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Program Evaluation and Public Health: A Case Study of the CDC's Current Framework

Alicia Marie Ignatowicz

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Program Evaluation and Public Health:
A Case Study of the CDC’s Current Framework

Alicia Marie Ignatowicz

B.A., University of Connecticut, 2002

An Essay
Submitted in Partial Fulfillment of the
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2005
Program Evaluation and Public Health:
A Case Study of the CDC's Current Framework

Presented by
Alicia Marie Ignatowicz, B.A.
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Thank you for your time and understanding.
I could have never done it without any of you.
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Abstract Summary

In 1999, the Center for Disease Control (CDC) recommended a six step evaluation framework for public health programs. The framework was developed to “guide(s) public health professionals in their use of program evaluation” (Center for Disease Control (CDC), 1999) Their overall intent was to provide a model of evaluation procedures to be included in the daily operations of public health programs. These procedures promote effective public health strategies and improve existing programs. Since 1999 various programs have incorporated the evaluation framework; however it has still not been practiced consistently throughout various public health initiatives. A case study of the Celebrate Research Project a part of the University of Connecticut Health Center’s (UCHC) Celebrate Women program was undertaken to demonstrate the benefits the evaluation framework can offer.

From January 2004 to November 2004 the Celebrate Research Project underwent evaluation and organizational revision guided by the CDC recommendations. The projects goals and objectives were identified and procedures were analyzed to determine how well these goals were being met. The project was identified as being: under exposed, under marketed, under funded, under utilized, and suffering from inconsistent employment. Recommendations were offered based on these observations and one specific recommendation, simplification of the programs procedures, was implemented to demonstrate the benefits a program can reap from evaluation efforts. At the completion of implementation a meta-evaluation was undertaken on the Celebrate Research Project Evaluation. The meta-evaluation provided additional support demonstrating the credibility of the CDC framework for program evaluation.
Introduction

Assessment, development, analysis, and modification are processes that humans use daily to maximize environmental benefits. Needs are determined, goals are set and then evaluated and modified to determine the most effective course of action to attain those goals. The basic process of evaluation has occurred throughout the history of public health and has aided in continuing expansion and change. Evaluation is a crucial tool for the implementation of change and needs to be considered very seriously when developing public health programs, initiatives and assessments.

Throughout recorded history public health has been a concern for most civilizations. Historically, increases in sedentary populations have been correlated with increases in infectious disease epidemics. References of plagues and quarantines are dated to ancient Egypt, where isolation was invoked through spiritual means making it immoral to “make anyone sick.” (Spielvogel, 2000) Civilizations developed more extensive means of maintaining the public’s health, and by the early 1700’s quarantine law was becoming an accepted part of Colonial America’s trading industry. Maritime ships were required to quarantine themselves for specified time periods if illness was detected onboard. Expanding cities soon found themselves plagued by various diseases spreading through an increasingly disadvantaged population. ‘Poor Laws’ and volunteer hospitals were established as community initiatives to combat these increasing threats to public health. (Turner, 1977) The 19th and 20th centuries brought about rapid advancements in the knowledge of disease, community preventive measures, and clinical procedures in dealing with disease and public health.
By the mid 1800’s sanitation laws and requirements were passed. Research and evaluation of current living conditions were on the rise, examining the “health” of various labor classes and seeking methods to improve it. Sanitary efforts increased and in 1866 the effectiveness of such efforts was realized. By this time some cities, such as New York, had included inspections, immediate case reporting, complaint investigations, evacuations, and disinfection of infected areas as means of minimizing the spread of disease outbreaks. (Remington, 1988) As a result when a cholera epidemic swept through the city “the mildness of the epidemic was no more a stroke of good fortune, observers agreed, but the result of careful planning and hard work by the new health board.” (Rosenberg, 1962) While retrospective, this brief evaluation of New York’s health initiatives instigated the start of public health agencies and institutions at the state and local level. Health became viewed more as a social responsibility than an individual responsibility.

The end of the 19th century saw a revision of basic principles concerning the source of disease agents. Koch’s postulates were the first scientific methods to prove microorganisms and not evil spirits cause disease. They are still used today. Over the next 100 years new interventions were developed including immunization and water purification. Procedures for these interventions were now being analyzed, altered, and analyzed again to improve their effectiveness and use within the public health system. Disease registries developed in state health departments and more initiatives started locally as well as federally to monitor the registries and decrease prevalence of infectious disease in areas of high incidence. However, evaluation of the current situation showed morbidities and disabilities from non-infectious agents remained within the population.
regardless of the decreased mortality from disease. In response the 1920’s brought about community initiatives in clinical care, education and promotion of overall health. (Remington, 1988a)

Since that time the health concerns and initiatives of state, local, and federal agencies, such as local health districts, non-profit organizations, and the Center for Disease Control (CDC), have increased their targeted populations. The CDC alone supports over 800 health initiatives ranging from adolescent health to workplace safety. (CDC, 2004) Programs have been implemented in various communities depending on the community’s resources and needs. Federal, local, and state public health agencies are required to be competent at determining their community’s health needs and implementing programs in response. However, initiatives are often times untested and their measurement of improvement theoretical at best.

For example, the federal government spends approximately $135 million per year on abstinence-only “sex” education, and by 2005 they are looking to double it to $273 million. (National Coalition Against Censorship, 2004) With this high level of federal interest it should be assumed the program had some prior indication of merit. However, “few abstinence-only programs have been thoroughly evaluated for their effectiveness.” (Stewart, 2003) In fact, since its inception in 1981, research has shown no evidence to support the federal government’s claims that abstinence-only programs delay sexual activity among teenagers. (Kirby, 2002) Instead supportive studies have been discredited through further research showing poor research designs and consequently leaving the true effectiveness of abstinence-only programs unknown. (Perrin, 2003) Support was based on theory, and current programs are continuing to be supported on the same discredited
theory and religious values regardless of research results discrediting this method of sex education and other studies promoting other methods of sex education.

Disjointed decision making with lack of data and knowledge such as the promotion of abstinence-only “sex” education has been one of the major barriers to public health initiatives of today. (Remington, 1988b) With so many initiatives currently running throughout the United States evaluation becomes the key for further change and improvement. Even the CDC developed guidelines for program evaluation in public health in 1999 (CDC, 1999), and has developed a “Future Initiatives” plan to promote evaluation among national health agencies. (Gerberding, 2004)

Like other methods of evaluation, program evaluation is a process undertaken to improve the quality of a system's performance. Such processes are ingrained in human development and can be utilized to enhance various types of public health initiatives. By using program evaluation to improve current programs and allocate limited financial resources the current health of the public could only improve.
Evaluation Methods Background

The history of evaluation methods is as complex as the history of public health. Evaluation can trace roots back to the 17th century; however most systematic evaluation research is modern in its development. Post-World War I, scientists began demanding rigorous research methods to assess social problems. (Freeman, 1977) Applied social research grew rapidly over the next few years with research developing in sociology, psychology, and other social sciences.

At the end of World War II a growing economy produced numerous large-scale programs for urban development, education, and preventative health services. As expenditures for these programs increased a growing need for “knowledge of results” developed. (Rossi, Freeman, and Lipsey, 1979) Consequently, program evaluation research was commonplace in social sciences by the end of the 1950’s. Research was done on various evaluation methods, quality, barriers and program theory throughout the 1960’s to improve the applied social science. By 1980 evaluation was quoted as being “the liveliest frontier of American social science.” (Rossi et al, 1979) Since that time, proven methods of evaluation have moved into other fields such as economics, political science, and social policy. Regardless of the field being studied the methodology has been proven and improved continuously.

Basic evaluation is the “process of determining merit, worth, and value of things.” (Scriven, 1991) At a basic level, evaluation requires three steps: one, defining program performance, i.e. goals, and target of that specific program, two, gathering evidence concerning program performance based on the definition, and three, analyzing evidence,
to provide assessment concerning how well the program meets its objectives. From that basic paradigm there are three specialized methods of evaluation:

- Needs-Assessment
- Program Monitoring
- Impact Assessment.

Each is based on the same program theoretical framework but involve different methodologies and/or objectives.

A needs-assessment is the basic element in the development of any social program. Essentially it describes and diagnoses social needs within a specific population. It can occur at various stages of a program including at the development phase of a new program or of an existing program. Assessing the need for a program involves identification of specific individuals involved with the program’s domain of interest, or stakeholders. These could be the major founders of the program, employees involved, participants and so forth. These stakeholders are then questioned to describe the “social problem” the program is attempting to address and determine effective interventions based on stakeholder and community needs.

Unlike a needs-assessment, program monitoring only occurs once a program has been implemented for an appropriate period of time. That amount of time is determined by the size of the program in question. For example, a community initiative targeting a small population would be able to provide an assessment of its implementation methods quicker than a national program targeting a much larger population. Program monitoring focuses on the processes of the program itself and attempts to determine one of the following: if the program is reaching the intended population, its delivery and support
functions are consistent with the original program design, or if it results in a positive change among program participants concerning the specific social problem that is being addressed. This level of focus is common among most institutions and is divided into program process evaluation and program outcome evaluation. Program process evaluation determines the effectiveness of program operations and service delivery and the program outcome evaluation determines the effects of the program on the population. Both evaluations utilize the same methods, as needs assessment, only their focus relies more on the processes to obtain the program goals and not the goals themselves.

Like program outcome monitoring, impact assessment focuses on the final effects of the program. However, where program outcome monitoring focuses on the processes involved and determines if they match the programs goals, impact assessment determines if the program itself is successful in alleviating some social problem or condition. This is accomplished by comparing outcomes for program participants and outcomes for non-participants. It is by far the more rigorous and common of the three types of assessment and determines an estimate of the overall effects of the intervention. Impact assessment can occur at any point of a program, including inception, to determine if the program would have the intended effect. Unlike the previous types of evaluation, impact assessment deals more with quantitative rather than qualitative analysis. As a result it utilizes the experimental model common in most research study trials. Of these models, randomized field experiments produce the most accurate results. However, before an impact assessment can be done the program's objectives must be very clear, and implemented well enough that the programs goals and processes are not in question.
Therefore, other forms of evaluation must be completed before an impact assessment can be provided for the program.

Recent expansion of evaluation methodology into other fields of study, such as economics and political science, has brought new issues to light including cost effectiveness evaluation. Such an increase in demand progressed evaluation research to methodology models for determining overall program effectiveness and usefulness. However, even with such an elaborate evolution of evaluation as a discipline a framework was not established in public health until 1997. (CDC, 1999) Public health would benefit greatly from systematic utilization of these research models, and could easily utilize each research method based on impending community needs and established programs. The following case study conducted by a member of the Celebrate Women Celebrate Research Project utilizing CDC recommended procedures with a focus on project quality improvement, illustrates the feasibility of the CDC approach.
Celebrate Women and the Celebrate Research Project Background

The Celebrate Women Program has been involved in the promotion of women’s health for the past 2 years. As of February 2005 Celebrate Women has enrolled over 10,100 members where 48% were between the ages of 35 and 55. The program has served as a venue to educate Connecticut women about the University of Connecticut Health Center’s signature and clinical programs, and is marketing to increase women’s health research. Their overall mission is to “improve the health of women through health care, education and research.”

