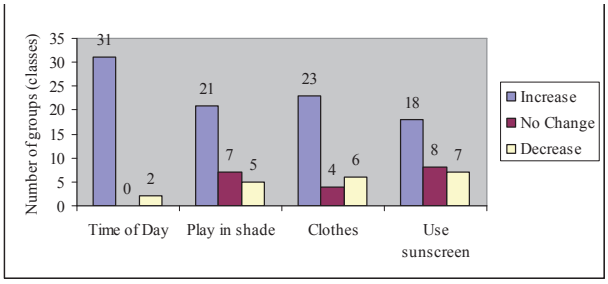
As noted in the Checklist for Ensuring Effective Evaluation Reports above, illustrations and graphics can be used to effectively communicate evaluation results to key target audiences. The New Mexico RAYS Project provides a nice example of using illustrations and graphics in a creative and concise report of evaluation findings.

Example: Using Illustrations and Graphics to Communicate Evaluation Findings—2006 Summary Report for New Mexico RAYS Project

New Mexico RAYS Project
- Raising Awareness in Youth about Sun Safety -
2006 Summary Report

KNOWLEDGE: Children in 33 groups (or classrooms) in grades K - 6 completed the pre- and post-tests for knowledge. In general, the percentage change between pre- and post-test scores was in the desired direction, where most groups showed increases in correctly answering questions about time of day, shade, sun safe clothes and use of sunscreen. The following table summarizes pre-test to post-test differences for all 33 groups; e.g., knowledge scores in 31 groups increased from pre- to post-test.

Changes in Self-Reported Sun Safety Knowledge by Group:
Pre to Post Differences for "Always/Sometimes" Responses to Four Sun Safe Behaviors (n=33)



Full report available online at http://cancernm.info/pdf/RAYS_Program_06_Summary_Report.pdf.

Tools and Templates for Dissemination

In this section, we provide tools to help programs apply the information provided above. We first provide a blank template of the worksheet, followed by a completed template for programs to use as a reference.

Tools and Templates: Dissemination Strategy Matrix (blank template)

Audience	Format and Channel for Sharing Findings	Timeline	Responsible Person

Tools and Templates: Dissemination Strategy Matrix (completed example)

Audience	Format and Channel for Sharing Findings	Timeline	Responsible Person
DCPC	• E-mail copy of detailed evaluation report to Project Officer	• Annually within 2 weeks of finalizing the report	• Program Coordinator
CCC Coalition	• Present PowerPoint presentation of key findings and recommendations • E-mail evaluation report condensed into a program action document, evaluation newsletter, factsheet, brochure • Use social networking vehicles (Twitter, blogs, etc.) to communicate evaluation efforts and findings	• Annual in-person coalition meeting • Written documents can be mailed or e-mailed 2 months after finalizing report • Coalition can subscribe to a password-protected social network vehicle to receive info on a monthly basis	• Program Evaluator • Evaluation Committee/ Workgroup
Public	• Post findings related to program achievements on the Health Department or CCC Web page	• Annually within 1 month of finalizing the evaluation report	• Program Coordinator and health department information technology staff

Utilization

It is helpful to strategize with stakeholders early in the evaluation process about how your program will ensure that findings are used to support program improvement efforts. That way, as important evaluation findings are produced, you can work with stakeholders and program staff to apply them in a timely and efficient manner.

What Are Steps We Can Take to Help Ensure the Utilization of Evaluation Findings?

There are several practical steps you can take to help ensure evaluation findings are used to improve your program. These include, but are not limited to, the following:

- Use regularly scheduled meetings with evaluation stakeholder as a forum for sharing evaluation findings in real time and developing recommendations for program improvement based on evaluation findings. Evaluation stakeholders can also help you (1) prioritize recommendations for program improvement based on stakeholder input, NCCCP grantee requirements, and practical program considerations such as staff and funding resources; and (2) operationalize recommendations, that is, think strategically about how and when recommendations can be carried out and who can lead improvement efforts.
- Encourage Program Directors and/or Program Coordinators to include a review of evaluation findings and recommendations in regularly scheduled staff meetings. They can identify action steps staff members can take in response to those

recommendations for improvement that are most relevant to program staff and operations.

- As appropriate, engage stakeholders, including coalition members and local grantees, in identifying ways they can apply evaluation findings to improve their organizational practices or CCC-related interventions. Time can be reserved for this action planning at existing coalition or committee meetings.
- If resources allow, identify a program staff member to coordinate, document, and monitor efforts program staff and partners are making to implement improvement recommendations.

