



A Culture of Effectiveness: Integrating Program Evaluation and Improvement Activities into Program Practices

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DCoE Program Evaluation and Improvement Training Series

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[Video Introduction]

[Slide 1]

Mr. Chavez: Hello. My name is Lester Chavez. I provide contract support to the Defense Centers of Excellence for Psychological Health and Traumatic Brain Injury or DCoE. I will be your moderator for this presentation, the first episode in the 2016 DCoE Program Evaluation and Improvement webinar training series. The webinar is hosted using the Adobe Connect platform and the technical features are being handled by DCoE's webinar support team in Washington, D.C.

Today's topic is "A Culture of Effectiveness: Integrating Program Evaluation and Improvement Activities into Program Practices." Before we begin, let's review some details.

[Slide 2]

This presentation has been pre-recorded; however, there will be a live Question-and-Answer session at the end of the presentation.

Throughout the webinar, we encourage you to submit technical or content-related questions using the Question pod on your screen. Your questions will remain anonymous, and our presenters will respond to as many questions as possible during the Q-and-A.

All audio is provided through the Adobe Connect platform; there is no separate audio dial-in line. Please note there may be delays at times as the connection catches up with the audio. Depending on your network security settings, there may also be some noticeable buffering delays.

Closed captioning is provided for today's event, and a transcript will be made available at a later date.

At the bottom of the screen is the Chat pod. Please feel free to identify yourself to other attendees and to communicate with one another. Time is allotted at the end of the presentation to use the Chat pod for networking.

[Slide 3]

Webinar materials for this series are available in the Files pod at the bottom left of the screen during the webinar. They are also posted in the Program Evaluation section of the DCoE website. Modules from the newly revised DCoE Program Evaluation Guide will be posted throughout 2016.

For information about other DCoE webinars and trainings, visit the Training section of the DCoE website by following the link on slide 3.

[Slide 4]

We are pleased to offer continuing education credit for the 2016 Program Evaluation and Improvement webinar series. Instructions for obtaining continuing education through DCoE's collaboration with the Professional Education Services Group were made available during the registration process. Eligibility criteria for continuing education credit are presented on slide 4. The length of this episode is one hour. Eligible participants will receive one hour of credit.

[Slide 5]

If you preregistered for the webinar and want to obtain CE certificates or a certificate of attendance, you must complete the online CE evaluation. After the webinar, please visit dcoe.cds.pesgce.com to complete the online CE evaluation and download your CE certificate or certificate of attendance. The CE evaluation will be open through December 1st, 2015.

[Slide 6]

This webinar was introduced by Captain Armen Thoumaian. Captain Thoumaian is the Deputy Chief for Program Evaluation and Improvement at DCoE. He is a Scientist Director in the

Commissioned Corps of the U.S. Public Health Service with more than 30 years of experience in health and mental health program design and evaluation. In January 2012, Captain Thoumaian joined DCoE to help design and implement program evaluation and improvement efforts in the Defense Department. He holds a B.A. in psychology and sociology, an M.A. in general experimental psychology, and a Ph.D. in social welfare and social work. Captain Thoumaian has also completed a National Institute of Mental Health fellowship in Community Mental Health.

[Slide 7]

Presenters for this episode include Ms. Debra Stark and Mr. Carter Frank.

Ms. Stark is a research scientist who provides contract support to DCoE. Ms. Stark is a survey methodologist and analyst with more than 15 years of research experience. She has worked on health services evaluation projects with several Federal agencies, including the Department of Veterans Affairs and TRICARE Management Activity. Ms. Stark holds an M.B.A.

Mr. Frank is a research scientist who provides contract support to DCoE. Mr. Frank has over 15 years of experience in program development, management, and training. His career spans military and civilian environments and clinical and non-clinical mental health operations. Mr. Frank holds masters' degrees in counseling and management information systems and he is a licensed clinical counselor.