Celebrate Women is a small program with only two full time employees. They utilize volunteer and student internships to aide in particular aspects of the program. A part of Celebrate Women’s initiative involves providing enrolled members with information about clinical trials at the University of Connecticut Health Center (UCHC) to facilitate recruitment for Institutional Review Board (IRB) approved studies. This project is entitled the Celebrate Research Project. To coordinate this effort properly the current IRB database is downloaded into the Celebrate Research Project database which is updated and queried to provide information concerning current research studies related to specific illnesses, disease or conditions.

The Celebrate Research Project began at the request of the executive vice president and dean of the medical school with the mission to “improve the health of women through high quality basic science and clinical research” (Women’s Health Research, Strategic Plan). Once Celebrate Women was established and a member base begun the director wanted the program to aid in recruitment for health center trials. As stated by Diane Bennett, director of Celebrate Women, the Celebrate Research Project

\[\text{Women's Health Research, Strategic Plan for Clinical Trial Recruitment. 2004}\]
was “a 2 in the morning idea” developed to provide Celebrate Women members information regarding UCHC research efforts. To provide members with this updated information the Celebrate Research Program involves five main processes:

- Disseminating information to Celebrate Women members, UCHC clinical practices, and UCHC division directors.
- Collecting updated information from the IRB office
- Collecting updated information from study investigators
- Collecting updated information from medical records, coded
- Assist investigators with developing IRB approved ads for study.

Reports are disseminated to Celebrate Women members in one of three manners: Celebrate News, a mailed newsletter, E-Celebrate!, an email newsletter, and through seminars.

The Celebrate News newsletter is mailed quarterly to all members, about 10,100, while the e-mail newsletter is sent to just above 5,500 members. Seminar reports were provided based on the focus of the seminar itself to all who attended. On average, 10 to 40 members attended the 63 regular seminars offered in 2004 and around 200 attended the two annual conferences offered.

Since the Celebrate Research Project’s inception, a database has been developed that provides a direct download from the IRB’s main database. As a result, the download provides read only information regarding new trials activated by the IRB. Disease specific categories and drop down tables were developed for the International Classification of Disease, 9th Revision (ICD-9), the Diagnostic and Statistical Manual of Mental Disorders (DSM) coding and recruiting status. Coding was utilized to make the
database searchable. The coding systems were selected based on their proven track record in the medical field and since both schemes are constantly being updated to represent current medical diagnosis. Recruiting status was essential to ensure members had an opportunity to participate in research and not just receive information on UCHC activities. A filing system was also developed to provide hard files that could be updated with recruiting status and IRB approved ads. An initial e-mail was sent to all health center principle investigators in November of 2002 informing them about the database and requesting they provide the Celebrate Research Project with specific information on the form provided.

Once developed, the Celebrate Research Project was made significant improvements to the database. Some of these included the generation of recruitment reports that provided a table of information for each recruiting trial at the Health Center. A “Closed” download was also developed. The download automatically updated the recruiting status of a specific study based on the IRB designation of “Closed” directly from the IRB database. Finally, a link to the UCHC Clinical Trials was placed on the Celebrate Women website to increase exposure to members. With these developing improvements, the project is now prepared to examine the procedures and processes developed to maintain the database and determine if they are consistent with organizational goals.
CDC Framework for Program Evaluation in Public Health

As a recommendation to improve the quality of public health programs the CDC has published their own procedures concerning public health program evaluation based on the Joint Committee Program Evaluation Standards. These standards focused on utility, feasibility, propriety, and accuracy as key standards to determine an effective evaluation. The CDC wanted to make sure evaluation served the needs of intended users, was realistic, frugal, diplomatic and prudent, maintained a legal and ethical regard for the welfare of all involved and affected, and provided accurate information respectively. (Sanders, 1994) Six steps were identified for this evaluation practice: 1) Engage stakeholders; 2) Describe the program (or program theoretical framework); 3) Focus the design; 4) Gather credible evidence; 5) Justify conclusions and 6) Ensure utilization and disseminate information. (Figure 1) This model was utilized for the Celebrate Research Project.

Figure 1 CDC Framework for Program Evaluation

©CDC
Step 1 - Engage Stakeholders

"Evaluation cannot be done in isolation." (Center for the Advancement of Community Based Public Health (CBPH), 2000) Public health initiatives involve partnerships either between organizations and a community or between organizational departments in a particular facility. Therefore, the values of those involved in the program should be accounted for when a program evaluation is initiated so their unique perspectives are understood and the evaluation specifically addresses their needs and values. These involved parties are identified as the program's stakeholders.

Stakeholders are defined as individuals who have a direct interest in the evaluation process. This includes what will be learned from and done with the findings. Consequently, stakeholders fall into two categories: those involved in implementing the project or those served by the project. For the list of stakeholders to be complete, both categories are represented, and a list of primary users identified from those lists. Primary users are specific stakeholders responsible for making decisions with results from the evaluation. An illustration of the relationship between the categories is demonstrated in Figure 2.

Figure 2 Stakeholder Categories

<table>
<thead>
<tr>
<th>Types of Stakeholders</th>
<th>(Implementers)</th>
<th>(Users)</th>
<th>(Recipients)</th>
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<tr>
<td>Those involved in implementing</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>the program</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Primary users of the evaluation</td>
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<td></td>
<td></td>
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<tr>
<td>Those served or affected by the</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>program</td>
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©CBPH
Stakeholders for the *Celebrate Research Project Evaluation* were identified based on the criteria listed above. They were selected based on the projects overall goal which was to examine program operations for the project in the "real world" and offer suggestions for improvement. The "real world" described for the *Celebrate Research Project* was limited to the program operations and included the University of Connecticut Health Center, the Celebrate Women program, and the Celebrate Women community. Stakeholders were limited to these communities and since the primary focus examined "real world" project operations stakeholders, were limited to individuals directly involved in the project’s implementation. Those selected included individuals supporting the programs operations and primary decision makers as exemplified in Table 1.

**Table 1 Stakeholder Listing**

<table>
<thead>
<tr>
<th>Implementers</th>
<th>Stakeholder Listing</th>
<th>Recipients</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Department</strong></td>
<td>Name</td>
<td>Celebrate Women Members</td>
</tr>
<tr>
<td>Celebrate Women</td>
<td>Director*</td>
<td>University of Connecticut Health Center</td>
</tr>
<tr>
<td>Information Technology</td>
<td>Executive Assistant</td>
<td>Research Community</td>
</tr>
<tr>
<td>Information Technology</td>
<td>MPH Students*</td>
<td>Primary Investigators</td>
</tr>
<tr>
<td>Medical Records</td>
<td>Programmer</td>
<td>Other Employees</td>
</tr>
<tr>
<td>Research Community</td>
<td>Maintenance</td>
<td></td>
</tr>
<tr>
<td><strong>Institutional Review Board (IRB)</strong></td>
<td>HSPO** Coordinator</td>
<td></td>
</tr>
<tr>
<td><strong>Medical Records</strong></td>
<td>IRB Administrative</td>
<td></td>
</tr>
<tr>
<td><strong>Research Community</strong></td>
<td>Medical Coder</td>
<td></td>
</tr>
<tr>
<td><strong>Research Community</strong></td>
<td>Primary Investigators</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Other Employees</td>
<td></td>
</tr>
</tbody>
</table>

*Indicates Primary User
** Human Subjects Protection Office
The implementers of the *Celebrate Research Project* were directly involved in the process of maintaining the project's database.

- The Celebrate Women director and executive assistant run disease specific queries on the database for actively recruiting University of Connecticut Health Center (UCHC) clinical trial and provide the information to Celebrate Women members.
- Masters in Public Health (MPH) students maintain the database, collecting required information and inputting the updated information as needed.
- The I.T. programmer and maintenance individual created the database and are responsible for the programming which directly downloads information from the Institutional Review Board (IRB) mainframe into the *Celebrate Research Project* database.
- Both individuals in the IRB oversee the IRB files collected by MPH students for updates. These files include IRB approved ads and recruitment specifications for clinical trial approved by the IRB.
- The medical coder is responsible for supplying an ICD-9 code based on the information provided by the MPH students: Celebrate Women form (Appendix 1) and IRB approved study ad.

The recipients were individuals who reaped the benefits of the project. The first group was Celebrate Women members, for which the database was developed to provide information on recruiting trials at UCHC. The second set of recipients involved the center's research community, including but not limited to primary investigators, research nurses, research assistants and other clinical trial employees. These individuals provide
specific information for the database (recruiting status of their trials and study ad’s where applicable) but are also recipients as they receive free advertising to a specific population. For this reason they were not interviewed as stakeholders.

Of all these implementers and recipients, the Celebrate Women director and the MPH students are the primary users for this evaluation. They will utilize the results to implement new procedures to streamline the process and increase the benefits of the Celebrate Research Project. While the IRB office, medical records and research community may be utilized to aid in this process they do not hold the final say on decision making and therefore are not considered primary users. Since this was a small project the evaluation design was focused around the needs and values of the primary users only. This does limit the scope of the evaluation but since the evaluation focused on implementation measures a detailed description of programs processes was the primary requirement and a larger scope was not necessary. The primary users selected provided the focus of the evaluation and were responsible for the development of the evaluation questions.
Step 2 - Describe the Program

The description of a program determines the evaluation questions and methods used to investigate them. Parts of a program description include a statement of need, or what knowledge is necessary to solve the problem or issue. This includes who is affected by the problem or issue, the extent of the problem or issue, is the problem or issue changing and how is it changing. Another valuable part of a program description consists of the expectations of the program; or expected results such as immediate, intermediate and long term consequences. Expectations are comprised of the programs goals, objectives, mission, and vision as well as the resources available and the actions and strategies taken to meet the programs goals. Often times these will be already identified by programs in an initial needs-assessment or in the strategic plan for the program or project.

Working with the stakeholders identified in Step 1 a universal program definition is created based on the program’s theoretical background. Specifically, stakeholders are questioned regarding project goals and processes to establish an overall picture of the projects daily operations. Their interpretation of the program will be compared to actual program processes to determine who well they coincide. Program theoretical background includes written representations of the organizational hierarchy, service utilization plan and actual and conceptual hypotheses. (Appendix 2) For the Celebrate Research Project the implementers were questioned using a set of discussion topics found in Appendix 3. These discussions along with participant observation provided various insights which were used to describe different aspects of the project.
A list of each discussion topic was maintained. (See Appendix 3) Discussion summaries were examined for common themes to determine overall project goals, objectives, mission, resources, context and standards. A primary goal, objective and mission were established:

**Primary Mission:** Improve the health of women through high quality basic science and clinical research.

**Primary Goal:** Provide Celebrate Women member's information regarding trials at UCHC.

**Primary Objective:** Maintain an accurate database to provide information on clinical trials that can be disseminated to Celebrate Women members

A resource listing was established for the Celebrate Research Project. This list included, MPH students, a designated computer for student work, Celebrate Research Database, the medical coder for trial ICD-9 coding, IRB office, and basic office supplies. Items not included in this list are the current full time Celebrate Women employees. They were not included as they are a limited resource due to the time constraints and responsibilities the Celebrate Women program already entails. As a result, MPH students are solely responsible for the maintenance of the database.