Tools and Templates for Utilization

In this section, we provide a checklist to help programs apply the information provided above.

Tools and Templates: Checklist for Ensuring Utilization of Evaluation Results

- ❑ Share and discuss results at stakeholder meeting.
- ❑ Discuss prioritization and operationalization of recommendations for program improvement with stakeholders.
- ❑ Discuss ways stakeholders can apply evaluation findings to improve their organizational practices or CCC-related interventions.
- ❑ Include evaluation results and points of discussion in stakeholder meeting notes.
- ❑ Review evaluation findings and recommendations in regularly scheduled staff meetings.
- ❑ Identify action steps staff members can take to implement recommendations.
- ❑ Identify a program staff member to coordinate, document, and monitor efforts to implement improvement recommendations.

3. GLOSSARY OF EVALUATION TERMS

CCCB Evaluation Expectations

- **Evaluation plan:** A written document describing the overall approach or design that will be used to guide an evaluation. It includes what will be done, how it will be done, who will do it, when it will be done, why the evaluation is being conducted, and how the findings will likely be used.
- **Program evaluation:** The systematic collection of information about the activities, characteristics, and outcomes of programs used to make judgments about the program, improve program effectiveness, and/or inform decisions about future program development.

Dissemination and Utilization of Evaluation Findings

- **Dissemination:** The process of communicating evaluation methods and findings to relevant audiences in a timely, unbiased, and consistent manner.

Evaluation Design and Methods

- **Attribution:** The estimation of the extent to which any results observed are caused by a program, meaning that the program has produced incremental effects.
- **Case study:** A data collection method that involves in-depth studies of specific cases or projects within a program. The method itself is made up of one or more data collection methods (such as interviews and file review).
- **Comprehensive evaluation:** A term used to refer to the assessment of a program's implementation and effectiveness (i.e., evaluators conduct both process and outcome evaluation activities for a given program).
- **Cost-benefit analysis:** An analysis that combines the benefits of a program with the costs of the program. The benefits and costs are transformed into monetary terms.
- **Cost-effectiveness analysis:** An analysis that combines program costs and effects (impacts). However, the impacts do not have to be transformed into monetary benefits or costs.
- **Cross-sectional data:** Data collected at one point in time from various entities.

- **Data collection method:** The way facts about a program and its outcomes are amassed. Data collection methods often used in program evaluations include literature searches, file reviews, natural observations, surveys, expert opinions, and case studies.
- **Descriptive statistical analysis:** Numbers and tabulations used to summarize and present quantitative information concisely.
- **Evaluation design:** The logical model or conceptual framework used to arrive at conclusions about outcomes.
- **Experimental (or randomized) designs:** Designs that try to ensure the initial equivalence of one or more control groups to a treatment group by creating the groups through random assignment, thereby ensuring their mathematical equivalence. Examples of experimental or randomized designs are randomized block designs, Latin square designs, fractional designs, and the Solomon Four-Group.
- **Expert opinion:** A data collection method that involves using the perceptions and knowledge of experts in functional areas as indicators of program outcome.
- **External validity:** The ability to generalize conclusions about a program to future or different conditions. Threats to external validity include selection and program interaction, setting and program interaction, and history and program interaction.
- **File or document review:** A data collection method involving a review of program files. There are usually two types of program files: general program files and files on individual projects, clients, or participants.
- **Focus group:** A group of people, selected for their relevance to an evaluation, who are engaged by a trained facilitator in a series of discussions designed for sharing insights, ideas, and observations on a topic of concern.
- **Indicator:** A specific, observable, and measurable characteristic or change that shows the progress a program is making toward achieving a specified output or outcome.
- **Inferential statistical analysis:** Statistical analysis using models to confirm relationships among variables of interest or to generalize findings to an overall population.
- **Informal conversational interview:** An interviewing technique that relies on the natural flow of a conversation to generate spontaneous questions, often as part of an ongoing observation of the activities of a program.
- **Internal validity:** The ability to assert that a program has caused measured results (to a certain degree), in the face of plausible potential alternative explanations. The most common threats to internal validity are history, maturation, mortality, selection bias, regression artifacts, diffusion, and imitation of treatment and testing.
- **Interviewer bias:** The influence of the interviewer on the interviewee. This may result from several factors, including the physical and psychological characteristics of the interviewer, which may affect the interviewee in differential ways.
- **Interview guide:** A list of issues or questions to be raised in the course of an interview.