[Slide 8]

I am Lester Chavez, your moderator for today. I am a project management specialist who provides contract support to DCoE. I am an Information Technology Program Management Office professional with over 20 years of public and private sector experience in strategic planning, business development, operations planning, and program management, most recently with the Department of Veterans Affairs. I hold a B.A. in Business Management and Marketing.

[Slide 9]

This training presentation will provide an overview of the DCoE program evaluation and improvement effort, describe the uses and benefits of program evaluation, and also explain DCoE's approach to program evaluation.

At the conclusion of this webinar, participants will be able to understand why ongoing evaluation should be an integral part of program operations, identify important concepts from current program evaluation literature, describe important elements of the program evaluation process, identify strategies to address challenges involved in designing and executing a standardized protocol, and know where to obtain resource materials to execute an internal program evaluation process.

[Slide 10]

As seen on slide 10, Captain Thoumaian will begin with an introduction to DCoE's program evaluation and improvement effort. Ms. Stark will explain DCoE's approach to program evaluation and present the research background. Mr. Frank will describe practical approaches programs may take to work toward a culture of effectiveness. Ms. Stark will present strategies

for overcoming common challenges that arise when programs are asked to provide evaluation data.

Captain Thoumaian will conclude with a summary of key takeaways. We will wrap up this webinar session by providing a list of references and resources, followed by an opportunity to provide anonymous feedback and a brief question-and-answer session with our presenters.

[Slide 11]

Thank you, Mr. Chavez. In this section, I provide the background and introduction to DCoE's program evaluation and improvement effort, which is part of a broader effort within the Defense Department to enhance the quality and effectiveness of its psychological health and traumatic brain injury programs.

[Slide 12]

DCoE was created in 2007 in response to heightened political and public interest in the quality of military health care stemming in part from in-depth investigations showing deficiencies in care at key military health facilities.

DCoE's Vision is to be the leader of profound improvements in psychological health and traumatic brain injury prevention and care.

This vision serves the Mission of improving the lives of our nation's Service members, veterans and their families by advancing excellence in psychological health and traumatic brain injury prevention and care. We want to help identify, and subsequently close, gaps in key military health areas, and recommend enhancements and improvements for implementation across the system of care.

[Slide 13]

Three major directives have driven DCoE's program evaluation and improvement efforts to date. The full text of these directives is available online for anyone who is interested. The links are included on slide 45 at the end of this presentation.

First, the DoD Agency Priority Goal seeks to "Improve the care and transition of wounded, ill, and injured warriors." Most relevant to the program evaluation and improvement effort, this goal includes a focus on improving program effectiveness.

The second major directive, an Executive Order, calls upon the Department of Defense to review all existing programs that target psychological health, traumatic brain injuries, and related concerns, "using metrics that assess their effectiveness." The goal is to ensure that those programs found most effective are made available across the military's services.

Third, the National Defense Authorization Act Section 739 mandates that the Secretary of Defense submit to congress a plan to improve the coordination and integration of the programs of the Department of Defense that address psychological health and traumatic brain injury, along with reducing gaps and redundancies within these programs that provide services to the men and women of our Armed Forces.

Added in Fiscal Year 2015, National Defense Authorization Act Section 728 mandates evaluations of peer-to-peer, training, suicide prevention, rehabilitation, and related psychological health and traumatic brain injury programs.

[Slide 14]

I will briefly describe some of the key benefits of program evaluation, starting at the top of slide 14 and moving clockwise.

The most immediate benefit provided by program evaluation is that it can provide robust information about a program's strengths and opportunities for growth or improvement. Every program should be able to highlight what it's doing well and identify areas in which it could improve so that it can accomplish its mission more effectively.

Second, program evaluation helps to establish programs as evidence-based, which means that the program has undergone evaluation and has been shown to be providing meaningful benefits to participants.

Third, program evaluation supports the development of best practices. By collecting information about program practices and tying them to participant outcomes, programs can determine which practices are most likely to lead to successful outcomes.

