

Collaborating to Conquer Cancer

COMPREHENSIVE CANCER CONTROL BRANCH PROGRAM EVALUATION TOOLKIT

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SECOND EDITION

The findings 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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TOOLKIT OVERVIEW

This toolkit provides guidance to comprehensive cancer control programs, coalitions, and other cancer prevention and control planners for planning and implementing evaluation activities. It serves as a "how to guide" for practitioners seeking to conduct an evaluation that uses the CDC Framework for Evaluation of Public Health Programs. This is the second edition of the guide and provides additional information that is relevant to programs working with the National Comprehensive Cancer Control Program. For detailed information on the changes made in this edition, please review to the What's New in This Edition section of our guide.

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, awardees 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 <u>Appendix A</u> for key contacts and additional information on our toolkit development process.

How Can this Toolkit Be Used?

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

- Adopt when practical.
 Awardees 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 can be modified as needed to align with each awardee's unique program context and needs.
- Be flexible.
 Although this toolkit presents information on how to evaluate your CCCB-funded 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

Awardees can use the toolkit according to their evaluation skills and program needs. This resource has been developed for users who prefer to review in its entirety as well as those users who would like to focus on a specific topic of interest. For those who prefer to study specific sections of the toolkit, please open the navigation panel or toggle from topic to topic using the Table of Content links above.

What Is Inside this Toolkit?

This toolkit comprises seven main sections:

- 1. <u>What's New in This Edition</u>—This section provides a quick overview of the changes made to during the second edition revisions.
- 2. <u>Evaluation Primer</u>—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.
- 3. NCCCP Evaluation Requirements—This section is specific to DP22-2202 application requirements.
- 4. <u>"How To" Guide for Evaluating NCCCP and related programs</u>—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 awardees conduct evaluation activities. The section begins with a review of the funded program's evaluation requirements.
- 5. <u>Glossary of Evaluation Terms</u>—This section presents definitions of key evaluation terms and concepts used throughout the toolkit.
- 6. For Further Study—This section presents a list of additional evaluation resources and selected training opportunities that may help awardees 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 can help awardees meet the evaluation requirements for the NCCCP. 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.
- 7. Toolkit Evaluation— We will use feedback collected through the evaluation form to improve the toolkit, and your feedback will also inform the development of awardee evaluation trainings. NCCCP aims to provide quality technical assistance documents that are both user-friendly and useful. To support this ongoing effort, we developed a toolkit evaluation form (OMB Control # 0920-0841) that is designed to collect information from users on their level of satisfaction with toolkit content and layout, recommendations for improving the resource, and 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 help design your evaluation plan as part of the application requirements of the DP22-2202 NCCCP component Notice of Funding Opportunity (NOFO). It will also help with awardees of DP22-2202 with completion of your annual NCCCP Evaluation Plan. Completing the sections in the NCCCP Evaluation Plan template will create an evaluation plan that meets the awardee performance expectations specified in the NOFO. However, this template is not intended to be prescriptive and can be modified as needed to best align with the unique context and needs of your program.

In addition to the evaluation requirements of the current National Comprehensive Cancer Control Program, given this toolkit is based on the CDC evaluation framework, its contents can be applied to the planning and implementing of any public health program.

What's New in This Edition

- Updated examples of completed evaluation plan templates.
- Additional guidance on Performance Measure Plan development.
- New Performance Measurement Plan template.
- Guidance for Analysis Plan development.
- New icon created for Tools & Templates sections

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." CDC 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. A few commonly used program evaluations 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-, intermediate-, or long-term outcomes it is intended to yield.
- 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.

¹ Patton, M. Q. (1997). Utilization-Focused Evaluation: The New Century Text (3rd edition). Thousand Oaks, CA: Sage.

NCCCP Evaluation Expectations

At minimum, NCCCP awardees are encouraged to conduct process and outcome evaluations of their efforts. See <u>Section 3</u> of this toolkit ("How To" Guide) 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, factors such as behaviors, attitudes, or 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 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 becausesome 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 inform both public health practice and research agendas and 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." Patton expands on this adage in his book, Utilization-Focused Evaluation, page 24:

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.³

²U.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.

³ Patton, M. Q. (1997). Utilization-Focused Evaluation: The New Century Text (3rd edition). Thousand Oaks, CA: Sage.

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.

Evaluation stakeholders are individuals 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 components and intended outcomes of your program, which helps you focus your evaluation on the most important questions.

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 one 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. Awardees can 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.

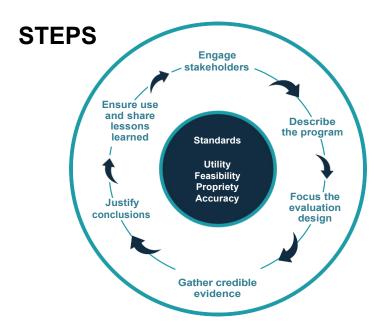
Applying the Framework Steps

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 awardees 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 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



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 implemented efficiently, managed properly, and are useful for program improvement. Program managers and evaluators can consider many practical issues before initiating evaluation activities for their 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 funded.

Why It Is Important to Evaluate Programs?

- CDC requires funded programs to evaluate their efforts.
- Program evaluation allows us to monitor progress toward program goals.
- The evaluation process helps identify:
 - Opportunities for program improvement.
 - Problem areas before significant resources are wasted.
 - 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 use of your 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 conducts program evaluation routinely, there are likely many resources that can be shared and accessed to support evaluation activities for your 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 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 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 program. Consider the following options:

- External evaluation contractors: You may contract individuals outside of your organization to conduct an evaluation of your 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 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: <u>https://www.eval.org/</u>

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 NCCCP 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 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
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 program's unique context University-based evaluators may take a more academic approach rather than a practical 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	\$
Valuation 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 team	\$

^{*\$\$\$=} 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 such as program staff time and meeting space.

A *participatory evaluation approach* will help you design an evaluation that is appropriate for your unique program context, that is aligned with 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." 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 use of evaluation findings.