- **List sampling:** A technique used to select a sample, usually in reference to telephone interviewing. The interviewer starts with a sampling frame containing telephone numbers, selects a unit from the frame, and conducts an interview over the telephone either with a specific person at the number or with anyone at the number.
- **Literature search:** A data collection method that involves an identification and examination of research reports, published papers, and books.
- **Longitudinal data:** Data collected over a period of time, sometimes involving a stream of data for particular persons or entities.
- **Measurement validity:** The extent to which a measurement represents what it is intended and presumed to represent. Valid measures have no systematic bias.
- **Measuring devices or instruments:** Devices that are used to collect data (e.g., questionnaires, interview guidelines, observation record forms).
- **Natural observation:** A data collection method that involves on-site visits to locations where a program is operating and direct assessment of the setting of a program, its activities, and the individuals who participate in the activities.
- **Non-probability sampling:** A sampling method in which the units of a sample are chosen so that each unit in the population does not have a calculable non-zero probability of being selected in the sample.
- **Outcome evaluation:** The systematic collection of information to assess the impact of a program, present conclusions about the merit or worth of a program, and make recommendations about future program direction or improvement.
- **Primary data:** Data collected by an evaluation team specifically for the evaluation study.
- **Probability sampling:** The selection of units from a population based on the principle of randomization. Every unit of the population has a calculable (non-zero) probability of being selected.
- **Process evaluation:** The systematic collection of information to document and assess how a program was implemented and operates.
- **Qualitative data:** Observations that are categorical rather than numerical, often involving knowledge, attitudes, perceptions, and intentions.
- **Quantitative data:** Observations that are numerical.
- **Quasi-experimental design:** Study structures that use comparison groups to draw causal inferences but do not use randomization to create the treatment and control groups. The treatment group receives the intervention. The control group is selected to match the treatment group as closely as possible so that inferences on the incremental impacts of the program can be made.
- **Reliability:** The extent to which a measurement, when repeatedly applied to a given situation, consistently produces the same results if the situation does not change between applications. Reliability can refer to the stability of the measurement over time or to the consistency of the measurement from place to place.
- **Sample size:** The number of units to be included in a sample.

- **Sampling error:** The error attributed to sampling and measuring a portion of the population rather than carrying out a census under the same general conditions.
- **Sampling frame:** A complete list of all elements (e.g., people or households) in the target population.
- **Secondary data:** Data collected and recorded by another (usually earlier) person or organization, usually for different purposes than the current evaluation.
- **Standard deviation:** A measure of spread of numerical measurements (i.e., data) on an "interval scale." It indicates how closely individual measurements cluster around the mean.
- **Standardized format interview:** An interviewing technique that uses open-ended and closed-ended interview questions written out before the interview in exactly the way they are asked later.
- **Statistical analysis:** The manipulation of numerical or categorical data to predict phenomena, to draw conclusions about relationships among variables, or to generalize results.
- **Statistically significant effects:** Effects that are observed and are unlikely to result solely from chance variation. These can be assessed through the use of statistical tests.
- **Statistical model:** A model that is normally based on previous research and permits transformation of a specific impact measure into another specific impact measure, one specific impact measure into a range of other impact measures, or a range of impact measures into a range of other impact measures.
- **Surveys:** A data collection method that involves a planned effort to collect needed data from a sample (or a complete census) of the relevant population. The relevant population consists of people or entities affected by the program (or of similar people or entities).

Evaluation Stakeholders

- **Participatory evaluation:** An evaluation approach intended to involve key stakeholders in every aspect of the evaluation process.
- **Stakeholders:** People or organizations that are invested in the program, are interested in the results of the evaluation, and/or have a stake in what will be done with the results of the evaluation.

Evaluation Standards

- **Accuracy:** The extent to which an evaluation is truthful or valid in what it says about a program, project, or material.
- **Feasibility:** The extent to which an evaluation applies practical procedures in an efficient manner.
- **Propriety:** The extent to which an evaluation has been conducted in a manner that adheres to the highest principles and ideals (including professional ethics, civil law, moral code, and contractual agreements).

- **Utility:** The extent to which an evaluation produces and disseminates reports that inform relevant audiences and have a beneficial effect on their work.