Fourth, by completing an internal evaluation, staff develop their ability to measure key processes and outcomes. This helps ensure that program staff are ready to respond to external evaluation initiatives when called upon to do so.

Fifth, program evaluation helps identify gaps and redundancies by measuring each part of a program's operations and determining how well they work together. In many cases, a program evaluation can identify inefficiencies that can be refined, or duplication of efforts that can be eliminated, through process improvement efforts.

Finally, program evaluation provides information that justifies a program's existence to external stakeholders. When a program submits a budget, the reviewers want to see data that demonstrate the program is doing what it set out to do: meeting a need and making effective use of limited resources.

[Slide 15]

Because programs are often subject to many types of activities that may seem similar to program evaluation, it is important to clarify what program evaluation is not. For instance, program evaluation is not the same as inspections, audits, or accreditation reviews.

Inspections are visits by external entities that focus on whether a program follows certain rules and regulations. For example, an inspection might focus on whether a program's staff complies with mandatory safety and privacy regulations.

Audits are also generally carried out by external entities. They involve examination of a program's records or accounts. Audits are frequently carried out to ensure appropriate billing for services and that programs have accurate service utilization reporting mechanisms.

Finally, accreditation is another process carried out by an external body that assures the general public that an institution or a program has clearly defined objectives and maintains conditions under which their achievement can be expected. For example, many programs may be subject to accreditation review by The Joint Commission, commonly known as “J-CO.”

Based on these definitions, program evaluation can be distinguished in that it focuses on a program’s effectiveness in meeting its stated mission, goals and objectives. The other processes just mentioned– inspections, audits, and accreditation reviews – generally focus on whether a program is compliant with sets of rules, regulations, or professional standards.

[Slide 16]

Program evaluation is an important process for ensuring that psychological health and TBI programs maintain a high level of quality, appropriate funding levels, and accessibility to the Service members, veterans, and their families who need them.

A thorough evaluation provides the whole story of your program—its purpose, capturing who it serves, the activities that take place, the results seen to-date, and the outcomes.

[Slide 17]

DCoE’s trainings, tools, and support services are designed to help programs carry out an evaluation process.

Although the technical aspects of evaluation can be complex, the evaluation process itself builds on what most program managers already do – which is to figure out whether the program’s objectives are being met, which aspects of the program work, and which aspects are less than effective and why.

The long-term goal of the program evaluation and improvement effort is to firmly establish a “culture of effectiveness” in which evaluation becomes a part of everyday program operations. By weaving evaluation into the fabric of military psychological health and TBI programs, program managers and senior-level stakeholders can use data to drive program improvements and make decisions that enhance the system of prevention and care that serves military members, veterans and their families.

[Slide 18]

Thank you Captain Thoumaian.

Over the next few minutes, I will speak about DCoE’s approach to program evaluation and the evidence basis for assessing quality in healthcare programs.

[Slide 19]

A key part of planning and preparing for program evaluation is selecting an appropriate design. The three major types of program evaluation designs are formative, process, and summative, shown in the arrow on slide 19.

Formative evaluation designs are most relevant during the formation of a program and during the early stages of its development. Formative evaluations often examine the population needs that call for a program to be developed.

Process evaluation designs assess how a program operates and whether a program is performing as it was intended. The results of process evaluation designs can be used to refine program operations.

Summative evaluation designs focus on the overall results of the program in terms of whether the program accomplishes its mission, goals and objectives. Summative evaluations are generally applied to established, more mature programs – those that have been in existence long enough to have stabilized operations and collected outcome information.

[Slide 20]

Program evaluation in public health is based on the work of researchers with a variety of backgrounds who focused on hospitals and systems as they expanded throughout the U.S. in the 1960s. It is based on social science research methodologies and professional standards.

Avedis Donabedian authored “Evaluating the Quality of Health Care” in 1966, an examination of the literature at that time. This work is still widely cited and read. In it he set out the proposal to examine the quality of health provision in the aspects of structure, process, and outcome.