The context places the Celebrate Research Project as an established project within the Women's Health Program of UCHC. Their history suggests that the project developed as a direct response to a request by the executive vice president to facilitate recruitment efforts of clinical trials at UCHC. The project itself is a multi-departmental collaboration between the IRB, Celebrate Women, IT, and medical records. It is interesting to note however, that an organizational plan developed by the Women's
Health Program as part of a presentation does not include the Celebrate Research Project as a department of Celebrate Women, whereas a similar organizational chart developed by the Celebrate Women’s office does include the project.

Another aspect of the Celebrate Research Project’s context involves the demographics of the Celebrate Women members themselves. 98% of the women live in Connecticut, with 52% living in the following towns: Bristol, Farmington/Unionville, Hartford, New Britain, and West Hartford/Elmwood. 48% of the members are between the ages of 35 and 55 and as of December, 30, 2004 47% of the members stated they wanted to receive more information on clinical trials.

Two standards were established for the Celebrate Research Project. One standard was evident from discussions with stakeholders and document review whereas the second standard was evident in the field notes. The first standard was accuracy. By accuracy stakeholders refer to the quality of the database itself and the reports that are generated from the database. For the project to be successful members must be provided with precise information regarding trials at the health center. This implies that the recruitment status needs to be correct, as well as the IRB ad, ICD-9 coding, and contact information.

The second standard that applies is timely dissemination. It was observed that many trials recruiting status change after a short period of time. As a result in order for the information to be adequately portrayed to Celebrate Women members it should be provided on a timely basis. This information will be provided by the average turn-around-time for one study from its initial download from the IRB database to final completion.
The two standards will be used to judge the efficiency of the Celebrate Research Project processes and for any recommendations that will be made in regards to the database and current processes. This may include new or alternate processes, a re-identification of project goals, and so forth.

A common visual representation used to represent a program description is an organizational flow chart. This chart lists the aspects and directionality of processes that lead from the problem or issue to the outcomes. (Appendix 4) Flow charts however are hard to analyze and a more accepted format is a logic model which separates program components into the categories in Figure 3. Often an organizational flow chart is modified into a logic model, as most of the information is present and needs to be interpreted.

Figure 3 One Path Logic Model Example

<table>
<thead>
<tr>
<th>Problem or issue</th>
<th>Inputs</th>
<th>Outputs</th>
<th>Short-term Outcomes</th>
<th>Intermediate Outcomes</th>
<th>Long-term outcomes</th>
</tr>
</thead>
<tbody>
<tr>
<td>Celebrate Women members could be a valuable source for recruitment of clinical trials at UCHC.</td>
<td>If: There is an investment of time and money</td>
<td>To develop a process of providing members with information on recruiting clinical trials.</td>
<td>Then: Celebrate Women members will be informed about recruiting trials.</td>
<td>Then: Celebrate Women members will have access to these trials and could enroll in trials that meet their needs or interests.</td>
<td>Then: More Celebrate Women members will be recruited into UCHC clinical trials.</td>
</tr>
</tbody>
</table>

As shown in Figure 3 a logic model can be seen as an “If...then” statement. Once a problem is determined, If investments are made and activities are developed to meet the problem/issue, then certain short term effects will occur, followed by intermediate and then long term effects. Most programs are complex with multiple paths and outcomes.
Figure 4 Celebrate Research Project Program Action-Logic Model
In this instance the logic model revealed assumptions about program conditions for effectiveness not apparent in previous stakeholder discussions. Furthermore a frame of reference was provided and helped estimate program effects that were not directly measurable. Yet, they can be limited as they are based on interpretation of findings.

For example, if particular assumptions or external factors are not taken into account the model could be interpreted incorrectly to provide program errors or efficiency when the opposite might be true. This is where stakeholder confirmation is required. That is stakeholders should examine or be questioned on the theory to ensure that it adequately represents the project itself. In the case of the *Celebrate Research Project Evaluation* participant observation was utilized alongside stakeholder discussion to incorporate mundane project procedures that may not be readily apparent. Participant observation also provided a unique opportunity where stakeholder ideas and descriptions could be verified by actual occurrences.

While visual representations are most commonly used any format can be utilized to describe a program. Quite often the format of the program description is based upon the needs of the stakeholders and therefore regardless of the type of description developed, interaction with stakeholders is essential. However, since most public health programs are based on community needs-assessments a program description may already be available. This step in an evaluation may only require a re-examination of the previous assessment to determine if there have been any changes to be accounted for and/or a translation into the formats identified above for easier analysis. Yet, regardless of the format program theoretical background is the basis for the remainder of the evaluation.
Step 3 – Focus the Evaluation Design

Program description determines the extent of the evaluation and provides the data necessary to focus the evaluation design on particular project problems or issues. Hypotheses, or evaluation questions, are usually generated (unlike a hypothesis, evaluation questions are generally qualitative and their scope may not be as limited) and determine evaluation path including the users and uses of the evaluation, or the direct purpose of the evaluation. These are usually based on one or all of the programs own purposes or objectives.

Three objectives of the Celebrate Research Project are as follows:

1. Develop and maintain a Celebrate Research Project database on actively recruiting trials at the University of Connecticut Health Center that includes updated information on recruitment status, study criteria, ICD-9 coding, and scanned IRB approved ads.

2. Build up a relationship with the IRB and include the Celebrate Research Project information on the IRB application.

3. Develop a method to refer UCHC clinical practice patients to appropriate research projects.

The evaluation of the Celebrate Research Project focuses only on the first objective and how the current processes are meeting that objective. This evaluation was initiated to determine how well the Celebrate Research Project developed and maintained the database. The primary questions in this evaluation were determined by the primary users as:
• **Evaluation Question A:** Are the planned *Celebrate Research Project* processes providing timely and accurate information on recruiting clinical trials at the University of Connecticut Health Center to Celebrate Women members?

• **Evaluation Question B:** Are Celebrate Women members receiving reports and services from the *Celebrate Research Project*?

• **Evaluation Question C:** Are the *Celebrate Research Project* resources adequate to support important project processes?

The project was analyzed for repeating patterns and standards based on the processes that were previously described. The evaluation questions were formulated as part of a four step process adopted from evaluation framework provided by The Center for Advancement of Community Based Public Health demonstrated in Figure 5.

**Figure 4 The Four Step Focus**

<table>
<thead>
<tr>
<th>The Four Step Focus</th>
</tr>
</thead>
<tbody>
<tr>
<td>1 - Determine the information needs of the stakeholders</td>
</tr>
<tr>
<td>2 - Determine the best techniques to describe and measure program activities</td>
</tr>
<tr>
<td>3 - Choose a design method that answers the questions set by the stakeholders</td>
</tr>
<tr>
<td>4 - Determine the qualitative and quantitative data available</td>
</tr>
</tbody>
</table>

©CABPH

1 - **Determine the information needs of the stakeholders**

Since the evaluation focused primarily on the implementation of the *Celebrate Research Project* it was determined that the key stakeholders needed to know the details of current procedures. Consequently, processes of the program needed to be described in as much detail as possible and a logic model of the projects procedures resulted. To determine efficiency the program theoretical framework was compared to the key values of the stakeholders to determine if they were consistent. These values were identified as database accuracy and timely report generation. In conjunction determining if members were receiving services as intended and if the resources supported the processes required...
would help isolate where these services and processes could be improved if found to be lacking.

2 - **Determine the best techniques to describe and measure program activities**

The evaluation was limited to an eleven month period. Throughout that time one evaluator was responsible for all evaluation methodology. The *Celebrate Research Project* existed within an already established program, *Celebrate Women*. Celebrate Women employed two personnel responsible for running and maintaining the program. Limited personnel plus a full schedule created a busy atmosphere where disruption needed to be minimized. In response a mixed-qualitative approach was developed. Direct observation, participant observation, informal and guided stakeholder discussions, document review, progress monitoring and participant surveys were utilized to complete the analysis.

Each of these methods provided a specific insight which overlapped to ensure an accurate depiction of the program theoretical framework for comparison. These methods were chosen because they were the most beneficial for determining process goals and objectives. They also required minimal personnel commitment and could be employed by one evaluator. Furthermore, since one of the programs essential personnel was a temporary position and the program itself was in a dynamic state of change it became difficult to quantify meanings and procedure descriptions. The ethnographic aspect of the study was added due to available knowledge and training in anthropological methodology.
3 - Choose a design method that answers the questions set by the stakeholders.

To answer evaluation question A, accuracy and timeliness of program processes was determined by monitoring specific attributes of the database. Database snapshots were taken at periodic intervals within the evaluation process including onset of the program, onset of the evaluation, and end of the evaluation. Snapshots consisted of identify markers as identified and defined in table 2.

Table 2 Components of Database Snapshots

<table>
<thead>
<tr>
<th>Component</th>
<th>Definition</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total # of Active Trials</td>
<td>All trials consider active by the IRB. Includes trials that are recruiting and not recruiting.</td>
</tr>
<tr>
<td>Completed Files</td>
<td>Are recruiting trials that have:</td>
</tr>
<tr>
<td></td>
<td>1. Defined recruiting status</td>
</tr>
<tr>
<td></td>
<td>2. Ad present (if applicable)</td>
</tr>
<tr>
<td></td>
<td>3. Ad had been coded by medical records</td>
</tr>
</tbody>
</table>

These snapshots were then compared to determine the percent change of active trials recorded in the database as well as the percent change of completed files. Active trials were identified as any trial considered active by the IRB. This included trials that were classified as recruiting, not recruiting, and suspended, and excluded trials identified as closed. Completed files were any file that had a correct depiction of recruiting status, a copy of an IRB approved ad which was scanned and hyperlinked in the database, and was coded by medical records with the coding entered into the database. Only studies that were recruiting contained the latter two items to be completed. Not recruiting and closed studies were completed once that particular recruiting status was identified.

Surveys were used to answer evaluation question B and determine if Celebrate Women members were receiving reports and services from the Celebrate Research Project based on their specific research topic interests. A more detailed description of
intended survey procedures is found on page 33 and copy of the survey is presented in Appendix 5. The responses were analyzed to determine overall participant interest. However, there was a low response rate (under 1%) and therefore the results were not used to analyze the Celebrate Research Project although a tally of the results is provided in Appendix 6.

The final evaluation question, C, required a larger investment than the previous questions. To determine if the Celebrate Research Project had adequate resources a comparison was done of the program description to initial goals and intentions of the project. The program description and initial goals were determined through various procedures including direct observation, participant observation, document review and stakeholder discussion.

Direct observation and participant observation were the first methods utilized in the evaluation process. At first two Masters in Public Health (MPH) students were observed going through their procedures to update the database. Observations were noted in a process similar to an ethnographer’s field notes. By utilizing objective methods of evaluation, even a member of the project is able to identify recurring patterns of behavior not normally observed in everyday work. As a first step in the evaluation process direct observation provided a unique insight that can be utilized later to determine process characteristics that are too “mundane” to be noticed internally.

Participant observation occurred after the initial observation and required the evaluator to immerse herself in the Celebrate Research Project processes. This unique type of observation provides insight that limits “observation bias.” That is participant behaviors should not be affected by the presence of an observer who is also a participant.
Both types of observation benefited from the use of ethnographic field notes. This included a less formal form of jotted observations and personal notes. As noted by many anthropologists "first impressions" are key to understanding the inherent culture of a society. They provide insight that individuals involved in the day to day activity of the "culture" may take for granted and not be able to identify specifically. Individuals and processes observed throughout the project were recorded at the end of each experience and set aside for later analysis. Observer bias was limited by comparison of field notes to document review and stakeholder discussions.

