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• Please designate one person at the computer
• Adobe Features you will use today:
  – Chat Box
  – Polls

• Today’s session is being recorded
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No commercial funding has been accepted for this activity

Today’s Speakers

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Gina O’Sullivan, MPH  
Bureau of Chronic Disease Evaluation and Research

Elizabeth Anker, BS  
Bureau of Tobacco Control

Mary Jo Pattison, MS  
Bureau of Chronic Disease Evaluation and Research

NYSDOH Division of Chronic Disease Prevention
A common dilemma in the history of public health...

“I think you should be more explicit here in step two.”

New York’s Solution...

Prevent Chronic Disease Priority
Focus Areas
- Obesity
- Tobacco Use
- Preventive Care & Management

Prevention Agenda Tracking
Indicators, Measurable Objectives and Dashboards

NYS Prevention Agenda 2013-17
Chronic Disease Priority Area Organization

- Focus Areas
- Goals
  - Measurable Objectives
    - Interventions
      - By Sector
      - By Health Impact Pyramid
Prevention Agenda: Target: There

Potential “Path to Success”
Path to Nowhere

Presentation Goal: Provide guidance on how to use data to stay on the path to success and avoid the path to nowhere.

Objectives:

- Introduce a Framework for organizing data collection to evaluate a public health initiative;
- Describe two applications of this framework to recommended interventions in the Prevent Chronic Disease Action Plan;
- Preview upcoming webinars that will demonstrate the application of the framework to interventions within the reducing obesity focus area.
“There is nothing so practical as a good theory.”
- Kurt Lewin

**Key Activities to Generate Information for Action**

- Integrate information into program decision making
- Conduct Public Health Surveillance
- Ensure Performance Measurement
- Conduct Program Evaluation

**Public Health Surveillance (PHS)**

PHS is the ongoing systematic collection, analysis, and interpretation of health data that are essential to the planning, implementation, and evaluation of public health practice. Answers the question, are the program activities associated with changes in population indicators in the direction of achieving measurable objectives?

Prevention Agenda Tracking Indicators, Measureable Objectives and Dashboards

Making a Case for Performance Measurement

“If failure is an option, then don’t.”
Countless Motivational Speakers

“If you are going to fail, fail fast.”
- Door to Door Salesperson of the Year, 1965-present;
To learn from failure and be successful you need to define success and measure it!

Performance Measurement

Performance measurement is an ongoing monitoring and reporting of program accomplishments, against progress towards pre-established goals. Answers the question, are the activities you are completing bringing you closer to accomplishing expected milestones?

<table>
<thead>
<tr>
<th>Action (things you do)</th>
<th>Accomplishment/Milestone</th>
<th>Goal</th>
</tr>
</thead>
<tbody>
<tr>
<td>Activity 1</td>
<td>Status Measure:</td>
<td>Standards: Define what you hope to achieve through your accomplishments.</td>
</tr>
<tr>
<td>Activity 2</td>
<td>Defines where you are now</td>
<td>Define what you expect to accomplish</td>
</tr>
<tr>
<td>Activity 3</td>
<td></td>
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</tbody>
</table>

Source of Performance Measures & Standards

Measures: Prevention Agenda Action Plan Interventions
• Establish joint use agreements to open public areas...
• Increase the # of smoke-free parks, beaches... & other public spaces.
• Promote the inclusion of decision support tools/reminder system modules vendors.

Standards for performance measures should be SMART.
Program Evaluation
Systematic collection and analysis of data to describe and understand the health relevant outcomes associated with a public health programs.