Participatory Approach

Whether evaluations are led by internal staff, a group of stakeholders, or external consultants, NCCCP awardees 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 (such as 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 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 complete evaluation activities successfully. Partnering with graduate students can also help increase your program's evaluation capacity 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.

⁴ 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 using existing program data and data sources
- Draft of data collection tools, including surveys or interview guides
- Qualitative data collection such as conducting interviews or focus groups with local awardees 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 program
- Participation in school health or career fairs
- Provision of guest lecture or seminar on realworld public health practice and the work of the 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 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 awardees 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 funding applications. Public recognition of contributions in NCCCP funded program publications, on the program website, 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, or clerical support for evaluation groups made up of volunteers may also help sustain the group's participation and enthusiasm.

How Do We Develop an Evaluation Plan?

The NCCCP component of the DP22-2202 NOFO specifies that each awardee 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 use of findings.

All NCCCP Awardees Are Required to Have an Evaluation Plan

As specified in Strategy 5 of DP22-2202's NCCCP component, awardees are required to develop and implement a formal evaluation plan annually.

These topics are all addressed in Section 3 of this toolkit: "How to" Guide.

Capturing these topics in a single document such as an evaluation plan can help your evaluation run smoothly. An Evaluation Plan Checklist is provided on page 22. 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.

2. NCCCP PROGRAM EVALUATION REQUIREMENTS

During the 5-year funding period, awardees 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 jurisdiction specific cancer plan.
- Program: the extent to which interventions outlined in your NCCCP workplan are executed and yield intended results.⁵

NCCCP awardees are required to submit documents that describe their programmatic efforts throughout the funding period and the extent to which their partnerships, plans, and program interventions are effective. Annual evaluation plans and analysis plans outlining efforts to evaluate the 3Ps are submitted at the beginning of the program year, while annual evaluation reports summarizing evaluation findings and recommendations are due at the end of the program year. An annual performance measurement plan is also required and should be submitted as a part of the Annual Performance Report, which serves as the awardee's continuation application. The section below provides additional details related to each requirement mentioned above.

Evaluation and Performance Monitoring

NCCCP program evaluations are also expected to complement awardee performance monitoring requirements, including the completion of the performance measures worksheet and the development of workplans with measures of effectiveness.

NCCCP Evaluation Plan Requirements

Using the CDC Framework for Program Evaluation, NCCCPs are required to develop an annual evaluation plan that includes processes that are useful, feasible, ethical, and accurate. The evaluation will include steps to:

- Engage partners and collaborators.
- Describe the program.
- Focus the evaluation.
- Gather credible evidence.
- Justify conclusions.
- Share lessons learned.

⁵ CDC does not require evaluation of interventions implemented with non-CDC funding. However, programs may choose to evaluate these interventions to assess the program's overall effectiveness.

NCCCP evaluation plans should be submitted annually and should consider an evaluation framework that acknowledges the unique context of the program. Examples of frameworks that can help facilitate the evaluation include: RE-AIM, culturally responsive evaluation, and collective impact. Plans must include:

- A description of evaluation stakeholders that identifies:
 - o Program evaluation stakeholders.
 - Strategies used to engage the stakeholders.
 - o Role of the stakeholder in the program and the evaluation.
- A program logic model.
- Evaluation questions that address:
 - o Comprehensive cancer control plans.
 - NCCCP Work Plan evidence- and/or practice-based intervention implementation, including those addressing social determinants of health.
 - Comprehensive cancer control coalition composition, roles, and contributions to program interventions.
- An evaluation planning matrix that includes information regarding how the awardee will address the evaluation questions through:
 - o Program indicators.
 - Recurring data collection methods including but not limited to abstraction of secondary data from surveillance systems or population-based surveys, document or chart review, surveys, and interviews.
- An analysis plan that describes how data collected will be analyzed using traditional qualitative, quantitative, or mixed methods.

The tool below provides a checklist that aligns with the required components of the evaluation plan.



Evaluation Plan Checklist

Eval	uation 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 (for example, we will ask our
	university partner to review data collection tools).
Prog	ram 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 (for example, major activities completed, ongoing activities, activities that have not begun yet).
	Include a brief description of any contextual factors such as hiring freezes, new legislation, or staff turnover that may affect program success.
Eval	uation 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.
Plan	ned Approach for Dissemination and Use of Findings
	Describe your plans for disseminating evaluation findings (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 (such as hold a 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.

Analysis Plan Requirement

NCCCP awardees are required to submit an annual Analysis Plan that describes how data collected will be analyzed using traditional qualitative, quantitative, or mixed methods.

Key components of an Analysis Plan include:

- Evaluation question(s).
- Dataset(s) to be used.
- Inclusion and exclusion criteria.
- · Variables to be used in analysis.
- Statistical methods and software to be used.



Visit CDC Creating Analysis Plan resource for more information on developing an analysis plan

https://www.cdc.gov/globalhealth/health/neatthprotection/fetp/training_modules/9/creating-analysis-plan_pw_final_09242013.pdf

While the Evaluation Plan and Analysis Plan facilitate the development of a document that drives program evaluation during the program year, the Performance Measurement Plan ensures the monitoring and tracking of select program milestones that are required to be submitted with the Annual Performance Report. The section below describes these requirements.

Performance Measurement Plan Requirement

NCCCP awardees are also required to create a performance measurement plan to report short-term, intermediate-term, and long-term outcomes. Specifically, performance measures should address the extent to which programs will:

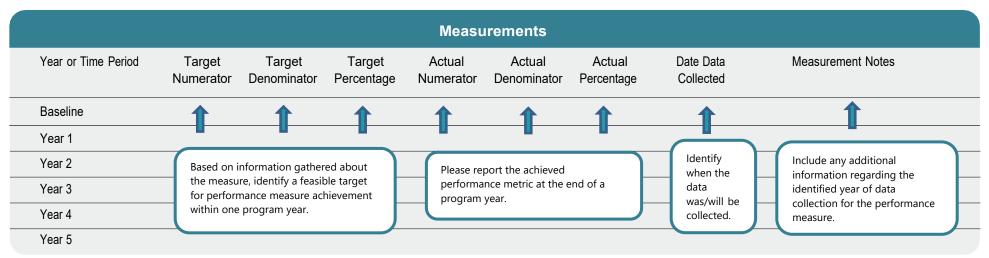
- Increase use of United States Cancer Statistics data to assess cancer burden, identify priority populations, and monitor incidence, mortality, and survival.
- Increase use of surveillance systems and population-based surveys to assess cancer risk, health behaviors, and access to preventive services.
- Increase use of data to facilitate program planning and evaluation.
- Improve recruitment and engagement of members from populations of focus, chronic disease programs, and traditional and non-traditional public health partners within comprehensive cancer control coalitions.
- Improve contribution by partners to evidence-based interventions (EBIs) that address cancer burden.
- Improve implementation of jurisdiction-specific comprehensive cancer control plans.
- Improve knowledge, awareness, and attitudes regarding EBIs and resources that aid implementation.
- Improve implementation of EBIs that address primary prevention, screening, and survivorship with fidelity.
- Improve awareness, knowledge, and beliefs about cancer prevention, screening, and survivorship among priority populations.
- Increase access to healthy eating and physical activity opportunities.
- Increase access to cancer screening and preventive services by priority populations.
- Increase reporting of high-quality program data to CDC.
- Increase awardee participation in special studies.
- Increase healthy behaviors among the population of focus.
- Increase early detection of cancer among the population of focus.

X Tools and Templates

Performance Measure Metric Table

Performance Measure Metrics			
Performance Year	[Year of funding associated with this performance measure]		
Name	[Type of Performance Measure]		
Measure Description	[Using the NCCCP logic model outcomes, identify the intended outcome of the performance measure]		
Strategy	[Identify EBI(s) that support this performance measure.]		
Measure Type [Select short-, intermediate-, or long-term] Narrative [Describe strategies and data collection activities.] Setting [Describe the setting of each EBI that supports this performance measure.]			
		Data Source	[Identify the origin of the data which will be used to measure progression towards the performance measure metric. Examples include USCS, BRFSS, Coalition Roster, Partnership Satisfaction Survey, and Tracking Tool.]

Performance Measure Measurement Table



Performance Measure Metric Table (completed example)

Performance Measure Metrics		
Name	Adolescents in grades 9-12 who report a sunburn in past 12 months.	
Measure Description	Implement evidence-based interventions that address primary prevention, screening, and survivorship.	
Strategy	Adding sun-protective features (shade).	
Measure Type	Intermediate	
Narrative	Within this program, the health department worked with partners to erect shade structures in ABC jurisdiction high schools, which data showed to have a high burden by adolescents. Sunburn data will be extracted from the state based YRBS.	
Setting	High School	
Data Source	YRBS	

Performance Measure Measurement Table (completed example)

Year or Time Period	Target Numerator (e.g., number of African-American males receiving colorectal cancer screening in your area)	Target Denominator (e.g., number of African -American males eligible for screening in your area)	Target Percentage	Actual Numerator	Actual Denominator	Actual Percentage	Date Data Collected	Measurement Notes
Baseline	55	4500	1.2%	55	4500	0.01%	9/2021	Baseline target and actual
Year 1	1000	4500	22%	TBD	TBD	TBD	9/2023	are the same after receipt of funding in FY22 and start-up of year 1 activities
Year 2	2250	4500	50%	TBD	TBD	TBD	9/2024	
Year 3	3000	4500	66%	TBD	TBD	TBD	9/2025	
Year 4	3500	4500	77%	TBD	TBD	TBD	9/2026	
Year 5	4000	4500	88%	TBD	TBD	TBD	9/2027	

As mentioned, programs have a full year to implement their evaluation plan. The section below provides the required elements of the NCCCP evaluation report associated with those efforts.

NCCCP Evaluation Report Requirements

Evaluation Reports provide the status of evaluation activities and a summary of the key findings from data collection efforts implemented during the program year. Additionally, reports should include background of the program, the evaluation design, program outcomes and results, and a description of stakeholder roles. Sound reports should include the scope of the program, an analysis of outcomes, and recommendations for program improvement. See below for a checklist of items to include in an effective evaluation report.

I. Checklist for Ensuring Effective Evaluation Reports⁷

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; can be 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; can be in appendices.
Specify and explain the standards and criteria for 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 and revise and reword as
needed.
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.

⁷ Adapted from Worthen, B. R., Sanders, J. R., and Fitzpatrick, J. L. (1997). Program Evaluation: *Alternative Approaches and Practical Guidelines* (2nd edition). New York, NY: Addison, Wesley Logman, Inc.

Evaluation Report Dissemination

Evaluation Reports are an essential step in articulating outcomes, sharing lessons learned, and driving program improvement.

Evaluation Reports Should Articulate Outcomes

When creating evaluation reports, be sure to use measurable outcomes when describing progress. Your reports should also include performance measures. Outcomes should be included in reports to assist with understanding program effectiveness. Additionally, sharing findings with audiences that can benefit from the program can increase the program's impact.

Evaluation Reports Should Share Lessons Learned

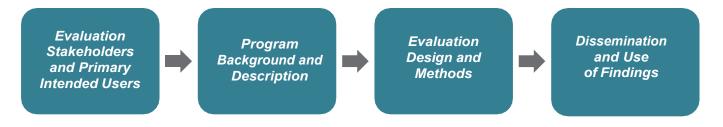
Challenges and lessons learned should be described in the report to communicate program effectiveness. When stakeholders can assess what did and did not work, they can collaborate to promote program sustainability.

Evaluations Should Drive Program Improvement

When shared, reports serve to illustrate program outcomes and drive program improvement. Discussions and presentations on findings can help describe the program's usefulness and drive program improvement.

Developing a sound evaluation report is just one step in your evaluation process. After you create an evaluation report that articulates your outcomes and lessons learned, you should share key findings with your stakeholders. Evaluation Reports can be disseminated through various modes such as infographics, white papers, and success stories to ensure your program outcomes are shared effectively. Dissemination is a vital part of the evaluation process and helps to highlight your program's impact.