Another method of obtaining information on process organization was through the analysis of program documents. These included presentations, mission statements, action plans, budgets, student documents, et cetera. The documents were coded and analyzed in the same manner as the project’s field notes to determine the step process and overall goals and objectives of the project. A more detailed description of the coding procedure is found on page 34. The results of these observations and documents were used to frame questions that would be asked of specific stakeholders through informal discussion meant to engage stakeholders.

An interview schedule was not developed for the evaluation. Due to the qualitative nature and short time frame of the evaluation the rigor involved in an interview schedule was seen as a drawback. Instead a series of topics was developed to direct the discussion with stakeholders, specifically the implementers and primary users of the Celebrate Research Project. More information on discussion selection is found on page 37. Topics were selected based on specific individual and departmental involvement. For example, primary users were asked about specific goals or missions of
the project and students and departmental representatives were asked how they went
about completing specific tasks. This method provided a degree of flexibility which
promoted better descriptions of the projects, mission, goals, objectives and processes
without restrictions to categories. (See Appendix 3 for a more detailed listing of
discussion topics and questions.) The answers to these questions focused the remainder
of the evaluation efforts on specific project processes to determine if the primary

*Celebrate Research Project* objective was being met.

4 - Determine the qualitative and quantitative data available

There are several types of data that are sought out in evaluation. Sources of
evidence are the most popular type. These include the people, documents or observations
which can be utilized to determine the effectiveness of a program's objective. A
particular source used for this evaluation was indicators, or categories of change that are
used to judge the program. For example, hours of one MPH student were written out in
detail. They were then coded based on four different aspects of the process and evaluated
to determine where students spent most of their time in the process. This determined the
key process categories that would be utilized to code the remainder of the evaluation
data. Comparing the division of labor to the project's original goals and intentions would
determine if the project had adequate resources to complete its intended goal.

In conclusion the evaluation methodology selected to answer the evaluation
questions determined by the primary users of the *Celebrate Research Project* provide
mostly qualitative data. ‘Implementer’ stakeholders were available for discussion to
determine the project's original design and intent, project documents provided insight into
original project intentions, and student observations offered insight on process
particulars. Therefore, observational field notes, project documents and discussion summaries were the primary data sources available. Summative reports, or database snapshots, were also available to compare changes in accuracy over time.

When an evaluation is in the process of focusing its final design alterations can be made. The evaluation can even be halted at this point depending on the rigor required by the organization. For example, by adequately describing its program theoretical background, an organization may realize they are not reaching the audience they intended. They can then halt evaluation efforts and readjust their program as needed. Therefore, by only doing steps one through three they may be able to fix particular program aspects or even decide that the program is working just fine as it is. However, analyzing the program on some level is essential in order to determine if the program is indeed reaching its goals as intended. As a result, the CDC evaluation steps are not rigid and do not have to be completed in order to provide a public health program with valued information adding flexibility as one of its charms.
Step 4 – Gather Credible Evidence

For programs that require a more thorough evaluation, data is collected and analyzed to answer the stakeholders’ evaluation questions. While an evaluation can utilize qualitative designs, quantitative designs, or a design that mixes both methods, mixed-method approaches are the most common. The type of data collected is based on the focus of the design from the previous information provided by project stakeholders identified in Step 1.

Evaluation Question A: Are the planned Celebrate Research Project processes providing timely and accurate information on recruiting clinical trials at the University of Connecticut Health Center to Celebrate Women members?

In combination with the logic model, accuracy was determined by comparing snapshots of the database for the percent change of active trials recorded in the database as well as the percent change of completed files. Active trials included recruiting and not recruiting trials so long as their IRB status remained open. Completed files contained the following: defined recruiting status, IRB approved and present (if applicable), and coding from medical records.

Table 3 Celebrate Research Project Progress Overview

<table>
<thead>
<tr>
<th></th>
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<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>2/20</td>
<td>4/20</td>
<td>5/1</td>
<td>3/9</td>
<td>4/5</td>
<td>4/28</td>
<td>5/12</td>
<td>9/21</td>
<td>10/19</td>
<td>11/16*</td>
</tr>
<tr>
<td>Total #</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Active Trials</td>
<td>620</td>
<td>585</td>
<td>640</td>
<td>651</td>
<td>725</td>
<td>544</td>
<td>483</td>
<td>526</td>
<td>608</td>
<td>622</td>
</tr>
<tr>
<td>Completed</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Files</td>
<td>-</td>
<td>-</td>
<td>14</td>
<td>-</td>
<td>181</td>
<td>-</td>
<td>441</td>
<td>581</td>
<td>864</td>
<td>583</td>
</tr>
<tr>
<td>% Change</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Active Trials</td>
<td>N/A</td>
<td>-6%</td>
<td>9%</td>
<td>2%</td>
<td>12%</td>
<td>-25%</td>
<td>-12%</td>
<td>9%</td>
<td>16%</td>
<td>2%</td>
</tr>
<tr>
<td>Completed</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Files</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>N/A</td>
<td>143%</td>
<td>32%</td>
<td>49%</td>
<td>6%**</td>
</tr>
</tbody>
</table>

*Report format changed to only include not recruiting and recruiting studies.

** Based on Completed file number of 916 calculated from the database.
Two gaps were represented in the data collected. The first gap was between 2003 and 2004. This gap is due to the lack of tracking data available from the first semester of the project until the evaluation started in 2004. The second gap is located from May of 2004 to September 2004. This gap is due to the decrease of updating activity that occurred over the summer and the lack of significant monitoring procedures for that time frame. The progress of the database was not able to be determined until September 2004 due to the heavy updating schedule that was being maintained by the two MPH students involved.

A current more detailed snapshot of the database breaks down the number of active trials to its recruiting, and not recruiting components. It also breaks down completion into its separate components and shows the date of last contact. This snapshot indicates that as of 2/16/05 a total of 621 trials were listed as active, with 135 of these recruiting. Only 33 of these files are listed as incomplete with 19 studies having recruitment status listed as unknown.

<table>
<thead>
<tr>
<th>Table 4 Celebrate Research Project Current Database Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program Started January 2003</td>
</tr>
<tr>
<td>2/16/2005</td>
</tr>
<tr>
<td>Total # Active Trials</td>
</tr>
<tr>
<td>Recruiting</td>
</tr>
<tr>
<td>Closed</td>
</tr>
<tr>
<td>Not Recruiting</td>
</tr>
<tr>
<td>Suspended</td>
</tr>
<tr>
<td>Unknown</td>
</tr>
<tr>
<td>Celebrate Research Form</td>
</tr>
<tr>
<td>Web</td>
</tr>
<tr>
<td>ICD-9 Coded</td>
</tr>
<tr>
<td>Completed Files</td>
</tr>
<tr>
<td>Incomplete Files</td>
</tr>
<tr>
<td># Contacts</td>
</tr>
<tr>
<td>Last communication Sent</td>
</tr>
<tr>
<td># Ad's Scanned and Linked</td>
</tr>
<tr>
<td>% Change Active Trials</td>
</tr>
</tbody>
</table>
**Evaluation Question B:** Are Celebrate Women members receiving reports and services from the Celebrate Research Project?

Surveys were used to answer evaluation question B and determine if Celebrate Women members were receiving reports and services from the *Celebrate Research Project* based on their specific research topic interests. A copy of the survey is presented in Appendix 5. All 9,000 Celebrate Women members received a copy of the survey in the *Celebrate News* mailing, while those members that had selected to receive the e-mail (approximately half of the total members) newsletter received the survey an additional time. The responses were to be analyzed to determine overall participant interest and compare that interest to the types of clinical trials offered in previous newsletter and at seminars to see if adequate services were being supplied. However, there was a low response rate (under 1%) and therefore the results were not used to analyze the *Celebrate Research Project* although a tally of the results is provided in Appendix 6.

**Evaluation Question C:** Are the Celebrate Research Project resources adequate to support important project processes?

Field notes, project documents and stakeholder discussion summaries were collected for analysis. Key process categories were determined based on how MPH students spent the majority of their time working on the project. The evaluator utilized these categories to code the field notes, project documents and discussion summaries and determine how much time students spent on essential *Celebrate Research Project* procedures.

Key process categories were either related to IRB interactions, medical records interactions, contacting investigators, or were administrative in nature. Definitions for each category are listed in Table 2. An additional category related specifically to updating the database was added later to account for a large discrepancy between
administrative activities and the remaining processes. Mission statements, goals, objectives, and outcomes were recorded and then compared to determine overall themes. The main weakness of this procedure is that results are not directly quantifiable. However as this involves an interpretation of program goals, resources and processes quantification is not necessary and not beneficial.

Table 5 Celebrate Research Project Process Category Descriptions

<table>
<thead>
<tr>
<th>Celebrate Research Project Process Category Descriptions</th>
</tr>
</thead>
<tbody>
<tr>
<td>IRB</td>
</tr>
<tr>
<td>Activities involving collecting documents from the IRB</td>
</tr>
<tr>
<td>Any communiqués between the IRB and Celebrate Women regarding the Celebrate Research Project.</td>
</tr>
</tbody>
</table>

One student’s work hours for 16 weeks were further analyzed to determine how much time a student spends on particular activities. This student primarily dealt with administrative tasks and with contacting the study investigators. As a result, the administrative tasks were broken into three separate categories: review, database updating and other.

Review was defined as any time the student reviewed responses from contacts, overviewed the database for information on study trials, or any other type of data purview. Database updating consisted of any time the student physically updated...
purview. Database updating consisted of any time the student physically updated information in the database and other was reserved for administrative tasks such as filing, or completing paperwork.

Table 6: Celebrate Research Project Student's Hours Categorical Tally

<table>
<thead>
<tr>
<th></th>
<th>Hours Spent on Review</th>
<th>Hours spent Updating</th>
<th>Hours Spent on Administrative Tasks</th>
<th>Hours Spent Contacting Study Representatives</th>
<th>IRB/ MR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Totals</td>
<td>43.0</td>
<td>30.1</td>
<td>27.5</td>
<td>22.7</td>
<td>16.0</td>
</tr>
<tr>
<td>Average per week</td>
<td>4.7</td>
<td>4.3</td>
<td>4.2</td>
<td>3.2</td>
<td>1.0</td>
</tr>
<tr>
<td>Percent total work</td>
<td>30.8%</td>
<td>21.6%</td>
<td>19.7%</td>
<td>16.3%</td>
<td>11.5%</td>
</tr>
</tbody>
</table>

Table 5 shows the results of this analysis. The highlighted column shows another students hours on IRB and MR activities so that the percentage of work could be calculated for all processes, and not just the processes by one student. As the table shows most time was spent on review and updating.

Field notes

Observation procedures started January of 2004 and continued through December of that same year. 201 pages of field notes were collected for 269 hours of observation which occurred an average of 2 times a week at 4 hour intervals over 46 weeks. Data was analyzed for recurring goals and objectives, as well as identification of one of the following sets of processes:

- IRB related
- Medical records related
- Relating to contacting study investigators
- Administrative related.