Program Background and Description

- **Activities:** The actual events or actions that take place as a part of the program.
- **Inputs:** Resources that are required by a program in order to mount the activities successfully.
- **Logic model:** A systematic and visual way to present the perceived relationships among the resources you have to operate the program, the activities you plan to do, and the changes or results (i.e., outcomes) you hope to achieve.
- **Outcomes:** The results of program operations or activities; the effects triggered by the program (e.g., increased knowledge, changed attitudes or beliefs, increased cancer screening, reduced cancer morbidity and mortality).
- **Outputs:** The direct products of program activities; immediate measures of what the program accomplished.
- **Program goal:** A statement of the overall mission or purpose(s) of the program.
- **Resources:** Assets available and anticipated for operations. These include people, equipment, facilities, and other things used to plan, implement, and evaluate programs.

4. FOR FURTHER STUDY

Resource Category	Selected Resources
Articles and books	• Butterfoss, F. D. (2009). Evaluating partnerships to prevent and manage chronic disease. *Preventive Chronic Disease, 6*(2). Retrieved June 30, 2009, from http://www.cdc.gov/pcd/issues/2009/apr/08_0200.htm • Minkler, M., & Wallerstein, N. (Eds.) (2008). Community-based participatory research for health: From process to outcomes (2nd edition). In *Chapter 12: Issues in participatory evaluation* (pp. 199–215). San Francisco, CA: Jossey-Bass (ISBN: 978-0-470-26043-2). • Patton, M. Q. (2001). *Qualitative research and evaluation methods* (3rd edition). Thousand Oaks, CA: Sage Publications. • Patton, M. Q. (2008). *Utilization-focused evaluation* (4th edition). Thousand Oaks, CA: Sage Publications. • Rossi, P. H., Lipsey, M. W., & Freeman, H. E. (2004). *Evaluation: A systematic approach* (7th edition). Thousand Oaks, CA: Sage Publications.
Conferences and trainings	• American Evaluation Association Conference: http://www.eval.org/ • CDC Summer Evaluation Institute: http://www.eval.org/SummerInstitute09/default.asp • The Evaluators' Institute: http://tei.gwu.edu/
Web sites	• Centers for Disease Control and Prevention: http://www.cdc.gov/ • Community Tool Box, University of Kansas: http://ctb.ku.edu/ • W.K. Kellogg Foundation: http://www.wkkf.org/

5. TOOLKIT EVALUATION: WE WANT YOUR FEEDBACK

The Comprehensive Cancer Control (CCC) Evaluation Toolkit was developed to provide the user with tools and template materials to evaluate your program, plan, and partnership. It is our hope that the toolkit provides an overview of basic evaluation theory, practical advice regarding evaluation, and user-friendly tools that will enhance the quality of your program evaluation.

Although we have worked with Program Directors during the development of the toolkit, we ask that you provide additional feedback on the usability and effectiveness of this tool by doing either of the following:

1. **Talk to your Program Consultant.** As a first step, we would like to suggest that you provide your feedback through your assigned Program Consultant. Feel free to discuss your reactions to the resource over the next few months as you read the document and use the tools. We are interested to know:
   - Is the toolkit user-friendly?
   - Have you used the toolkit in any way, such as to refine or develop an evaluation plan or as a resource to understand more about evaluation?
   - Does the toolkit present evaluation theory in a way that is understandable?
   - Does the toolkit provide practical tips, strategies, and tools to develop an evaluation plan and conduct evaluation activities?
2. **Participate in our survey.** The Division of Cancer Prevention and Control (DCPC), Comprehensive Cancer Control Branch (CCCB) will conduct a comprehensive evaluation that will assess the usability and quality of this toolkit. We will rely on you, our funded partners, to participate in surveys, key informant interviews, or focus groups. Your participation in this future evaluation will be appreciated but will not be mandatory. We will ensure that results of the evaluation will be shared with all stakeholders. DCPC-CCCB is committed to using these recommendations to enhance current and/or future evaluation resources.

We thank you in advance for your insight and feedback as we move forward.

6. REFERENCES

Butterfoss, F. D. (2009). Evaluating partnerships to prevent and manage chronic disease. *Preventive Chronic Disease, 6*(2). Retrieved June 30, 2009, from http://www.cdc.gov/pcd/issues/2009/apr/08_0200.htm

Centers for Disease Control and Prevention. (1999). Framework for program evaluation in public health. Atlanta, GA: *MMWR, 48*(NoRR-11), 1–40.