3. "HOW TO" Guide



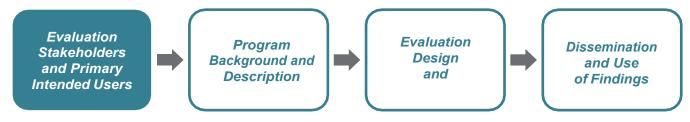
This section is designed to be a practical "how to" guide for evaluating your NCCCP efforts.

It presents evaluation guidance under the following topic headings to facilitate practical application of the CDC Framework:

- Evaluation Stakeholders and Primary Intended Users (Page 29),
- Program Background and Description (Page 38),
- Evaluation Design and Methods (Page 46), and
- Dissemination and Use of Findings (Page 61).

Each section 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.

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 NCCCP evaluation
- determine how and when to engage stakeholders in your evaluation

Evaluation stakeholders are key individuals or organizations that are invested in the program, interested in the results of the evaluation, and will support the use of evaluation results. 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:

https://www.rwjf.org/en/library/research/2009/12/a-practical-guide-for-engaging-stakeholders-in-developing-evalua.html

Consider including the following evaluation stakeholders in the evaluation plan: other CDC-funded programs, health care providers, advocacy organizations, government organizations, professional associates, health plan payers, business owners, decision makers, media, faith-based organization, and intervention participants such as 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 NCCCP evaluation. 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 below is designed to help you think through who your evaluationstakeholders are and their role in the evaluation: Stakeholder Assessment Worksheet (completed example)

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 NCCCP efforts;
- represent diverse perspectives;
- are responsible for program implementation, monitoring, or maintenance;
- are influential in the awardee agency, CCC coalition, state, tribe, or territory;
- have an intense interest in comprehensive cancer control and the desire to help; and
- are supporters 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 your program operations. However, these critics could help identify weaknesses or gaps in planned evaluation efforts. Their input could help you anticipate criticism and 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 coalitions are managed. Members' roles and responsibilities need to be identified clearly, 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 can manage effectively when developing your evaluation stakeholder group. Consider the resources you can 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 share information with all stakeholders throughout this process, no matter what role they play in 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 resources your program can 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** (the evaluation activities you must complete as an NCCCP awardee). Stakeholders need to know what your evaluation requirements are, and that fulfilling 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 resources can our program dedicate to stakeholder recruitmentand management?
Propriety	Are we being honest with stakeholders about anticipated workloadand opportunities for participation?
	Have we clearly communicated with our stakeholders about evaluation requirements and potential challenges such as limited resources?
Accuracy	What skill sets and perspectives should be represented in our stakeholdergroup 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 participants in evaluation interviews and surveys,
- · data collectors,
- data analysts,
- interpreters of findings,
- · writers (of final evaluation reports, manuscripts, and briefs) and presentation developers, and
- presenters or supporters 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 supporting implementation or sharing evaluation findings.



Stakeholder Assessment Worksheet

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

Evaluation Stakeholders	What Stakeholders Want to Know
[List key individuals or groups who have a stake in the evaluation and or who will use the evaluation results one per row]	[Identify and document each stakeholder's evaluation interest - one per row]

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
[List key individuals or groups who have a stake in the evaluation and or who will use the evaluation results one per row]	[Description of strategy or way in which stakeholders will be engaged - one per row]	[Identify the frequency in which each stakeholder will be engaged one per row]

Stakeholder Assessment Worksheet (completed example)

I. Evaluation Stakeholders and Primary Intended Users: List key individuals or groups who have a stake in the evaluation and 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 used to support NCCCP efforts.
Feasibility	What resources can our program dedicate to stakeholder recruitmentand management?
Propriety	 Are we being honest with stakeholders about anticipated workload and opportunities for participation? Have we clearly communicated with our stakeholders about evaluation requirements and potential challenges such as limited resources?
Accuracy	What skill sets and perspectives should be represented in our stakeholdergroup to ensure that we paint an accurate picture of our program?

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	 All phases of the evaluation processvia regular evaluation advisory committee meetings
	 Presenters and supporters who share findings with state and community partners 	
Legislators	 External reviewers of evaluation plans and methods 	Evaluation planning phase
Intervention participants	 Members of the evaluation advisory committee Data sources (participants in evaluation 	 Two representatives to participate in all phases of the evaluation process viaregular evaluation advisory committee Evaluation implementation phase
CDC DCPC	interviews and surveys) • External reviewers of evaluation plans and methods	Evaluation planning phase
Local American Cancer Society partner	 Data analysts Presenters and supporters 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 (staff time, funding, and 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 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, skills, and program needs.

Program Background and Description



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

- engage stakeholders in the development of a detailed program description including a logic model,
- draft a detailed description of your NCCCP efforts

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

- Program resources
 - Program resources include the people on the ground doing the work, such as coalition members or member organizations, health department staff, and academic partners, as well as funding streams. Your funding sources may include state appropriations, federal agencies, and 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 include the number of training participants or community members reached by a campaign. Intended outcomes for these activities include increases in awareness or changes in behavior related to preventing or controlling cancer.
- Stage of development of your NCCCP efforts
 - There are generally refer to two stages of NCCCP development: planning, which involves applying the building blocks to develop a comprehensive cancer control plan, and implementation, during which programs work with partners to put their plans into action. We encourage awardees 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
 NCCCP efforts. Specific examples include 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.

Developing a detailed program description with your evaluation stakeholders can 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?

You can present information about your program in several ways. You may describe your program in narrative form or 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 for developing and presenting a program description. NCCCPs are required to develop and submit logic models.

Logic Models

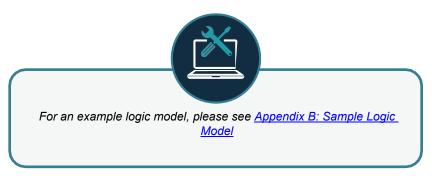
NCCCPs are required to develop logic models. They are used in CDC national evaluation efforts and are useful to describe programs and forplanning and monitoring evaluation activities.