A tally was recorded for each type of process and the results can be found in Table 6.
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Table 6 Celebrate Research Project Student’s Hours Categorical Tally

<table>
<thead>
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<td>4.3</td>
<td>4.2</td>
<td>3.2</td>
<td>1.0</td>
</tr>
<tr>
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- IRB related
- Medical records related
- Relating to contacting study investigators
- Administrative related.

A tally was recorded for each type of process and the results can be found in Table 6
A majority of the focus was split between contacting investigators and administrative tasks, primarily other.

**Document review**

Document review was initiated at the start of the evaluation. 91 pages of documents were collected from students and primary users. Many were copied off of the network drive and printed for analysis. Various types of documents were included for analysis, with the majority (20%) being presentations offered by Celebrate Women employees. The distribution of documents is represented in Table 7.

**Table 8 Celebrate Research Project Document Distribution**

<table>
<thead>
<tr>
<th>Document Type</th>
<th># Pages</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student prepared manuals/guides</td>
<td>9</td>
<td>10%</td>
</tr>
<tr>
<td>Work plans</td>
<td>2</td>
<td>2%</td>
</tr>
<tr>
<td>Monthly Statistic Reports</td>
<td>2</td>
<td>2%</td>
</tr>
<tr>
<td>Annual Reports</td>
<td>8</td>
<td>9%</td>
</tr>
<tr>
<td>Strategic Plans/Project Descriptions</td>
<td>12</td>
<td>13%</td>
</tr>
<tr>
<td>Meeting Minutes</td>
<td>3</td>
<td>3%</td>
</tr>
<tr>
<td>Student Hour logs</td>
<td>17</td>
<td>19%</td>
</tr>
<tr>
<td>Student Correspondence</td>
<td>15</td>
<td>16%</td>
</tr>
<tr>
<td>Presentations</td>
<td>17</td>
<td>19%</td>
</tr>
<tr>
<td>Database recruitment reports</td>
<td>6</td>
<td>7%</td>
</tr>
<tr>
<td>Total</td>
<td>91</td>
<td>100%</td>
</tr>
</tbody>
</table>
The data was analyzed and coded for recurring processes to determine if the distribution of student’s hours compared to the references in project documents.

**Table 9 Celebrate Research Project Document Review Categorical Tally**

<table>
<thead>
<tr>
<th>Document Review Categorical Tally</th>
<th>IRB Related</th>
<th>Medical Records Related</th>
<th>Contacting Investigator</th>
<th>Administrative Other</th>
<th>Updating Database</th>
</tr>
</thead>
<tbody>
<tr>
<td>Update Database</td>
<td>33</td>
<td>36</td>
<td>40</td>
<td>47</td>
<td>34</td>
</tr>
<tr>
<td>% of Total</td>
<td>17%</td>
<td>19%</td>
<td>21%</td>
<td>25%</td>
<td>18%</td>
</tr>
</tbody>
</table>

Once these processes were identified and confirmed in the document review and field note analysis they were compared to the resources outlined in the program description to determine if they were adequate to meet the goals of the program.

**Discussion Summaries**

Nineteen discussions were performed throughout the evaluation process. Most of the discussions were informal, with only 4 guided by specific topics. Thirteen pages of summaries were available for analysis accounting for representing 13 of the 19. Each discussion lasted an average of 1.5 hours. Participants were selected based on their role in the implementation process of the project. Overall 8 separate individuals took part in the discussion representing 4 of the 5 implementers identified. Table 10 shows the distribution in the departments.

**Table 10 Discussion Participant Departmental Distribution**

<table>
<thead>
<tr>
<th>Discussion Participant Departmental Distribution</th>
<th>Number of Discussion Participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>Department</td>
<td></td>
</tr>
<tr>
<td>Celebrate Women</td>
<td>3</td>
</tr>
<tr>
<td>Information Technology</td>
<td>1</td>
</tr>
<tr>
<td>Institutional Review Board (IRB)</td>
<td>3</td>
</tr>
<tr>
<td>Medical Records</td>
<td>1</td>
</tr>
</tbody>
</table>

The research community was excluded from this list due to their unique situation as both implementer and recipient. Discussion summaries were used primarily to identify project
missions, goals, objectives and stakeholder values then procedure distribution. These goals and values would be used as "judgments" to justify conclusions.

To increase credibility for this evaluation several methods were implemented as described. Each of these methods provided a specific insight which overlapped to ensure an accurate depiction of the program theoretical background for comparison. Validity and reliability relied on the skills of the individual conducting the evaluation. Since these items are hard to verify evaluations are judged based on 4 separate criteria: credibility, transferability, dependability and confirmability. (Dereshiwasky, 1999)

Credibility and transferability are based on the level of description provided by the evaluator. To be credible the study needs to provide enough description so the boundary and parameters of the program are well specified. Increasing the credibility also allows for other programs to apply the findings to their own settings and determine if the study fits. This is identified as analytic generalizeability. In the case of the Celebrate Research Project multiple methods of documentation were provided to describe the programs processes and objectives. This provided a certain degree of credibility. Transferability was enhanced with this level of documentation and also by utilizing a proven model offered by the CDC. (CDC Framework for Program Evaluation in Public Health) This model has been used by multiple organizations and therefore has a track record that can be identified by other programs wishing to utilize this model.

Unexpected outcomes were also identified successfully thus increasing dependability. However, objectivity was limited as only one evaluator was utilized, the findings were not edited by third parties, and no objecting stakeholders were involved.
Nevertheless, the multiple procedures used and a final meta-evaluation were able to re-establish objectivity and increase the overall reliability and validity of the project.
Step 5 – Justify Conclusions

Once results are analyzed, conclusions are made based on the stakeholders perspectives. These conclusions need to be justified by evaluators meaning they are linked to the evidence gathered and judged by stakeholders’ values. As a result, evaluation results increase their utility and are more likely to be used with more confidence by the primary users of the evaluation.

One method of ensuring justified conclusions is to present these conclusions along with the strengths and weaknesses of each set of conclusions. These conclusions are based on program standards, which reflect what the stakeholders’ value about the program. For example the program standards of the Celebrate Research Project revolve around accuracy and timely dissemination of reports to Celebrate Women members. Findings are interpreted and then compared to these values to provide judgments on current program efficiency. The Celebrate Research Project Evaluation report provides a detailed explanation of the Celebrate Research Project conclusions and justifications.

**Evaluation Question A:** Are the planned Celebrate Research Project processes providing timely and accurate information on recruiting clinical trials at the University of Connecticut Center to Celebrate Women members?

Upon examination, the Celebrate Research Project properly focused on maintaining an accurate database. Maintaining an accurate database required collection of up-to-date information. Hence, one would expect a lot of time spent on updating the database and contacting investigators to determine a research trial’s current status. Accuracy processes for the project were defined as “Contacting Investigators” and “Updating the database” as both were essential for keeping the information up to date. From the results we calculated a rough percentage of the categorical tally of the
“accuracy” categories and compared them to the percentages of the remaining categories. “Contacting investigators” and “Updating the database” were mentioned in 39% of the Celebrate Research Project documents, and 36% in observation field notes. An example of the distribution in document review is presented in Figure 6. A similar distribution was found in the field notes.

Figure 5 Distribution of Stakeholder Focus on Accuracy in Project Documents

These activities are one-third of the overall process. Therefore, the Celebrate Research Project consisted of processes that maintained the databases accuracy. Furthermore, a database that is accurate would have a high percentage of “completed” files.

Results show that 3 months into the evaluation only 19% of the files in the database were listed as complete. This means that recruiting status was known, an IRB approved ad was present (if applicable) and the ad had been coded. Even after the database was updated to represent all “closed trials” only 47% were completed.

Consequently, the database did not represent the current research community at UCHC. This inadequate representation resulted primarily from a lack of consistent employment.
From August of 2004 to November of 2004, the database was undergoing major updating due to an increased backlog of non-updated files. It was not until October of 2004 that queries were developed and implemented to provide Celebrate Women members information on recruiting trials. Consequently, the database and program did not reach its primary objective of disseminating information until over a year after its inception. This was primarily due to the lack of consistent employment.

As noted, MPH students were primarily responsible for updating the Celebrate Research Project database as the two full time personnel were swamped with duties relating to Celebrate Women. Since, January 2003 there have been 6 students who worked on the database. These students worked for an average of one semester as part of their degree requirement. This implies that no work was done on the database during the summer or winter breaks. Furthermore, no concrete guidance of program processes was provided until a Student Manual was created in August of 2004.

Prior to August of 2004, students were required to figure out the process based on a complicated database form that no one had explained to them. This form included all of the sections relevant to the study but was not organized to represent the different processes involved in the project. (See Appendix 1) Furthermore, the filing system was complex as well with each student developing their own methodology. Consequently, several systems were in place and the next student had to not only translate the previous methods but develop their own to comply with the work requested.

These students were initially requested to work at least 10 hours a week. However, that was rarely the case. In fact no definite record could be ascertained in
regards to the hours of 2 students and estimations were made based on the school requirements and verbal confirmations.

With no system in place to deal with the high turnover of students it is logical the maintenance of the database fell behind as it did. Students were provided with limited guidance upon entry and at times when two students were working on the database, there were no clear goals or projects that were able to maximize their efforts. Consequently, the lack of consistency affected the accuracy and timeliness of the Celebrate Research Project. An accuracy report done by a stakeholder did however show after three months only 26% of the files in the database were still correct. Therefore, while the project’s processes should be built upon to maintain accuracy timeliness of the database needs to be maintained.

Timeliness is an additional requirement to accuracy. Although, not mentioned by the stakeholders as a program value, for the database to be an effective resource it needs to represent a snapshot of current activities within the research community. An accuracy report by one MPH student showed that after 3 months of no contact from the Celebrate Research Project, 35% of the actively recruiting studies were no longer recruiting or closed and only 26% remained accurate. Thus, with the large quantity of research undertaken by the University of Connecticut Health Center timely revision of the Celebrate Research Project database would prove a vast advantage. There are several potential reasons for the lack of timeliness.

One of the possible explanations would be a lack of support from research and clinical trial staff. Without their support and buy in, an accurate portrayal of UCHC research could not be painted. However, this does not seem to be the case as most
investigators are eager for assistance from the Celebrate Research Project. For example, out of 15 e-mails sent to investigators for database updating, 53% responded within 24 hours and only 27% did not respond at all. Separate explanations would include a lack of efficient needs-assessment, or even a high level of distrust for health research among Celebrate Women members. For example, some individuals may perceive participation in studies as a “lab rat” or “guinea pig” experience. Still, there are explanations that are more likely and evident from the evaluation. One likely explanation is the limited marketing of the project to UCHC investigators.

The Celebrate Research Project not only serves Celebrate Women members, but also serves investigators as a recruitment tool. Most investigators are happy for the opportunity and willing to provide information. This is evident as on average only 4 out of 15 contact efforts made are not responded to. However, this aspect of the program is not realized by members, nor has it been realized by two particular communities the project was supposed to address: UCHC clinical practices and UCHC division directors. That is, these departments are not aware of the Celebrate Research Project’s efforts.

On one occasion a particular investigator was contacted regarding their study. Their response was as follows “Wow, I wish this opportunity has presented itself earlier. . . Recruitment for this will be ending for this very soon.” Even though this project has been ongoing, this particular investigator who could have used this study did not know of its existence until contacted by the MPH student for information. The issue of timely dissemination created a missed opportunity for recruitment and was due to slow database updating.
Such missed opportunities occur throughout the project process. The UCHC community is unaware of the Celebrate Research Project and its benefits. Increased marketing efforts could promote the accuracy and timeliness of the project.