Michael Quinn Patton is one of the leading experts in this field today, credited with developing utilization-focused evaluations designed to answer specific questions about a program’s future.

In the ensuing years, much work was done in this field. We have histories of effective program evaluation implementations with credible and positive results. These have been documented, peer-reviewed, and deemed appropriate by evaluation experts. There have been pilot studies, confirmatory trials, replication trials, and large-scale field trials. We encourage you to delve into the references and resources provided at the end of this presentation to learn more.

[Slide 21]

Based on current program evaluation practices, the PEI framework examines programs across the following five dimensions: Need, Structure, Process, Outcome, and Finance.

Need focuses on why the program was required and established. This dimension focuses on the target population--those individuals who will be directly affected by the program. It also refers to directives, mandates, community needs or gaps in services that led to program development.

Structure emphasizes how the program is organized. This includes the goals and objectives of the program, the planning needed to support a program, and the design of program services and interventions. Resources, the staffing and funding required for a program to operate, are considered here.

Process details how the program operates. It includes service delivery, compliance, and process improvement. Service delivery is how a program provides its services to its target beneficiaries. Process improvement refers to provisions for how well a program interprets data collected on its operations and adapts to any internal or external evaluations.

Outcome examines how well a program meets its goals and objectives. These goals and objectives can include resilience, prevention, education; recovery, treatment, training; reintegration, readiness, and beneficiary satisfaction.

Finance measures the direct costs of the program over time. This includes operating costs, and cost-effectiveness and cost comparisons.

[Slide 22]

Once the information is collected across the five dimensions, what is done with it? Four key evaluation areas indicative of program effectiveness were identified and structured around established program performance measures as outlined in program evaluation and public health literature. The four key areas are informed by the information collected across the five dimensions and provide insight into programs by assessing a program's use of resources, its activities, its outputs, and intended outcomes. The four key areas are Fidelity, Sustainability, Program Characteristics, and Changes.

Fidelity is defined as the extent to which the program was implemented as planned. Indicators that support fidelity include the mission statement, goals, objectives and scientific basis among others. Fidelity is very important to establish a program's evidence base over time.

Sustainability is defined in terms of rules, values, adaptation, and memory. Indicators that support sustainability include rules that describe whether program activities are well defined and contain task descriptions, whether programs adapt program activities and services to changing policies and directives; in short, whether the program is able to deliver its intended activities and services over time.

Program characteristics relate program processes, its structures, and how it is organized and operates, to anticipated changes in program participants and outcomes.

Changes refers to the ability of the program's activities to produce actual changes in the program participants, in their skills, knowledge, behaviors, attitudes, and possibly symptoms. It also refers to changes in a program's practices, and changes to a program's costs. It is important to ensure that these are attributable to the program and not to something else.

[Slide 23]

On slide 23, a series of program evaluation steps are organized into three phases intended to guide internal program evaluation efforts.

First, start with planning and preparation. Program staff should clearly define what the program is designed to do and how it is organized. Evaluation strategies can be developed to address specific evaluation questions and needs, followed by a data plan to specify the details of how the evaluation will be completed.

Second, execute the evaluation. This involves collecting information and storing it for future use and record-keeping, followed by analysis and interpretation of data. For example, the collected data may reveal that the program works well for one group but not as well for another.

Third, during the feedback phase, staff communicate findings and make changes or improvements to the program. Reporting on evaluation findings may include multiple communications directed toward a variety of groups, such as leadership, funding agencies, taxpayers, and program participants. Finally, evaluations reveal potential areas for improvement, so program leadership and others can work together to figure out what changes are most important and how those changes can be realistically accomplished given available resources.

In future episodes in this series, we will discuss ways in which each step in this process can be tailored to meet evaluation needs specific to a given program.