Logic models help visualize how a program or project works by describing resources, activities, results, and outcomes, and the connection between these components. Logic models can help focus on what to evaluate, determine appropriate questions, establish indicators, and determine timing and data collection methods. Logic models also establish "good" questions that are focused and as simple as possible. Lastly, one important fact about logic models that is often overlooked is that they are living and evolving documents. Even the most intensely planned project will see changes in priorities, available resources, activities, and expectations. When these inevitable changes occur, your logic model should reflect them as well. You may notice new or changing connections between program components that may spark new or unique evaluation needs. Be observant and accommodate these developments and use your logic model to communicate them to your stakeholders.

What Are the Components of a Logic Model, and What Would a Logic Model for an NCCCP 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 (work products).
- Outcomes are the desired results of the program and should be used to establish specific, measurable, and realistic program objectives that align with NCCCP efforts. Outcomes can be categorized as short-term (one-year), intermediate-term, or long-term. Short-term outcomes often focus on changing the knowledge and attitudes of a program's target audience. Behavior, normative, and policy changes are generally classified as intermediate-term 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.



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 tips can help you work 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 cancer plans and funding applications. Descriptions from these documents were probably developed with input from stakeholders, so they may only need to be summarized and reviewed by evaluation stakeholders.

Build on awardee requirements

NCCCP awardees are expected to conduct certain activities (build strong partnerships and assess the burden of cancer) and to work toward certain shared outcomes (cancer risk reduction and enhanced survivorship). In addition to program descriptions that may have been developed for the cancer plan or funding application, awardee performance expectations are a good starting point for drafting logic models or listing 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-andshare 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 (what program and key stakeholders said they would do) and awardee performance expectations (what program and key stakeholders are expected to use funding for), 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

If 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 him or her prepare for meetings with your evaluation stakeholder group.

Be flexible

NCCCP efforts can change over time based on population needs, program resources, and other contextual realities. Thus, the logic models, tables, and narratives that describe programs must 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 NCCCP 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 the outcomes the program activities are intended to achieve. If your program description is not realistic and accurate, achievements can be difficult to document, and your program evaluation is unlikely to produce useful findings.



Detailed Program Description Outline

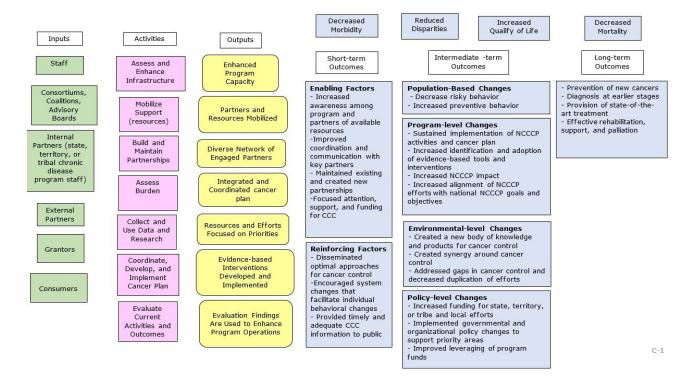
I. Key NCCCP Components: Provide a tabular and/or narrative description of your program's resources, major activities, and the anticipated outputs and outcomes of program activities. Include a copy of your program's logic model.



- II. Stage of Development: Briefly describe your program's stage of development.
 - Identify which major activities have been completed, what you are 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 NCCCP efforts.
 - Identify what historical, political, program or organization, and community factors have affected your NCCCP efforts, and how?

Detailed Program Description Outline (completed example)

I. Key NCCCP Components: Provide a tabular and/or narrative description of your program's resources, major activities, and the anticipated outputs and outcomes of program activities⁸. Include a copy of your program's logic model.



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 colorectal cancer awareness among African Americans.
 - Implemented provider education series via American Medical Association.
- Currently activities:
 - Evaluating interventions.
 - Revising cancer plan.
 - Revising burden report.
- Work has yet to begin on:
 - Dissemination of new cancer plan and burden report.
 - Implementation of new cancer plan.

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

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

Reduction of state appropriations

A reduction in state appropriations for cancer prevention and control has reduced our NCCCP budget by10%. 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 internally. Unfortunately, this adjustment means that it is taking us much longer (several months) to revise the burden report this year than it has in the past (1 month).

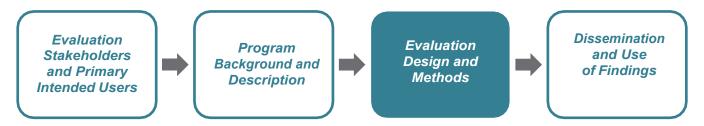
Tobacco policy passes

Our state's highest-performing school district adopted a comprehensive smoke-free campus policy. Information from our NCCCP 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 controlchampions and supporters of this policy change. School district leaders 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 describe clearly (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 NCCCP efforts.

Evaluation Design and Methods



This section provides guidance on focusing the evaluation and establishing appropriate methods for your NCCCP 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 analysisplans for each evaluation question; and
- draft a detailed evaluation design and methods matrix for your program.

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.



The <u>Evaluation Methods and Design Matrix</u> below, under the "Tools and Templates for Evaluation Design" section, is designed to help develop and document the evaluation 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 the Evaluation Primer section above. 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 NCCCPs?

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

- Partnerships refers to your CCC coalition's quality, contributions, and impacts.
- **Plan** refers to your jurisdiction's cancer plan quality and implementation.
- Program refers to the extent to which interventions in your cancer workplan 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:

- **Products** refers to the quality or use of NCCCP resource material the program produced.
- Training refers to the quality and impact of NCCCP-related training the program provided.
- Integration refers to the extent to which your NCCCP efforts are 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 to Evaluate Your NCCCP Partnerships

NCCCP partnerships should be evaluated to assess gaps in representation and partner contribution beyond member satisfaction and meeting attendance. As you begin planning your partnership evaluation activities, remember to add the partnership description and evaluation questions and methods to the appropriate sections of the evaluation plan.

Potential Uses of Partnership Evaluation

- Identify partnership strengths and areas for improvement in operating process structure, as well as planning and activity implementation.
- Improve and guide activities so that successful strategies can be supported and replicated.
- Determine whether goals and objectives have been met.
- Promote the partnership's public image.
- Show accountability to funders and partners. This applies to achieving results, managing resources, and valuing partners' time.