**Evaluation Question B:** Are Celebrate Women members receiving reports and services from the Celebrate Research Project

As previously stated the survey intended to answer evaluation question B had insufficient survey returns. While this disallowed for a proper conclusion it was noted that 47% of Celebrate Women members requested to be notified of recruiting trials at UCHC on their enrollment form. Women also received information on recruiting UCHC trials in two media formats and at seminars. During the time of the evaluation three newsletters were mailed to around 9,000 members, 11 email newsletters were sent to about 5,000 members and 63 seminars were held with over 1200 women attending. Ads for recruiting UCHC clinical trials were represented in each of these formats. Thus while women were receiving reports of recruiting clinical trial there is no evidence that direct services were being provided as a result of the Celebrate Research Project.

For the purposes of the evaluation services were identified as direct provision of recruiting trials to members on request. Women were not receiving reports as no queries were available to distinguish different disease categories until October of 2004. Up until this time recruiting studies were picked based on direct investigator request and basic identification from MPH students. Therefore, there is some room for improvement.

**Evaluation Question C:** Are the Celebrate Research project resources adequate to support important project processes?

Currently the Celebrate Research Project is under exposed and under funded. Stakeholder interviews with different collaborating departments showed minimal value
placed on the Celebrate Research Project. Also, Celebrate Women members and UCHC investigators were hardly aware of the project's efforts, funding was limited to nonexistent for the project as it was a part of the Celebrate Women budget. Upon examination of the Implementation Logic Model, several processes that were discussed in several documents and mentioned by students were missing.

Community Exposure

One of the critical success factors of any project is the exposure it receives within its community. The community for the Celebrate Research Project includes the collaborating departments (IRB, medical record, IT) and the research community. Each of these stakeholders was responsible for providing pertinent data on a timely basis. Since many of these departments did not place high priority on this project the overall exposure of the project was diminished.

At the early stages of the evaluation, four external stakeholders and project collaborators were interviewed in order to access particular program processes: IRB, the Information Technology department, and medical records. Each department placed a low priority on the program, and did not understand their role in the Celebrate Research Project.

When asked for a meeting and description of the current IRB database data entry system, the respondents were confused as to why the Celebrate Research Project needed this information. Since, the IRB database is the starting point for all of the projects efforts an important aspect to understand is how the IRB updates its own database and monitors its information. The IRB's response to the evaluators request shows that outside the program's inception the IRB had no comprehension of their role in the
Celebrate Research Project and placed little attention to the projects efforts.

Furthermore, after one particular school break, the IRB stopped leaving their information in the designated Celebrate Research Project area. They had assumed that this information was no longer needed without contacting the Celebrate Women’s office to confirm. Again, a low priority was placed on the Celebrate Research Project.

The Information Technology department was also questioned for a meeting. Particularly, they were asked questions concerning how the IRB and Celebrate Research Project databases were linked and how information was stored in the access database. There was initial confusion with this request, and the basic reply was “This is in our ISRequest system...It looks like a fairly low priority according to staff so I am not sure yet when this will be worked.” As in the case with the IRB, a low priority is placed on the Celebrate Research Project by external collaborators/stakeholders.

The medical records department plays a crucial role in maintaining the accuracy and utility of the Celebrate Research Project database. Their coding procedures are essential as they standardize the list of clinical trials so they may be queried and presented by disease. To maintain timeliness these records need to be coded and entered into the database on a reasonable scale. At one point during the evaluation process the turn around was almost 6 weeks. Inherently this was due to a busy schedule on the part of the coder, however, this indicates that the project has a low priority and file progress for the project can be delayed as a result.

Overall, the lack of buy in from these external collaborators/stakeholders illustrates that the Celebrate Research Project is under exposed in the community. If these departments that are a part of the project process are unaware of the importance of
their own roles then most other departments will not be aware of the program either. It does need to be noted that UCHC is a large community and the *Celebrate Research Project* is small compared to other endeavors within the community. Therefore, the lack of priority from these stakeholders is understandable. However, in order for the project to be maintained the *Celebrate Research Project* needs to increase its exposure and therefore increase buy-in from its external stakeholders and the UCHC community.

Furthermore, according to the document review information queried from the database was supposed to be disseminated to UCHC clinical practices and UCHC division directors. These two aspects of the program were absent from the Implementation Logic Model that was developed based on stakeholder interviews and field notes. Two other aspects of the program described in the document review were also not present. These were having a study investigator or representative speak at relevant seminars, and having MPH students assist investigators develop ads if one was not currently available. These processes were specifically excluded from a student guide written by one MPH student that worked on the project in the spring of 2004. All of these processes would increase the marketing of the program and increase the utilization of the program. Their absence is an indicator that effective utilization to the UCHC community is lacking.

**Funding**

Resources for the *Celebrate Research Project* are part of the Celebrate Women budget. These funds are limited, which makes the resources for the project limited as well. Several examples of resource constraints were evident throughout the evaluation.
To start, it was not until the summer of 2004 that a computer was designated as the *Celebrate Research Project* computer. Prior to that, students were sharing a computer with volunteers and the Celebrate Women staff. Students were also reliant on staff for entry into the Celebrate Women office. On three separate occasions students were not able to complete their work as either the office or the building were locked. Personnel limitations also affected the progress of the *Celebrate Research Project*.

On one occasion a volunteer was originally designated to help with the updating of the database. However, this individual was pulled aside for another project and was not able to provide assistance. Consequently, one student was responsible for maintaining the database and attempting to update over 500 trials in the database. Another aspect where funding was limited was in the polling of Celebrate Women members regarding their research interests.

In October of 2004, the *Celebrate Research Project* was finally able to implement a survey to their members. Funds were not available to send out an individual survey, nor was there sufficient time and space to advertise the survey available in the newsletter. Members were required to detach, and mail back these surveys utilizing their own stamp. Only 17 were returned whereas about 9,900 members received the newsletter. To increase the response rate the survey was included in the *E-Celebrate!* newsletter which was e-mailed to about 5,500 members. Only 23 responded. This placed the response rate under 1% and the results were deemed as inconclusive.

If adequate funding and resources had been obtained the survey would have been able to utilize more efficient means to maintain their database. They may have been able to offer a summer internship to decrease the lag time between students, or they may have
been able to send an individualized survey in order to increase the response rate from their members. Overall funding is essential for any projects success, and the *Celebrate Research Project* is lacking.

Unfortunately the qualitative nature of the *Celebrate Research Project Evaluation* requires the report prove itself to the community. Consequently, the results must prove to be credible. To increase credibility some alternative explanations are taken into account for some of these judgments and explain why the evidence does not support them. Also, providing a meta-evaluation, or evaluation analysis, will increase the credibility of the conclusions. In the case of the *Celebrate Research Project*, a meta-evaluation was substituted for a complete analysis of alternative solutions.

**Meta-evaluation**

Meta-evaluation is defined as an evaluation of an evaluation. Overall efficacy of the *Celebrate Research Project Evaluation* was determined by the Joint Committee Program Evaluation Standards of utility, feasibility, propriety and accuracy. Adherence to these standards was determined for each stage of the evaluation process: engage stakeholders, describe the program, focus the evaluation design, gather and analyze evidence, justify conclusions and ensure the use and share lessons learned. The meta-evaluation utilized a procedure adapted from Daniel Stufflebeam's "The Meta-evaluation Imperative." (Stufflebeam, 2001)

A new list of stakeholders was determined for the meta-evaluation reports. These included the exclusion and inclusion of different stakeholders previously determined in the *Celebrate Research Project Evaluation*. For the meta-evaluation the stakeholders were limited to the primary users of the evaluation. All other stakeholders were
eliminated as the results of the meta-evaluation were considered valuable only for the primary users of the evaluation. Primary users would be making decisions regarding the direction and scope of the project and therefore they would require knowledge on the credibility of the evaluation. Once the audience for the meta-evaluation report was finalized, stakeholders were then interviewed to determine their particular goals and questions in reference to the meta-evaluation.

The meta-evaluation questions were defined based on the interviews and then the meta-evaluation was refocused to gather the specific information. Particularly, they wanted to ensure adequate measures had been taken to identify the Celebrate Research Project process problems and project changes were based on accurate information. The Joint Committee Program Evaluation Standards were utilized to determine the overall effectiveness of the program.

Four primary standards were developed by a committee in 1974 and have been modified over the years to represent the essential qualities of a successful evaluation: utility, feasibility, propriety and accuracy. Utility standards ensure that an evaluation serves the needs of the intended users while feasibility focuses on more practical aspects of the evaluation and determines if it is realistic, prudent, diplomatic and frugal. Propriety standards require an evaluation is conducted legally, ethically and with regard for those involved in the evaluation and affected by the results. Finally, accuracy ensures an evaluation provides precise and true information is used to determine the worth or merit of the project.

Another document review was conducted to provide focused questions for a final stakeholder interview to fill in any gaps. All information collected was then analyzed to
determine the evaluations adherence to the Joint Committee Program Evaluation Standards utilizing a checklist developed by Stufflebeam et al.\textsuperscript{2}. This checklist employs a sliding scale based on the number of guidelines that are met by the evaluation, such that the more guidelines met the higher the rating for each category. (Appendix 11) These scales are then added up and converted into a percentage that describes the overall quality of the evaluation. For the evaluation to have successfully adhered to each step in the evaluation process must maintain at least a rating of “Good” (50\%) on the meta-evaluation checklist.

The following equation was used to assess the quality of each phase for each standard:

\textbf{Equation 1} \left\lfloor \left[ \frac{\text{(} \# \text{ of Excellent ratings} \times 4) + \text{(} \# \text{ of Very Good ratings} \times 3) + \text{(} \# \text{ of Good ratings} \times 2) + \text{(} \# \text{ of Fair ratings} \times 1) + \text{(} \# \text{ of Poor ratings} \times 0)\text{)} + \text{(} \# \text{ of possible ratings} \times 4)\text{)} \times 100\% \right] \right\rfloor

For the purposes of this equation poor ratings are left out as there is no additive value to those ratings. The categories for overall standard strength are as follows:

<table>
<thead>
<tr>
<th>Standard Strength Categories</th>
</tr>
</thead>
<tbody>
<tr>
<td>\textbf{Percentage of Guidelines Met}</td>
</tr>
<tr>
<td>\textbf{X \geq 93%}</td>
</tr>
<tr>
<td>\textbf{68% \leq X &lt; 93%}</td>
</tr>
<tr>
<td>\textbf{50% \leq X &lt; 68%}</td>
</tr>
<tr>
<td>\textbf{25% \leq X &lt; 50%}</td>
</tr>
<tr>
<td>\textbf{X &lt; 25%}</td>
</tr>
</tbody>
</table>

Once the meta-evaluation was completed the findings were then presented and interpreted to the primary stakeholders.

Meta-evaluations provide useful insight into the strength and credibility of an evaluation model. Examining the meta-evaluation results demonstrates the \textit{Celebrate

Research Project Evaluation's strengths and weaknesses at various steps of the evaluation. (See Table 10) Comparing the percentage of standard compliance at each step can determine which particular steps in the model lend themselves towards increasing credibility. The increased credibility demonstrates the effectiveness of the CDC Framework for Evaluation in Public Health within a small public health initiative.