To conclude this section, regardless of whether the program evaluation is external or internal, the aims of the evaluation should be consistent: to make the system of prevention and care more effective.

[Slide 24]

We will now discuss the benefits of moving toward a culture of effectiveness and the steps program administrators can follow to create PEI capabilities for their program.

[Slide 25]

What characterizes a culture of effectiveness? Foremost, it is the use of evidence-based interventions and practices. In a culture that places high value on effective services, practices are informed by research and the results of systematic evaluations. When combined with providers' experiences and knowledge, this ensures the highest possible quality of prevention and treatment services.

Second, programs should be able to produce accurate and objective data that can be used to drive decision-making and program improvement. In this age of fiscal realignment and budget-cutting, when members of leadership look at programs to determine what benefits they provide to service members and the military as a whole, they need to see results. Accurate and timely data ensure that decision makers can compare "apples with apples" and "oranges with oranges." In this way, leadership can set programmatic system-wide directions and priorities based on objective information and communicate to policymakers about what is being accomplished "in the field."

In addition, programs in a culture of effectiveness monitor performance on an ongoing basis as it relates to mission, goals and objectives, not just when required to respond to an external evaluation effort. Consistent ongoing evaluation ensures that a program always has information available so that it can maintain a high level of quality and effectiveness as the mission and needs of the military evolve over time.

Finally, maintaining a focus on effectiveness helps support the military's broader mission to maintain readiness to meet the needs of the Nation and resilience in the face of challenging military engagements, such as those experienced in recent years.

Having accurate data is a cornerstone in the process of building a culture of effectiveness. As the economist Milton Friedman once said, "One of the great mistakes is to judge policies and programs by their intentions rather than their results." Without data, it is not possible to know how well a program is really working.

[Slide 26]

A culture of effectiveness needs to be enacted from the inside out, starting at the point where services or interventions are delivered. This will provide benefits directly to the staff who actually manage and deliver programs. Ongoing program evaluation and improvement efforts are not done solely to meet the expectations of external stakeholders. By external stakeholders, we mean others who have a strong interest in a program's operations and outcomes, such as funding agencies, unit or service commands, researchers, and policymakers.

Internal stakeholders, such as program administrators, staff and participants, will also benefit from ongoing program evaluation and improvement efforts. These efforts can help programs identify where performance gaps exist that might be addressed by staff training and determine whether best practices are in fact being implemented as planned. In addition, these efforts can help identify ways to make more efficient and effective use of limited resources, as well as use program feedback to make program improvements to better serve the participant population.

Program evaluation and improvement efforts can also provide accurate up-to-date information about program operations and may help identify improvements to the way forward, with the goal of ensuring the right services get to the right people at the right time.

[Slide 27]

The task of implementing program evaluation improvement efforts is comprised of a series of progressive steps that are essential in moving programs toward a culture of effectiveness.

- The first step requires program administrators to clearly define the focus and intent of their program.
- The second step involves the initial development and ongoing refinement of a functional logic model for the program.
- The third step consists of determining the most effective data plan and the most appropriate data collection methods that are feasible using available program resources.
- The fourth step entails concentrated efforts to derive and administer key outcome measures. And...
- Finally, the fifth step challenges program administrators to distinguish and document key cost factors they will need to justify ongoing program operations.

[Slide 28]

Defining program intent requires the establishment of a mission statement and goals that focus on the identified needs of the target population. To that end, program administrators should ensure these identified needs are based on an actual needs assessment and/or fully supported by a documented external mandate. In addition, it is important to have a reassessment strategy in place to determine changing, evolving or emerging needs within the target population.

Efforts to further clarify and focus program intent rely on the construction of SMART objectives. Smart Objectives are Specific, Measurable, Achievable, Relevant and Time-bound. In addition to providing clarity and focus, SMART objectives will assist program administrators in establishing links to program processes, which can then be translated into the logic model components discussed on the next slide.

[Slide 29]

The breakdown of program processes facilitated by SMART objectives helps in the ongoing task of translating them into Logic Model components.