Topics the Partnership Evaluation Should Address

- The number, diversity, and active participation of members.
- Partnership operation elements such as agreement on defined purpose, communication practices, internal reporting, recruiting, meeting organization and decision making.
- Partnership activities and progress toward achieving objectives.

Partnership Evaluation Design

- Use evaluation tools to determine the ongoing functionality of the partnership.
- Use assessments to understand the effect of the collaboration and the outcomes achieved.

How to Evaluate Your Cancer Plan

Your jurisdiction's cancer plan should be evaluated annually to ensure activities address the cancer burden.CDC created the Cancer Plan Self-Assessment Tool (https://www.cdc.gov/cancer/ncccp/pdf/CancerSelfAssessTool.pdf) to help NCCCP program directors and cancer coalition members evaluate their state, territory,tribe, or U.S. Affiliated Pacific Islands jurisdiction cancer plans. Its eight core components and corresponding indicators reflect plan attributes and planning processes that are grouped within each component. Core components are:

- A description of the process used to develop the plan.
- · Goals and objectives.
- Strategies.
- Stakeholder involvement.
- · Presentation of data on disease burden.
- Reduction of cancer disparities.
- Evaluation.
- Additional descriptive items.

Recommended steps for using the tool include:

- 1. Review the tool with the steering committee members and workgroup leads, and assign components to appropriate workgroups.
- 2. Complete the tool.
- 3. List all elements that were not included in your cancer plan and prioritize them.
- 4. Develop an action plan for revising your cancer plan, starting with the highest priority elements.
- 5. Share your results with your NCCCP program consultant.



The American Cancer Society also developed an informative tip sheet to consider when updating and evaluating your cancer plan:

https://www.acs4ccc.org/wp-content/uploads/2021/04/Cancer-Plan-Tip-Sheet Health-Equity FINAL.pdf

Checklist for Updating Your Cancer Plan

Ensure that your workgroup is familiar with your current cancer plan.
Create a systematic process for the workgroup to follow; a process that is intentional about addressing
issues of health equity throughout.
Use data to focus on the populations with the highest cancer burdens.
Focus workgroups on assessing and updating goals, objectives, and strategies.
Identify someone to write the introduction and assemble the final document.

How to Evaluate Your Program Interventions

Evaluating program interventions is an integral component of program improvement, assisting in understanding the steps taken to implement evidence-based interventions (EBIs) and providing insight into their ability to achieve the intended results. Evaluating EBIs can also help identify what was successful and what needs improvement. When evaluating the success of interventions, consider the steps needed to examine program effectiveness and where you are in the defined timeline. A list of needed steps is provided below.

- Develop questions that determine if your intervention is being implemented according to your plan.
- Use questions that assess:
 - How the interventions were implemented.
 - o The reach attained within the target population.
 - o The EBI's ability to produce the intended outcomes.
- Consider using questions that measure the breadth and depth of the EBI's ability to improve knowledge or behavior.

As previously mentioned, evaluating interventions also depends on where you are in the program timeline. If you are in the early steps of your program, be sure to evaluate intervention progress based on short- or intermediate-term outcomes. In addition, as you evaluate interventions, anticipate how the findings will be used to improve the program. Ask how the evaluation's outcomes help determine what is or is not effective or successful.



Reach, acceptability, cost, and sustainability are also key variables when evaluating program interventions. For more details on these variables, please visit Section 3.3 of the World Health Organization's Guide to Implementation Research in the Prevention and Control of Noncommunicable Diseases (https://apps.who.int/iris/bitstream/handle/10665/252626/978924 1511803-eng.pdf)

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

The following factors influence decisions regarding evaluation focus areas:

- **Stakeholder interests:** When narrowing the focus of your evaluation, it is important to consider the interests of your key stakeholders, including funders.
- **Evaluation resources:** Consider the 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 dedicating significant resources to update its
 cancer plan, the cancer plan should be the main focus of the program evaluation design rather than other
 efforts, such as training.

Build on Early Evaluation Activities

You 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 documented evaluation resources and described the program's stage of development. Refer to this work as you engage stakeholders in focusing the evaluation and developing evaluation questions.

Evaluation Questions

After 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 NCCCPs Expected to Address?

There is no rule regarding how many evaluation questions to include in your evaluation design. NCCCPs are expected to identify questions that are important to key stakeholders and facilitate program improvement efforts. The number of evaluation questions programs address depends on the resources and evaluation expertise available. 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	 To what extent are stakeholders satisfied with the partnership's work? What factors are affecting (positively or negatively) partnership maintenance?
Plan	 Is the cancer plan a high-quality plan? Are the goals, objectives, and strategies of the plan being implementedas 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 Choose from 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 list of potential evaluation questions according to the usefulness of information that will be produced.
- Internal evaluation team: Although programs and stakeholders may want to address a wide range of evaluation guestions, 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 program's stage of development. For example, programs that are in the process of launching a new intervention could not address evaluation questions about that intervention's long-term health effects. Instead, such a program may want to develop evaluation questions related to the implementation of its new intervention and the anticipated short- and intermediate-term 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 program's effect, presents conclusions about its merit, and makes recommendations about its future direction.

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

Awardees are required to submit annual evaluation plans. However, we expect plans to include many of the same evaluation questions from year to year because some questions take more than a year to answer and require 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 area, you should identify indicators for each evaluation question. 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 about partnerships.

How Do Performance Measures Relate?

Performance measures are a way for CDC to understand its awardees' overall efforts and effect, andto gather information to improve the technical assistance it provides them. 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 NCCCP partnership?	 Types and number of sectors represented. Representativeness of key target groups. Types and number of partner contributions by activity.
Are we implementing the plan as intended?	 Extent to which cancer plan objectives are implemented as intended. Number of member organizations that implement an activity related to the cancer 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 partnership's work?" 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 straightforward. Consider another evaluation question from Table 4: "How strong is the NCCCP partnership?" Before identifying indicators for this question, you must qualify the evaluation question, that is, you have to clarify what constitutes a "strong" partnership to your program:

- We consider the following characteristics to be indicators of a strong partnership:
 - Key cancer care sectors are represented on the partnership,
 - Target populations are represented on the partnership, and
 - Members contribute to the partnership's work.