Table 11 Step Compliance to Joint Committee Program Evaluation Standards

<table>
<thead>
<tr>
<th>Step Compliance to Joint Committee Program Evaluation Standards</th>
</tr>
</thead>
<tbody>
<tr>
<td>Step 1 - Engage Stakeholders</td>
</tr>
<tr>
<td>Utility % Standard Compliance 88%</td>
</tr>
<tr>
<td>Propriety % Standard Compliance 75%</td>
</tr>
<tr>
<td>Step Standard Compliance Met Yes</td>
</tr>
<tr>
<td>Step 2</td>
</tr>
<tr>
<td>Accuracy % Standard Compliance 88%</td>
</tr>
<tr>
<td>Propriety % Standard Compliance 100%</td>
</tr>
<tr>
<td>Step Standard Compliance Met Yes</td>
</tr>
<tr>
<td>Step 3</td>
</tr>
<tr>
<td>Utility % Standard Compliance 75%</td>
</tr>
<tr>
<td>Feasibility % Standard Compliance 83%</td>
</tr>
<tr>
<td>Propriety % Standard Compliance 100%</td>
</tr>
<tr>
<td>Accuracy % Standard Compliance 100%</td>
</tr>
<tr>
<td>Step Standard Compliance Met Yes</td>
</tr>
<tr>
<td>Step 4</td>
</tr>
<tr>
<td>Accuracy % Standard Compliance 60%</td>
</tr>
<tr>
<td>Step Standard Compliance Met Yes</td>
</tr>
<tr>
<td>Step 5</td>
</tr>
<tr>
<td>Utility % Standard Compliance 88%</td>
</tr>
<tr>
<td>Accuracy % Standard Compliance 88%</td>
</tr>
<tr>
<td>Step Standard Compliance Met Yes</td>
</tr>
<tr>
<td>Step 6</td>
</tr>
<tr>
<td>Utility % Standard Compliance 75%</td>
</tr>
<tr>
<td>Propriety % Standard Compliance 63%</td>
</tr>
<tr>
<td>Accuracy % Standard Compliance 88%</td>
</tr>
<tr>
<td>Step Standard Compliance Met Yes</td>
</tr>
</tbody>
</table>

Since each phase met the specific standards we can further support the use of the checklist in determining overall standard classification. When examining the Celebrate Research Program Evaluation as a whole the following percentages are found for utility, feasibility, propriety and accuracy.
Table 12 Celebrate Research Project Compliance with Joint Committee Program Evaluation Standards

<table>
<thead>
<tr>
<th>Joint Committee Program Evaluation Standard</th>
<th>Compliance Percentage (%)</th>
<th>Category Classification</th>
</tr>
</thead>
<tbody>
<tr>
<td>Utility</td>
<td>82</td>
<td>Very Good</td>
</tr>
<tr>
<td>Feasibility</td>
<td>83</td>
<td>Very Good</td>
</tr>
<tr>
<td>Propriety</td>
<td>78</td>
<td>Very Good</td>
</tr>
<tr>
<td>Accuracy</td>
<td>75</td>
<td>Very Good</td>
</tr>
</tbody>
</table>

So when compared to the tables provided for each section we can more clearly see where the break down occurred for the evaluation. A more detailed explanation can be found in Appendix 9.
Step 6 – Ensure Use & Share Lessons Learned

An evaluation is ineffectual until findings and recommendations are utilized by the stakeholders. There are many ways this can happen throughout the evaluation process and evaluators need to ensure it happens. Consequently, the evaluation results must be managed appropriately. Appropriate management requires stakeholders are made aware of evaluation procedures and findings, these findings are taken into consideration for program related decisions, and stakeholders and participants see the evaluation as beneficial. As a result the evaluator must make an effort to promote use and prevent misuse of the evaluation.

Preparation is made by getting stakeholders feedback on preliminary findings. This way stakeholders can provide re-interpretation or translation for items that may have been misunderstood. For example, the Celebrate Research Project logic model was presented to the primary users and adjusted based on their feedback before it was used to interpret program success. This was one instance of feedback, or communication that occurs throughout the evaluation process, maintained in the Celebrate Research Project Evaluation. Another example is the update reports that were provided after each phase of the evaluation. (See Appendix 7) Follow-up and dissemination of results occurs as well in the evaluation process, but occurs towards the end of the evaluation.

Follow-up implies the provision of support to users of information given from an evaluation. Primarily, it involves the interpretation of results to limit mis-use by stakeholders. This could be a follow-up meeting after a report was delivered to ensure that the results were understood and to provide feedback to any questions posed by the primary users. Dissemination is the process of distributing information to stakeholders in
a manner that is timely, consistent and un-biased. An example would be a summative final report provided to the stakeholders of the evaluation.

In the instance of the *Celebrate Research Project*, stakeholder desires for periodic updates created a bi-weekly scheme providing program information relevant to the past weeks activities. Update reports were also provided at the end of each phase describing completed tasks, future task, and any problems that were encountered. A final formative report was distributed at the end of the evaluation providing an overview of the entire evaluation.

Improper dissemination of information is a big barrier in the research community, including public health. Negative studies, or studies that do not receive a large enough participant buy in are never published, or the time between study completion and publication is lengthy. Consequently, many researchers are repeating studies or basing their programs or trials on faulty information, as is the case with the Abstinence programs in the United States noted earlier in the paper. As a result, by increasing the evaluation efforts of public health programs dissemination of information will increase and decrease the discrepancy of decision makers promoting faulty programs. To ensure extended use of the evaluation, the *Celebrate Research Project Evaluation* provided recommendations based on all three evaluation questions and their results.

The *Celebrate Research Project* has not been able to achieve its primary objectives and therefore has not been able to successfully achieve its primary goal. The database has not been accurately maintained and the current processes have not been utilized. However, the processes in place are deemed effective for the goals and objectives designed but the efficiency of the *Celebrate Research Project* is dependent on
consistent employment and buy-in from external stakeholders. As a result four recommendations have been made to improve the projects accuracy and efficiency.

1) **Simplification Initiative:** Simplify project procedures to ensure accuracy and timely dissemination.
   
   a) Simplify and standardize the administrative procedures for the project by developing a concrete student manual to explain the procedure to incoming students
   
   b) Require students to “orient” new students to the procedure.
   
   c) Simplify the form used for data entry.
   
   d) Automate as much of the process as possible.

2) **Researcher Initiative:** Maintain contact with UCHC research community to promote health research to CW members
   
   a) Presentation to UCHC research community
   
   b) Follow up survey/evaluation with researchers
   
   c) Development of a quarterly “Researcher” Newsletter
      
      i) Include “researcher spotlight” of different UCHC research divisions
      
      ii) Include Celebrate Research Project happenings and updates
   
   d) Include UCHC research initiatives in Celebrate Women newsletters
   
   e) Initiate focus group sessions to determine recruitment needs of UCHC research community
   
   f) Develop and implement semi-annual reporting strategy between Celebrate Research and the research community

3) **Marketing Initiative:** Increase CW exposure to internal and external community.
a) Report Tracking

b) Provide CW members with individualized reports on research activities at UCHC

c) Collaborate and offer “research” expositions to CW members

4) Self-sustaining Initiative: Increase external funding so that health research initiatives are self-sustaining.

a) Collect baseline data

b) Send individualized survey to Celebrate Women members determining research interests

c) Send individualized survey to UCHC researchers determining recruitment needs

d) Use data to obtain grant funding to further Celebrate Research initiatives

Each of these initiatives works to increase the exposure, marketing, utilization, funding, and employment of the Celebrate Research Project. They are made based on the conclusions discussed in previous sections. Increased support for the evaluation and its findings can be found in the subsequent meta-evaluation that was performed after implementation of the simplification initiative.
Implementation

At the completion of the Celebrate Research Project Evaluation, only one of the recommendations was implemented to streamline the project from August 2004 to December 2004. The results exemplified the benefits of evaluation utilization for Public Health programs.

The first implementation was the development of a student manual as a guide for incoming students. This development included a General Information page containing contact information, a Step-by-Step guide to the Celebrate Research Project process, and definitions of recruitment status. (Appendix 8) This guide was left near the Celebrate Research Project computer for the students to access at any time.

In addition to providing the manual, a student who has been working on the project was available to orient the new student to the project and for any questions that resulted. As a result, the new student acclimated to the program within 2 weeks, versus 4 weeks as had occurred the previous semester. The increase in acclimation time was complimented by an increase in database simplicity.

During the same timeframe the Celebrate Research Project database was simplified. The database form was edited to cluster the data entry by process. That is information related to medical records were clustered in one area of the form, contact information was clustered together as was information downloaded from the IRB. (See Appendix 9) Also, particular fields that “cluttered” the form were left out. This included detailed information on subject criteria, compensation, trial department, et cetera. All of this information was unnecessary for the Celebrate Research Project process and as most of it was downloaded by the IRB the information did not need to be updated on a regular
basis. However, the information was still available on the database table, and could be updated or queried as needed. Furthermore, two additional coding categories were added in relation to ICD-9 coding. These included, "healthy people" and "prevention." These categories were added to account for trials whose study are recruiting healthy individuals, and no ICD-9 coding can be provided by medical records.

In order to determine the effect of the Simplification Initiative the percentage change of "Unknown" files in the database were compared between two specific time periods. The time frame was 7 weeks for each.

<table>
<thead>
<tr>
<th>Table 14 Comparison of Change of &quot;Unknown&quot; files Before and After Implementation</th>
</tr>
</thead>
<tbody>
<tr>
<td>Change of Unknown Files Over Two 7-Week Periods</td>
</tr>
<tr>
<td># Unknown Files</td>
</tr>
<tr>
<td>% Change</td>
</tr>
</tbody>
</table>

The number of unknown files decreased 64% more after implementation then prior. During both 7 week time frames, 2 students were working on updating the database. Furthermore, during the first time period the database had just been updated to represent all of the "closed" studies listed by the IRB and may account for a majority of "unknown" file decrease. In either case, the implementation of the new procedures increased productivity and accuracy of the database. It is believed the main causes are the student interaction and the student manual. As a result of these items there was less of an adjustment period for the new student, and thus productivity occurred at an earlier stage then before.

Implementation of Simplification Initiative from the evaluation recommendations allowed the Celebrate Research Project to increase the efficiency and accuracy over a
relatively short time period. With such immediate benefits it seems logical that evaluation would prove a valuable asset to any public health program or initiative. Some may question the credibility of such evaluations, especially as the more accepted quantitative methodologies and quantification can be difficult. The *Celebrate Research Project Evaluation* is a great example of one such evaluation and as strengthened by following the meta-evaluation process to determine credibility and validity of the evaluation.
Conclusion

Evaluations do not have to be an expensive time consuming monster as many managers and companies may fear. Models exist, like the CDC Framework for Program Evaluation in Public Health, which are simple and flexible in nature. The case study evaluation of the Celebrate Research Project was done with minimal resource expenditure and still maintained credibility by conforming to set program evaluation standards.