Process evaluation: Aims to document and describe the key components of a successful intervention including contextual factors such as where an intervention was accomplished;

Outcome evaluation: Aims to document whether the accomplishment of an intervention is associated with measurable changes in health related indicators (environment, behavior)

Continuum of Data Collection and Use to Measure and Achieve Success

Ongoing Use of Information from Data Collection into Program Decision Making

<table>
<thead>
<tr>
<th>What we do</th>
<th>What we are striving to accomplish</th>
<th>What we aim to achieve through individual accomplishments</th>
<th>What we aim to achieve through collective accomplishments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Performance Measurement</td>
<td>Evaluation Of Local Interventions</td>
<td>Surveillance</td>
<td></td>
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</tbody>
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Measuring Interim Progress: Example from the NYSDOH Comprehensive Cancer Control Policy Initiatives Community Demonstration Projects

The NYSDOH funds the Broome County Health Department and Schenectady County Public Health Services to implement three cancer prevention and control policy interventions.
### Coordinated Chronic Disease Prevention Framework Domain 2: Environmental approaches that promote health and support and reinforce healthy behaviors

<table>
<thead>
<tr>
<th>Strategies</th>
<th>Division and Partners’ Activities</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Strengthen community action</td>
<td>✓ Educating and engaging communities</td>
</tr>
<tr>
<td>• Build health promoting public policy</td>
<td>✓ Mobilizing and empowering communities</td>
</tr>
<tr>
<td>• Create safe and supportive environments</td>
<td>✓ Engaging organizational decision makers</td>
</tr>
<tr>
<td></td>
<td>✓ Educating governmental decision makers</td>
</tr>
</tbody>
</table>

Communities are healthy places to live, work, learn and play.

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**Intervention Strategy**

- **Build health promoting public policy**
  - Give employees time off or flextime to access preventive services and to attend community programs aimed at disease self-management.

**Contractor Work Plan Activities**

- Educate and engage communities
- Mobilize and empower communities
- Engage organizational decision makers
- Educate government decision makers

**Project Outcomes**

- Community is supportive of policy
  - Awareness, beliefs and attitudes are changed
- Policies are adopted and implement
  - By June 2014, at least one municipality will implement paid leave policies for employees to obtain breast, cervical and colorectal cancer screenings.

**Project Goal:** Reduce the burden of cancer

**Primary Objective:** Increase cancer screening rates for breast, cervical and colorectal cancers.
**Prevention Agenda Goal #3.1:**

Increase screening rates for cardiovascular disease, diabetes and breast, cervical and colorectal cancers, especially among disparate populations.

1. Objective 3.1.1: By December 31, 2017, increase the percentage of women aged 50-74 years with an income of < $25,000 who receive breast cancer screening, based on the most recent clinical guidelines (mammography within the past two years), by 5% from 76.7% (2010) to 80.5%.

2. Objective 3.1.2: By December 31, 2017, increase the percentage of women aged 21-65 years with an income of < $25,000 who receive a cervical cancer screening, based on the most recent clinical guidelines (Pap test within the past three years), by 5% from 83.8% (2010) to 88.0%.

3. Objective 3.1.3: By December 31, 2017, increase the percentage of adults (50-75 years) who receive a colorectal cancer screening based on the most recent guidelines (blood stool test in the past year or sigmoidoscopy in the past 5 years and a blood stool test in the past year or a colonoscopy in the past 10 years).

**Performance Measurement**

- Contractors report on a series of program implementation measures that are linked to required work plan activities
- Regular collection and reporting of this data documents progress and demonstrates program accountability

Example project implementation measures for the community demonstration projects:
- Number of community education events
- Number of visits with organizational decision makers
- Number of legislative visits
- Amount of earned media generated
- Number of sites where partnerships have been formed
Program Evaluation Activities

**Process Evaluation** → Provides information on the number and types of settings where strategies have been implemented, characteristics of populations reaches and the characteristics of locations that implemented policies.

**Outcome Evaluation** → Documents changes in attitudes, behaviors, practices, and health outcomes and may ultimately demonstrate impact of the policy intervention.

Process Evaluation

How much progress has been made towards desired policy change?
- Number of sites where a partner relationship has been formed
- Number of sites where a key decision maker has committed to policy change
- Number of sites where policies have been adopted and implemented

How many individuals have the potential to be reached by the policy or systems changes?
- Number of individuals employed by the municipality

How many people have the potential to be affected by the cancer screening leave policy in Broome County?

- Existing cancer screening leave policy for Broome County employees was amended to add 4 hours of paid leave to obtain colorectal cancer screening
- Total number of employees: 2,300
- About 70% of employees (~1,610 employees) are greater than 50 years old
Intermediate Outcome Evaluation

Has the adopted policy resulted in a health behavior change? How many employees utilize the time-off benefit to obtain cancer screenings?