- Program mandates and governing regulations can be cited as Assumptions in support of applicable program processes.
- Program resources can be partitioned and assigned as Inputs to the appropriate program Activity.
- Program services can be uniquely identified and assigned as an Activity with corresponding Outputs.
- Program products and participation translate into individual Outputs, which can help inform and support development of Outcome measures.
- Program results will require detailed tracking of critical data points to support relevant and effective Outcomes.
- And finally, program support and challenges need to be cited as External factors with potential impact on individual program processes as applicable.

As you can see illustrated on the chart on slide 29, the individualized program processes can be translated into the Logic Model components. As will be described in more detail in a future episode in this series, logic models are a useful tool in program planning and evaluation. They clarify how a program's inputs – the resources it uses to operate – support core program activities and the measurable products or outputs of those activities.

[Slide 30]

The graphic on slide 30 shows that assumptions, such as program mandates and governing regulations, tend to have more impact on the front end of program processes, while external factors tend to have more impact on the back end of program processes as program administrators work to transition outputs into relevant outcomes. Finally, outcomes are changes in program participants that occur as a result of the program. Outcomes need to be aligned with specific objectives and are often a major focus of evaluation efforts.

[Slide 31]

The end result of the planning phase of an evaluation effort is a comprehensive plan for data collection and storage. The data plan should include information about what will be collected, by whom and when, how data will be stored and analyzed, and how quality assurance will be carried out to ensure that data are accurate.

The data plan components should ideally include information on program participants, such as descriptive statistics and participation or utilization rates, participant satisfaction ratings of their experience of care, standardized assessments such as pre- and post-tests, and program cost information.

Program staff and administrators will want to integrate data-gathering tools and procedures within program processes so that data collection is virtually seamless. Participant feedback should be facilitated so that it is as easy to obtain as possible—through the use of online portals or smartphone applications. Data collection activities may be shared among partnering agencies. All programs should have the ability to access and retrieve cost data. In addition, some ability to analyze cost-related data will be needed to guide effective decision-making, properly inform key stakeholders, and in some cases, justify program viability.

[Slide 32]

Selecting appropriate outcome measures depends on many factors. Each program's staff or administrator will need to consider responses to the questions presented here on Slide 32.

First, which outcome measures would demonstrate that program activities and services met the needs of the target population? It will be important to identify the evidence needed to demonstrate changes among participants. Second, what information aligns best with the interests and goals of program stakeholders? Consistent efforts to facilitate ongoing feedback from stakeholders are recommended. Third, does the program currently track metrics that could be incorporated into, or overlaps with an appropriate outcome measure?

Considering the last question: in general, it's best to select existing measures shown to be valid and reliable. New or custom measures are most appropriate when there is a specific, unique need for them. When developing a new measure, it's best to access best practices expertise.

[Slide 33]

One of the bigger challenges faced by program administrators is how to distinguish and document key cost factors associated with program operations. Slide 33 lists five cost factors that programs should consider when analyzing their costs. When evaluating these costs, program administrators should keep the following in mind:

- Cost per beneficiary is perhaps the least complex but does require clear and careful definitions or criteria for qualified beneficiaries.
- Cost per activity represents the next level of complexity and requires more detailed tracking of labor, materials, and contracted services within the different program activities or services.
- Cost effectiveness analysis can help program administrators compare and contrast outputs and outcomes across services and also with other programs offering similar services.
- Cost benefit analysis is similar in complexity to cost effectiveness, but cost benefit analysis can

assist program administrators and decision makers in determining which program improvements are the most beneficial in pursuing.

- Finally, Cost to the community often requires more extensive interaction with outside agencies and subject matter experts in selecting the most relevant cost factors and appropriate community boundaries to include in the overall determinations of the impact a given program is having on that community.