Centers for Disease Control and Prevention. (2008). *Fundamentals of evaluating partnerships.* Retrieved December 1, 2008, from http://www.cdc.gov/DHDSP/state_program/evaluation_guides/pdfs/Partnership_Guide.pdf

Centers for Disease Control and Prevention. (2009). *A guide to developing a tuberculosis program evaluation plan*. Division of Tuberculosis Elimination. National Center for HIV, STD, and TB Prevention. Retrieved June 30, 2009, from http://www.cdc.gov/tb/programs/Evaluation/Guide/docs/Complete_guide_for_Developing_eval_plan.doc

Minkler, M., & Wallerstein, N. (Eds.) (2008). Community-based participatory research for health: From process to outcomes (2nd edition). In *Chapter 12: Issues in participatory evaluation* (pp. 199–215). San Francisco, CA: Jossey-Bass.

Patton, M. Q. (1997). *Utilization-focused evaluation: The new century text* (3rd edition). Thousand Oaks, CA: Sage Publications.

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Rossi, P. H., Lipsey, M. W., & Freeman, H. E. (2004). *Evaluation: A systematic approach* (7th edition). Thousand Oaks, CA: Sage Publications.

U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, Office of the Director, Office of Strategy and Innovation. (2005). *Introduction to program evaluation for public health programs: A self-study guide*. Atlanta, GA: Centers for Disease Control and Prevention.

Worthen, B. R., Sanders, J. R., & Fitzpatrick, J. L. (1997). *Program evaluation: Alternative approaches and practical guidelines* (2nd edition). New York, NY: Addison, Wesley Logman, Inc.

APPENDIX A: KEY CONTACTS AND TOOLKIT DEVELOPMENT

This toolkit is a "how to" guide for planning and implementing evaluation activities in cancer prevention and control programs.

Where Should I Direct my Questions and Comments About the Toolkit?

If you have questions about toolkit content or use, you may contact your Program Consultant via telephone or e-mail.

Please share your feedback on the toolkit with your Program Consultant. We look forward to your feedback and recommendations for improving this resource!

How Was this Toolkit Developed?

Before developing this toolkit, we conducted a review of funded programs' evaluation plans to identify areas where evaluation technical assistance was needed. We also conducted a review of existing evaluation resources developed by other CDC programs and non-government agencies with programs similar to CCCB-funded initiatives. The resource review helped us identify key concepts to be covered in the toolkit. Much of the information provided in this toolkit was adapted from three CDC resources: CDC's *Introduction to Program Evaluation for Public Health Programs: A Self-Study Guide*, CDC Division of Tuberculosis Elimination's *Guide to Developing a Tuberculosis Program Evaluation Plan*, and CDC Division for Heart Disease and Stroke Prevention's Evaluation Guides.

TOOLKIT DEVELOPMENT

- Reviewed grantees' evaluation plans
- Reviewed existing evaluation resources
- Engaged stakeholders
- Adopted the CDC Framework for Program Evaluation in Public Health
- Tailored evaluation guidance for CCCB programs
- Piloted toolkit with grantees

In addition to our reviews, two stakeholder groups informed the development of this toolkit:

1. **The CDC Core Workgroup** included CCCB Program Consultants and evaluation team staff as well as evaluators from RTI International who were contracted to lead the development of the toolkit.
2. **The Program Advisory Group** included volunteer evaluators from CCCB's three funded programs: Comprehensive Cancer Control, Hematologics, and National Organizations.

Based on guidance provided by our stakeholder group, we aligned the toolkit with the CDC Framework for Program Evaluation in Public Health.[11] Both stakeholder groups provided input on the toolkit's outline and reviewed and provided feedback on toolkit drafts. Stakeholders were also instrumental in helping us tailor descriptions of key evaluation concepts and steps to real-world CCCB grantee experiences and requirements. A complete listing of stakeholders who contributed to the development of this toolkit is provided below.

CDC-RTI Core Workgroup

Centers for Disease Control and Prevention (CDC)

Phyllis Rochester, Management Lead
Angela Moore, Project Lead
Jamila Fonseka, Task Order Technical Monitor
Garry Lowry
Tammy Shropshire
Mary Boyd
Julie Townsend
Brooke Steele
Susan Derrick
Chris Stockmyer

Research Triangle Institute International (RTI)

LaShawn Curtis
Cindy Soloe
Andrew Jessup
Justin Faerber
Debra Holden

[11] Centers for Disease Control and Prevention. (1999). Framework for program evaluation in public health. Atlanta, GA: *MMWR, 48*(NoRR-11), 1–40.