✓ Number of employees utilizing the time-off benefits to obtain cancer screenings

Measuring Interim Progress and Success in the NYS Prevention Agenda

An Example from Tobacco Control

Prevention Agenda Objective

- Goal 2.1: Preventing initiation of tobacco use by New York youth and young adults, especially among low socioeconomic status populations
  - Objective 2.1.1: By 12/31/17, decrease the prevalence of any tobacco use by high school students by 30% from 21.2% to 15.0%
  - Objective 2.1.2: By 12/31/17, decrease the prevalence of cigarette smoking by adults ages 18-24 years by 17% from 21.6% to 18%
  - Objective 2.1.3: By 12/31/17, increase the number of municipalities that restrict tobacco marketing (including banning store displays, limiting the density of tobacco vendors and their proximity to schools) from zero (2011) to 10.
Interventions for Consideration

- Increase Tobacco Control Program funding to the CDC-recommended level, utilizing revenue from NYS tobacco excise tax to fund a comprehensive tobacco control program, as resources become available.
- Use media and health communications to highlight the dangers of tobacco, promote effective tobacco control policies and reshape social norms.
- Pursue policy action to reduce the impact of tobacco marketing in lower-income and racial/ethnic minority communities.
- Keep the price of tobacco uniformly high by regulating tobacco company practices that reduce the real price of cigarettes through discounts.
- Increase community interventions, especially in disadvantaged urban neighborhoods and rural areas.
The Problem: Tobacco Marketing in Stores

Performance Measurement

- Prevention Agenda Goal: Prevent initiation of youth smoking
- Initiative: Point of sale
- Strategy: Government policy maker education
- Long Term Measurement (PA): Youth smoking prevalence
- Intermediate Measurement: # policies passed
- Short-term Performance Measurements
  - Number of government decision makers to be targeted
  - Were they educated about the issue?
  - Were they educated about policy solutions?
  - Did they voice support for policy solutions?

Process Status: Government Policy Maker Education
Outcome Measurement

- Prevention Agenda Goal: Prevent initiation of youth smoking
- Initiative: Point of sale
- Strategy: Government policy maker education
- Long term measurement (Prevention Agenda Goal): Youth smoking prevalence
- Intermediate Measurement: # policies passed
- Short term Outcome Measurement: Government decision maker support of proposed policies via the Local Opinion Leader Survey
  - Perceived importance of the issue
  - Responsibility attribution (individual or community)
  - Support for policy

Percentage of Local Opinion Leaders Who Support POS Initiative Policies,

2011 NY Local Opinion Leaders Survey

Local Opinion Leaders: Support of POS Policies by Belief that Exposure to Tobacco Product Displays Influences Youth Smoking

2011 NY Local Opinion Leaders Survey
Summary

Public Health Surveillance
Are program activities associated with changes in population indicators in the direction of achieving measurable objective?
- Ongoing, systematic collection, analysis and interpretation of health data.
- Essential to planning, implementation and evaluation of public health practice.

Summary

Performance monitoring
Are the activities you are completing bringing you closer to accomplishing expected milestones?
- Regular collection and reporting of measures linked to required work plan activities are sign posts on the path to success or warning signs on the path to no where.
- Documents progress- demonstrates program accountability, provides early evidence of any need for course correction.

Summary

Performance monitoring
Are the activities you are completing bringing you closer to accomplishing expected milestones?
- Regular collection and reporting of measures linked to required work plan activities are sign posts on the path to success or warning signs on the path to no where.
- Documents progress- demonstrates program accountability, provides early evidence of any need for course correction.
Program Evaluation
Makes “the miracle” explicit for specific time, place and target population.

Process Evaluation:
- Number and types of settings where strategies have been implemented
- Characteristics of populations reached
- Characteristics of locations that implemented interventions.

Outcome Evaluation
- Changes in attitudes, behaviors, practices and health
- May demonstrate impact of the policy intervention

Summary

1. October 2014: Establishing Performance and Evaluation Measures for Evidence-Based Interventions for Chronic Disease

Questions & Discussion

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Thank You

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