[Slide 34]

As outlined in this section of the presentation, these progressive steps toward a culture of effectiveness will begin to reveal the benefits of program evaluation efforts. The results of program evaluation efforts will help program administrators identify factors that are vital to any program's ongoing viability, such as:

- A program's adherence to its stated mission
- The effectiveness of a program's processes
- Areas for improvement
- Relevant outcomes achieved by program activities, and
- Opportunities for growth that can be supported by available resources

[Slide 35]

There are a number of common challenges that arise when program administrators seek to implement program modifications and demonstrate their effectiveness.

[Slide 36]

On slide 36 we list common questions we have received during our interactions with program and service leadership.

- What level of effort is required to integrate PEI processes into a program?
- What happens when a program lacks resources and staff for PEI?
- Will programs be able to implement PEI changes that require resources and staff?

[Slide 37]

There are many challenges to conducting program evaluations. At the start of the evaluation process, program staff may wonder, "How is all of this to be accomplished?" Program evaluation can indeed be time-consuming, and it may be difficult to estimate how much time it will take.

When the purpose of an evaluation is clearly defined at the start, it will become more evident how best to address evaluation processes. When necessary activities can be integrated into normal program operations, efficiencies realized through evaluation efforts may ultimately end up saving program staff and administrators time they can use more effectively in delivering program services.

[Slide 38]

Program evaluation does require the use of resources, such as staff members, space, and

computers. Some of these resources may not be immediately available. For example, staff members may need additional training in how to administer measures, code data, or conduct analyses, so it will be important to determine what is needed to conduct evaluations at the outset.

DCoE's trainings, tools, and support services are designed to help overcome many of the challenges inherent in carrying out the evaluation process. DCoE can provide the guidance needed to break down the component parts of an evaluation into smaller, manageable steps and increase program staff knowledge and readiness to contribute to evaluation activities.

Additionally, DCoE's Centers offer a variety of other training, tools and services, such as a webinar series on best practices, training on technology that can support program services, and research on psychological health and traumatic brain injury provided by experts in their fields. Likewise, DCoE's Centers offer best practice guidelines and assessment tools, and in some circumstances, tailored technical support, trainings, and consultation may be available.

[Slide 39]

Although aspects of evaluation can be complex, the evaluation process itself builds on what most program managers already do – figure out whether the program's objectives are being met, which aspects of the program work, which aspects are less than effective and why. Programs likely already collect and have access to some of this evaluation data, and DCoE can assist in interpreting the data and documenting results.

Actual changes to a program will require close collaboration with leadership and funding agencies. The evaluation data and documentation you produce may be used to communicate with your program's various stakeholder groups—staff, participants, referring agency partners, and funders, to make the case for the changes you identify.

[Slide 40] (Conclusion)

[Slide 41]

- Program evaluation helps to ensure that military members, their families and veterans receive high-quality services
- A structured approach is important to ensure that results are accurate and objective
- Integrating program evaluation efforts into ongoing program processes plays an important role in supporting a culture of effectiveness.

Program evaluation works best when conducted regularly throughout the entire life cycle of a program. When program staff actively engage in evaluation of their efforts, they support a broader culture that places high value on quality and effectiveness. Moreover, ongoing evaluation ensures that programs remain effective and that they can demonstrate their value and be sustained over time.

Moving forward, we hope you and your colleagues will be able to refine and further develop your skills in conducting evaluation activities.

This webinar series will highlight available tools and services related to program evaluation. We hope you will join us for future webinars in this series on how to perform specific evaluation

activities such as

- describe a target population and their needs
- define a program's mission, goals and objectives
- design logic models
- create evaluation strategies and data plans
- conduct data collection and analysis
- develop reports for stakeholders, and
- implement program improvements.

[Slides 42 through 47]

Thank you Captain Thoumaian. There is a great deal of useful information available to programs about program evaluation. On slides 43, 44, and 45 we provide a brief list of resources and references that we think may be useful.

[Slides 43 through 47 provided for reference]

[END]