Program Advisory Group

Comprehensive Cancer Control Program Representatives (703)

Va'a Tofaeono, American Samoa
Robert Indian, Ohio
Sara Cook, California
Kim Rogers, Wyoming
Gina O'Sullivan, New York
Karen Bugler, New Hampshire
Cathleen Jernigan, South Carolina
Cerina Mariano, Guam
Catherine Marshall, Fond du Lac
Leah Frerichs, Aberdeen Area Tribal Chairman's Health Board
Polly Hager, Michigan
Jennifer Redmond, Kentucky
Barbara Portzline, New Mexico

National Health Organization Strategies to Provide Information and Education for Cancer Survivors with respect to Hematologic Cancers Program Representatives

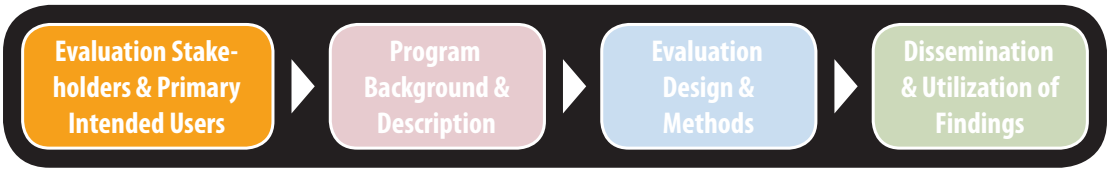
Kari Bailey, National Marrow Donor Program

National Organization Activities for Cancer Control in Underserved Populations Program Representatives

Ruth Rechis-Oelker, Lance Armstrong Foundation
Octavia Vogel, American Cancer Society
Roxanna Bauitsta, Asian and Pacific Islander American Health Forum
Angela Johnson, My Brother's Keeper

APPENDIX B: EVALUATION PLAN TEMPLATE

Evaluation Stakeholders and Primary Intended Users



I. **Identifying Stakeholders:** List key individuals or groups who (1) have a stake in the evaluation *and* (2) who will use evaluation results. Identify and document each stakeholder's evaluation interests.

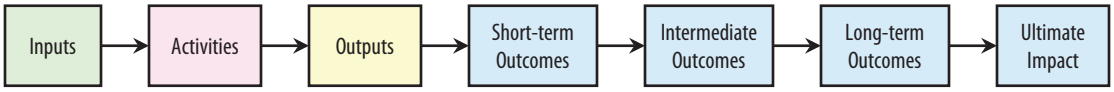
Evaluation Stakeholders	What Stakeholders Want to Know

II. Engaging Stakeholders: For each stakeholder listed above, note how and when you might engage them in your program evaluation. Be sure to consider stakeholders' areas of expertise, interests, and availability.

Evaluation Stakeholders	How to Engage Stakeholders	When to Engage Stakeholders

Program Background and Description

I. Key Comprehensive Cancer Control (CCC) Program Components: Insert a copy of your program's logic model or provide a tabular and/or narrative description of your program's resources, major activities, and the anticipated outputs and outcomes of program activities.



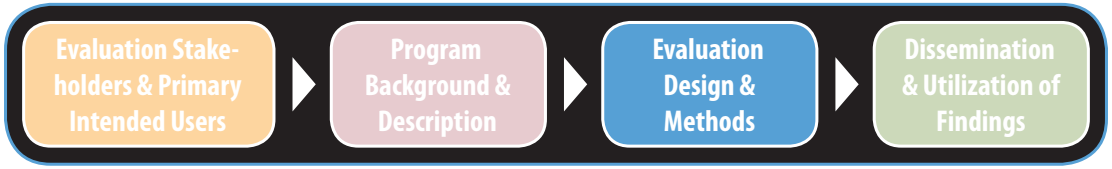
II. Stage of Development: Briefly describe your program's stage of development.

- Which major activities have been completed, what are you currently working on, and what work has yet to begin?

III. Program Context: Briefly describe any unique program context that may affect the success of your CCC efforts.

- What historical, political, program or organization, and community factors have affected your CCC efforts, and how?