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

Data Sources

After 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 (numerical observations, such as counts and assessment scores) and qualitative (descriptive observations, 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 Can be Used for their NCCCP Evaluations?

Examples of data sources include:

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

Pilot Test New Data Collection Tools

If your program is developing a survey or 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 pilottest results, so build time for revisions into your evaluation timeline.

Data Collection Methods

After 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 Indicators for Partnership, Plan, and Program Evaluation Questions

Focus	Evaluation Question	Indicators	Data Collection Source	Data Collection Method	Data Collection Timing
Partnership	Have we built a strong NCCCP partnership?	 Types and number ofsectors represented Representativeness of key target groups Types and number ofpartner 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 cancer plan objectives are implemented as intended Number of member organizations that implement an activity related to the cancer plan 	Cancer plan Program records— memoranda of understanding (MOUs), contracts, system for tracking member activities	Evaluator will abstract data from program records and/or database Evaluator will survey members (web-based)	 Annual abstraction of program records Annual survey of NCCCP 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 sunsafety education	Evaluator will abstract data from program records and/or database Evaluator will survey members (web-based)	Before and immediately following each educational session 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, given the evaluation resources available.
- 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;
- checking the data for missing or incorrect 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.

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

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 (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 analyses.

Tools and Templates

Evaluation Methods and Design Matrix

Focus	Evaluation Question	Indicators	Data Collection Source	Data Collection Method	Data Collection Timing	Data Analysis
The NCCCP focus area 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

Evaluation Methods and Design Matrix (completed examples)

Focus	Evaluation Question	Indicator(s)	Data Collection Source	Data Collection Method	Data Collection Timing	Data Analysis
The NCCCP focus area 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? What is our partnership make up and contribution? 	 Types and number of sectors represented Representativ e- ness of key target groups Types and number of partner contributions 	Program or 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 Question	Indicator(s)	Data Collection Source	Data Collection Method	Data Collection Timing	Data Analysis
The NCCCP focus area 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	To what extent was the cancer plan successfully implemented?	 Extent to which cancer plan objectives are implemented as intended Member organizations that implement an activity related to the cancer plan 	 Program data— cancer 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 NCCCP members (web-based)	Annual abstraction of program records Annual survey of NCCCP member organizations	Program Evaluator: Number of cancer plan objectives implemented Number of NCCCP members who report implementing an activity that is related to the cancer plan Number of cancer plan activities implemented by NCCCP members
	Are cancer plan activities evidence-based and culturally appropriate?	Number of implemented plan activities that are evidence-based Number of implemented plan activities that are culturally appropriate	Program data—program reports, MOUs, contracts, system for tracking evidence-based interventions (EBIs). 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 cancer plan and implementation strategies)	Program Evaluator: Number of plan activities that are evidence-based Number of plan activities that are aligned with the CLAS standards

Focus	Evaluation Question	Indicator(s)	Data Collection Source	Data Collection Method	Data Collection Timing	Data Analysis
The NCCCP focus area 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	 How does our new sun safety intervention improve knowledge and behavior? To what extent did sun safety knowledge improve immediately following the educational session? To what extent was the knowledge retained 3 months after the educational session? What percentage of participants receiving the sun safety education (who indicated they used sunscreen or protective clothing) increased from pretest to 3 months post-test? Of the participants who received sun safety education, what percentage indicated an increased used of sunscreen or protective clothing 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 preand posttest 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 Use of Findings



Over the 5-year period of the cooperative agreement, develop dissemination documents that describe the monitoring, assessment, or evaluation of program efforts. Additionally, these documents should share lessons learned and contribute to the body of knowledge on cancer prevention and control activities for multi-sector coalitions. These documents should include:

- · Briefing reports.
- Presentations given at local and national conferences.
- · Submission of annual success stories.
- Submission of a peer-reviewed manuscript at least once during the project period.
- A description of peer-peer learning the program participated in, such as webinars, conferences and meetings.

This section provides guidance on sharing and using NCCCP 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.

We encourage awardees 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 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 use 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 can help the evaluation team identify appropriate strategies for sharing and using evaluation findings. The first step toward dissemination is effective reporting.

Reporting

How Should I Report Evaluation Findings?

Options for summarizing and reporting evaluation results include:

- 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, and
- a radio or television spot.

Many of these options can be presented in electronic and paper formats.

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 disseminationstrategies. For example, a brief slide presentation at existing coalition meetings is an efficient way to share evaluation findings.

What Information Should Be Included in a Detailed Evaluation Report?

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

- an executive summary,
- the evaluation introduction, background, and purpose,
- evaluation methods,
- evaluation results and limitations,
- summary and conclusion,
- · recommendations for program improvement, and
- references and appendices.



See the" Checklist for Ensuring Effective Evaluation Reports" section below for tips on developing and evaluation report.

Also visit the Evaluation Center at Western Michigan University online for a free evaluation report checklist:

https://wmich.edu/evaluation/checklists



Checklist for Ensuring Effective Evaluation Reports

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 (can be 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 (can be in appendices).
Specify the standards and criteria for evaluative judgments.
Explain the evaluative judgments and how they are supported by the evidence.
List 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.

⁹ 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 (people or organizations that are invested in the program, are interested in the results of the evaluation, 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 NCCCP-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:

- 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?

Should our Program Tailor Evaluation Documents?

As resources allow, programs can 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 communicate evaluation results to key target audiences effectively.