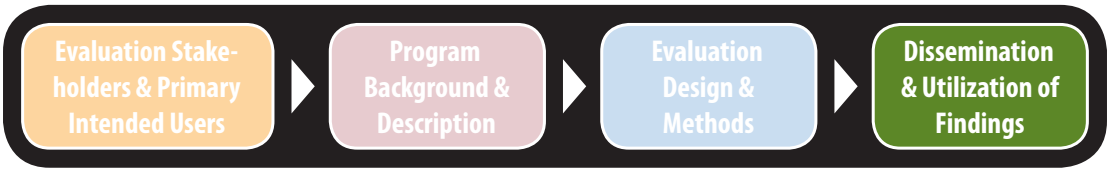
Evaluation Design and Methods



IV. Evaluation Design and Methods Matrix

Focus	Evaluation Questions	Indicators	Data Collection Sources	Data Collection Methods	Data Collection Timing	Data Analysis
The CCC component you will evaluate	*What you want to know*	*The type of data you will need to address the evaluation question*	*Where you will get the data*	*How you will get the data*	*When you will collect the data*	*How you will organize and interpret the data*

Dissemination and Utilization of Findings



I. Checklist for Ensuring Effective Evaluation Reports[12]

- ❑ Provide interim and final reports to intended users in time for use.
- ❑ Tailor the report content, format, and style for the audience(s) by involving audience members.
- ❑ Include an executive summary.
- ❑ Summarize the description of the stakeholders and how they were engaged.
- ❑ Describe essential features of the program (e.g., in appendices).
- ❑ Explain the focus of the evaluation and its limitations.
- ❑ Include an adequate summary of the evaluation plan and procedures.
- ❑ Provide all necessary technical information (e.g., in appendices).
- ❑ Specify the standards and criteria for evaluative judgments.
- ❑ Explain the evaluative judgments and how they are supported by the evidence.
- ❑ List both strengths and weaknesses of the evaluation.
- ❑ Discuss recommendations for action with their advantages, disadvantages, and resource implications.
- ❑ Ensure protections for program clients and other stakeholders.
- ❑ Anticipate how people or organizations might be affected by the findings.
- ❑ Present minority opinions or rejoinders where necessary.
- ❑ Verify that the report is accurate and unbiased.
- ❑ Organize the report logically and include appropriate details.
- ❑ Remove technical jargon.
- ❑ Use examples, illustrations, graphics, and stories.

[12] Adapted from Worthen, B. R., Sanders, J. R., & Fitzpatrick, J. L. (1997). *Program evaluation: Alternative approaches and practical guidelines* (2nd edition). New York, NY: Addison, Wesley Logman, Inc.

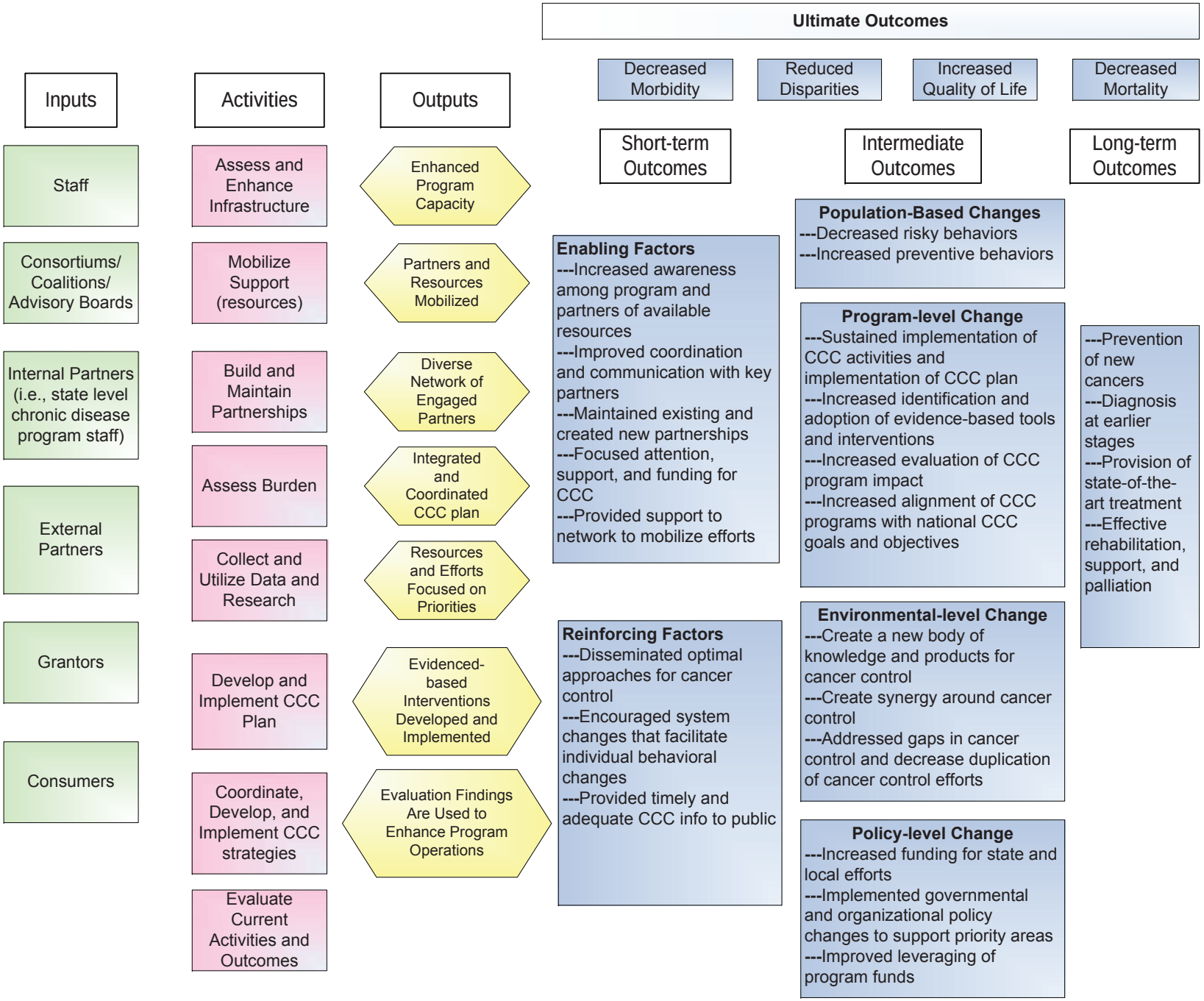
II. Dissemination Strategy Matrix

Audience	Format and Channel for Sharing Findings	Timeline	Responsible Person

III. Checklist for Ensuring Utilization of Evaluation Results

- ❑ Share and discuss results at stakeholder meeting.
- ❑ Discuss prioritization of recommendations for program improvement with stakeholders.
- ❑ Discuss operationalization of recommendations for program improvement with stakeholders.
- ❑ Discuss ways stakeholders can apply evaluation findings to improve their organizational practices or CCC-related interventions.
- ❑ Include evaluation results and points of discussion in stakeholder meeting notes.
- ❑ Review evaluation findings and recommendations in regularly scheduled staff meetings.
- ❑ Identify action steps staff members can take to implement recommendations.
- ❑ Identify a program staff member to coordinate, document, and monitor efforts to implement improvement recommendations.

APPENDIX C:
SAMPLE LOGIC MODEL


Ultimate Outcomes
Decreased Morbidity
Reduced Disparities
Increased Quality of Life
Decreased Mortality
Inputs
Activities
Outputs
Short-term Outcomes
Intermediate Outcomes
Long-term Outcomes
Staff
Consortiums/ Coalitions/ Advisory Boards
Internal Partners (i.e., state level chronic disease program staff)
External Partners
Grantors
Consumers
Assess and Enhance Infrastructure
Mobilize Support (resources)
Build and Maintain Partnerships
Assess Burden
Collect and Utilize Data and Research
Develop and Implement CCC Plan
Coordinate, Develop, and Implement CCC strategies
Evaluate Current Activities and Outcomes
Enhanced Program Capacity
Partners and Resources Mobilized
Diverse Network of Engaged Partners
Integrated and Coordinated CCC plan
Resources and Efforts Focused on Priorities
Evidenced-based Interventions Developed and Implemented
Evaluation Findings Are Used to Enhance Program Operations
Enabling Factors
---Increased awareness among program and partners of available resources
---Improved coordination and communication with key partners
---Maintained existing and created new partnerships
---Focused attention, support, and funding for CCC
---Provided support to network to mobilize efforts
Reinforcing Factors
---Disseminated optimal approaches for cancer control
---Encouraged system changes that facilitate individual behavioral changes
---Provided timely and adequate CCC info to public
Population-Based Changes
---Decreased risky behaviors
---Increased preventive behaviors
Program-level Change
---Sustained implementation of CCC activities and implementation of CCC plan
---Increased identification and adoption of evidence-based tools and interventions
---Increased evaluation of CCC program impact
---Increased alignment of CCC programs with national CCC goals and objectives
Environmental-level Change
---Create a new body of knowledge and products for cancer control
---Create synergy around cancer control
---Addressed gaps in cancer control and decrease duplication of cancer control efforts
Policy-level Change
---Increased funding for state and local efforts
---Implemented governmental and organizational policy changes to support priority areas
---Improved leveraging of program funds
---Prevention of new cancers
---Diagnosis at earlier stages
---Provision of state-of-the-art treatment
---Effective rehabilitation, support, and palliation