Dissemination Strategy Matrix

he planned method findings with the ?]	[When will the product be completed and ready for dissemination to the intended audience?]	[Who will ensure the proposed dissemination product reaches the audience within the specified timeline, format, and channel?]
		?] dissemination to the intended

Dissemination Strategy Matrix (completed example)

Audience	Format and Channel for Sharing Findings	Timeline	Responsible Person
CDC DCPC	E-mail copy of detailed evaluation report to Project Officer	 Annually within two weeksof finalizing the report 	Program Coordinator
CCC Coalition	 Present key findings and recommendations E-mail evaluation report condensed into program action document, evaluation newsletter, factsheet, brochure Use social networking accounts and blogs to communicate evaluation efforts and findings 	 Annual in-person coalition meeting Written documents can be mailed or e-mailed two months after finalizing report Coalition can subscribe to a password-protected social network to receiveinformation monthly. 	 Program Evaluator Evaluation Committeeor Workgroup
Public	Post findings related to program achievements on the health department or NCCCP web page	 Annually within one month of finalizing the evaluation report 	 Program Coordinator and health department information technology staff

Use

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 Steps Can We Take to Help Ensure Evaluation Findings Are Used?

You can take several practical steps to help ensure evaluation findings are used to improve your program, including:

- Use regularly scheduled meetings with evaluation stakeholders to share evaluation findings and develop
 recommendations for program improvement based on evaluation findings. Evaluation stakeholders can
 also help you prioritize recommendations for program improvement based on stakeholder input, NCCCP
 awardee requirements, and practical program considerations such as staff and funding resources;
 and think strategically about how and when recommendations can be carried out and who can lead
 improvement efforts.
- Encourage Program Directors and Program Coordinators to include a review of evaluation findings and recommendations in regularly scheduled staff meetings. They can identify 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 awardees, in identifying ways
 they can apply evaluation findings to improve their organizational practices or NCCCP-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.



Checklist for Ensuring Use of Evaluation Results

Share and discuss results at a stakeholder meeting.
with stakeholders.
Discuss ways stakeholders can apply evaluation findings to improve their organizational
practices or NCCCP-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.

4. Glossary of Evaluation Terms

NCCCP 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 Use 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: Assessment of a program's implementation and effectiveness. 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 gathered. 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.
- **Interview guide:** A list of issues or guestions to be raised during an interview.

- 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 different ways.
- 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, such as questionnaires, interview guidelines, and 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 program's setting, 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 a program's effect, present conclusions about its merit, and make recommendations about its future direction.
- **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 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 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: Complete list of all elements (such as 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 (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 before the interview in exactly the way they are asked later.
- Statistical analysis: The manipulation of numerical or categorical data to predict phenomena, draw conclusions about relationships among variables, or generalize results.
- 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.
- Statistically significant effects: Effects that are observed and are unlikely to result solely from chance variation. These can be assessed using statistical tests.
- 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, or have a stake in what will be done with 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 a program requires to perform 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 outcomes) you hope to achieve.
- Program goal: A statement of the overall mission or purpose(s) of the program.
- Outcomes: The results of program operations or activities; the effects triggered by the program, such as increased knowledge, changed attitudes or beliefs, increased cancer screening, or reduced cancer morbidity and mortality.
- **Outputs:** The direct products of program activities; immediate measures of what the program accomplished.
- **Resources:** Assets available and anticipated for operations. These include people, equipment, facilities, and other things used to plan, implement, and evaluate programs.

5. 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 www.cdc.gov/pcd/issues/2009/apr/08_0200.htm .
	Minkler, M., and 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 (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). California: Sage Publications.
Conferences and trainings	American Evaluation Association: www.eval.org
	American Evaluation Association Summer Evaluation Institute: www.eval.org/Events/Summer-Evaluation-lnstitute
	The Evaluators' Institute: https://tei.gwu.edu/
Websites	Centers for Disease Control and Prevention: www.cdc.gov/eval/
	Community Tool Box, University of Kansas: https://ctb.ku.edu/
	W.K. Kellogg Foundation: www.wkkf.org

6. Toolkit Evaluation: We Want Your Feedback

The NCCCP 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 worked with Program Directors during the development of the toolkit, we ask that you provide additional feedback on its usability and effectiveness by:

Talking 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 an understandable way?
- Does the toolkit provide practical tips, strategies, and tools to develop an evaluation plan and conduct evaluation activities?

Participating in our survey. The Division of Cancer Prevention and Control (DCPC), Comprehensive Cancer Control Branch (CCCB) will conduct a comprehensive evaluation to assess this toolkit's usability and quality (OMB Control # 0920-0841). We will rely on you to participate in surveys, key informant interviews, or focus groups. Your participation will be appreciated but not mandatory. We will ensure that results of the evaluation will be shared with all stakeholders. CCCB is committed to using these recommendations to enhance current and/or future evaluation resources. The survey can be found at www.surveymonkey.com/r/EvalTool21.

We thank you in advance for your insight and feedback.

7. References

Butterfoss FD. Evaluating partnerships to prevent and manage chronic disease. Preventive Chronic Disease 2009;6(2):A64.

Centers for Disease Control and Prevention. Framework for program evaluation in public health. MMWR Recommendations and Reports 1999;48(RR11);1-40.

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.

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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 TOOKIT DEVELOPMENT

Where Should I Direct 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 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 reviewed evaluation resources developed by other CDC programs and non-government agencies with programs similar to NCCCP. 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 TB Program Evaluation Plan, and CDC Division for Heart Disease and Stroke Prevention's Evaluation Guides.

Toolkit Development

- Reviewed awardee' evaluation plans
- Reviewed existing evaluation resources
- Engaged stakeholders
- Adopted the CDC Framework for Program Evaluation in Public Health
- Tailored evaluation guidance for NCCCPs and other funded programs
- Piloted toolkit with awardees

Evaluation Design and Methods

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

- 1. **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.
- Program Advisory Group: included volunteer evaluators from three previous awardees of CDC/DCPC programs: NCCCP, Hematologics, and National Organizations.

Based on guidance provided by our stakeholder group, we aligned the toolkit with CDC's Framework for Program Evaluation in Public Health. Both stakeholder groups provided input on the toolkit 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 awardee experiences and requirements.

¹⁰ Centers for Disease Control and Prevention. Framework for program evaluation in public health. MMWR Recommendations and Reports 1999;48(RR11);1–40.

APPENDIX B: SAMPLE LOGIC MODEL

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