The case study shows evaluations can be done internally as well as externally, that is an employee within the program or initiative can be responsible for a program evaluation, or an external party can be hired. Also, parts of the evaluation process, such as describing the program, have already been undergone by initiatives in a primary needs assessment prior to a program’s implementation. Therefore, this step in an evaluation may only require a re-examination of the previous assessment to determine if there have been any changes that must be accounted for and/or translated into a logic model or flow chart. As a result, the CDC evaluation steps are not rigid and do not have to be completed in order to provide a public health program with valued information adding a flexibility that offers multiple advantages and benefits to public health initiatives.

In the public health sector funding often needs to be justified by data or facts. Thus, an evaluation with well justified conclusions could argue for increased funding by providing “data” in qualitative conditions. Furthermore, solutions can be developed from an evaluation to streamline a program’s current organizational processes and decrease expenditures from ineffective measures. With the effectiveness of the programs implementation increased the potential for beneficial outcomes both short term and long.
term while limiting negative outcomes also increases. Therefore, evaluations can help to “promote” particular public health initiatives that may be currently failing and work to limit the risks involved for particular populations.

Being able to limit risks and negative outcomes will help to place an encouraging light on public health programs and projects. This may help to instill “trust” in suspicious communities. Thus, if the community is involved as a stakeholder in an initiatives evaluation, the evaluation can serve as a mediator improving the relationship. Therefore, as a whole this part of the evaluation process aides the program in making good decisions for the communities involved. It increases community access to public health principles and actions of particular initiatives, and therefore increases the prevalence of primary, secondary and tertiary measures in the community.

Adequate dissemination of information is a rising concern in the public health research community. (Owen, 2000) Negative studies, or studies that do not receive a large enough participant buy-in, are never published, or the time between study completion and publication is lengthy. Consequently, many researchers are repeating studies or basing their programs or trials on faulty information, as is the case with the Abstinence programs in the United States stated earlier in the paper. As a result, by increasing the evaluation efforts of public health programs dissemination of information will decrease the discrepancy of decision makers promoting faulty programs.

Increasing the quality of public health initiatives in this manner and properly fitting specific programs to community needs will improve the success of such initiatives. The results from there are almost boundless. Therefore, evaluation should not be discredited as invaluable to the public health community.
References


7) Kirby, D. *Do Abstinence-Only Programs Delay the Initiation of Sex Among Young People and Reduce Teen Pregnancy?* In: *National Campaign to Prevent Teen Pregnancy.*, Washington, DC. 2002


64


18) Stewart, Felicia H. Why we should “just say no” to exclusive “abstinence-only” funding. Contraception 2003 Jul (68): 231-2


Appendices

1 – Celebrate Women Form

2 – Program theoretical framework and Logic Model

3 – Discussion Topic Listing

4 – Flow Chart

5 – Celebrate Women Member Survey

6 – Celebrate Women Member Survey Results

7 – Meta-Evaluation Stakeholder Listings

8 – Evaluation Update Reports

9 - Student Manual: General information, Step-by-Step Process Guide, and Definitions of recruitment Status

10 – Celebrate Research Project access database forms, old and new

11 – Celebrate Research Project Meta-evaluation Checklist
Appendix 1
IRB/Celebrate Women Research Project Form

IRB # ___________________________ PI ________________________________

Name of Clinical Trial/Research Project:

________________________________________________________________________

Date Project Began: Project End Date:

Age Range of Subjects: Gender of Subjects: Male ☐ Female ☐

Estimated End Date for Recruitment:

Other Criteria:

Contact Person for Study: Contact Person Phone Number:

Contact Email:

**Advertisement:** If you have IRB-approved ad, please send a copy of stamped approved ad with
this form to our office – c/o Celebrate Research, MC4060. If you do not yet have an IRB-
approved ad, we have MPH students who are working on this project to assist you in preparing
the ad for submission to the IRB. Please call x7696 for help.

Would you like your study advertised on the UConn Web page as an active clinical trial?  
Yes ☐ No ☐

** If you know this information, please complete. Otherwise, leave blank.

Identifying ICD-9 Diagnosis Codes: DSM Codes:

1. From _____ To____

2. From _____ To____

3. From _____ To____

1. From _____ To____

2. From _____ To____

3. From _____ To____

Name: ___________________________________ Date:____

Printed Name: __________________________________
# Program Theoretical Framework

## Organizational Plan

### Celebrate Research Project Organizational Plan

1. **Outcomes hierarchy** - There are three major outcomes for the Celebrate Research Project:

   A. Ads for recruiting UCHC research studies are published in the Celebrate Women newsletter which provides members currently exposed to recruiting studies.
   
   B. Ads for recruiting UCHC studies are publicized on the Celebrate Women website, which provides members of the University of Connecticut Health Center.
   
   C. Ads for disease specific recruiting UCHC studies are presented to Celebrate Women members at disease specific seminars and activities. These ads encourage members to attend seminars and activities, which leads to increased attendance at seminars.

2. **Success criteria and definitions for each output**

   **Success Criteria** - For each outcome to be successful, specific criteria must be met. Celebrate Women members must be interested in the trial they are provided. They need to have enough information to call the contact numbers for the trials.

   **Definitions**:
   - UCHC research studies - are all University of Connecticut Health Center studies approved by the Institutional Review Board/DERC involving investigational study of disease related phenomena.
   - Recruiting - Studies that are actively seeking new enrollment by individuals not already a patient at John Dempsey Hospital.
   - Celebrate Women - free program offered to promote the education of women on various health related concerns.
   - Newsletter - quarterly mailing sent to all 10,100 members of Celebrate Women which includes articles on women's health issues, upcoming seminars and activities, and ads for recruiting UCHC studies.
   - E-Celebrate - Monthly email sent to 5,000 members including information on current women's health issues, upcoming seminars and activities, and ads for recruiting UCHC studies.
   - Increased enrollment - more members of Celebrate Women call interested in enrolling in studies.
   - Increased awareness - an equal amount of members expressed interest to the study investigator on a monthly basis.

3. **Factors within the control of the program that are likely to affect the outcomes**

   Factors within the control of the program include:
   - Presence of material and accuracy of the information offered.
   - Reason for evaluating the information.
   - Involvement of members in recruiting activities.
   - The program's internal processes.

4. **Factors outside the control of the program that may affect the outcomes**

   Factors outside the control of the program include:
   - Presence of material and accuracy of the information offered.
   - Reason for evaluating the information.
   - Involvement of members in recruiting activities.
   - The program's internal processes.

5. **Program activities and resources used to control the influence of both types of factors**

   The Celebrate Women program includes:
   - Celebrate Women newsletter.
   - Recruiting activities.
   - Celebrate Women website.
   - E-Celebrate.

6. **Performance information required to measure the success of the program**

   Performance information includes:
   - Number of members enrolled in the program.
   - Number of members interested in enrolling in the program.
   - Number of members who attended seminars and activities.

7. **Comparisons required to interpret performance indicators**

   Comparisons are required to interpret performance indicators:
   - Pre-test vs post-test.
   - Baseline vs current status.

---

**Appendix 2**

Program Theoretical Framework

<table>
<thead>
<tr>
<th>Program Theory</th>
<th>Impact Theory</th>
</tr>
</thead>
<tbody>
<tr>
<td>Process Theory</td>
<td>Impact Theory</td>
</tr>
</tbody>
</table>

**Organizational Plan**

<table>
<thead>
<tr>
<th>1. Outcome hierarchy - There are three major outcomes for the Celebrate Research Project</th>
</tr>
</thead>
<tbody>
<tr>
<td>A. Ads for recruiting UCHC research studies are published in the Celebrate Women newsletter which provides members currently exposed to recruiting studies.</td>
</tr>
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<td>B. Ads for recruiting UCHC studies are publicized on the Celebrate Women website, which provides members of the University of Connecticut Health Center.</td>
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</tr>
</tbody>
</table>

**Success criteria and definitions for each output**

**Success Criteria** - For each outcome to be successful, specific criteria must be met. Celebrate Women members must be interested in the trial they are provided. They need to have enough information to call the contact numbers for the trials.

**Definitions**:
- **UCHC research studies** - are all University of Connecticut Health Center studies approved by the Institutional Review Board/DERC involving investigational study of disease related phenomena.
- **Recruiting** - Studies that are actively seeking new enrollment by individuals not already a patient at John Dempsey Hospital.
- **Celebrate Women** - free program offered to promote the education of women on various health related concerns.
- **Newsletter** - quarterly mailing sent to all 10,100 members of Celebrate Women which includes articles on women's health issues, upcoming seminars and activities, and ads for recruiting UCHC studies.
- **E-Celebrate** - Monthly email sent to 5,000 members including information on current women's health issues, upcoming seminars and activities, and ads for recruiting UCHC studies.
- **Increased enrollment** - more members of Celebrate Women call interested in enrolling in studies.
- **Increased awareness** - an equal amount of members expressed interest to the study investigator on a monthly basis.

**Factors within the control of the program that are likely to affect the outcomes**

Factors within the control of the program include:
- Presence of material and accuracy of the information offered.
- Reason for evaluating the information.
- Involvement of members in recruiting activities.
- The program's internal processes.

**Factors outside the control of the program that may affect the outcomes**

Factors outside the control of the program include:
- Presence of material and accuracy of the information offered.
- Reason for evaluating the information.
- Involvement of members in recruiting activities.
- The program's internal processes.

**Program activities and resources used to control the influence of both types of factors**

The Celebrate Women program includes:
- Celebrate Women newsletter.
- Recruiting activities.
- Celebrate Women website.
- E-Celebrate.

**Performance information required to measure the success of the program**

Performance information includes:
- Number of members enrolled in the program.
- Number of members interested in enrolling in the program.
- Number of members who attended seminars and activities.

**Comparisons required to interpret performance indicators**

Comparisons are required to interpret performance indicators:
- Pre-test vs post-test.
- Baseline vs current status.
Service Utilization Plan

<table>
<thead>
<tr>
<th>Service Description</th>
<th>Yes / No</th>
<th>Further action</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Member received information on UCCH trial program</td>
<td>Yes / No</td>
<td>No further action</td>
</tr>
<tr>
<td>2. Interested in subject matter and willing to enroll</td>
<td>Yes / No</td>
<td>No further action</td>
</tr>
<tr>
<td>3. Requested information on recruiting trials at UCCH</td>
<td>Yes / No</td>
<td>No further action</td>
</tr>
<tr>
<td>4. Received a packet of information on recruiting trials at UCCH for review</td>
<td>Yes / No</td>
<td>No further action</td>
</tr>
<tr>
<td>5. Interested in more information on trials</td>
<td>Yes / No</td>
<td>No further action</td>
</tr>
<tr>
<td>6. Call contact provided for further information</td>
<td>Yes / No</td>
<td>No further action</td>
</tr>
</tbody>
</table>

Impact Theory

**Celebrate Research Project Impact Theory**

**Action Hypothesis**

- Providing Celebrate Women members with information on recruiting trials will influence members' motivation to enroll in trials.
- When Celebrate Women members are provided with information on recruiting trials, they will call the contacts for research trials.

**Conceptual Hypothesis**

- Increasing Celebrate Women members' motivation to enroll in trials will cause them to enroll in UCCH recruiting trials.
- Increasing calls from Celebrate Women members will increase the probability of enrolling them in UCCH research studies.
Appendix 3

Topic Guide for the *Celebrate Research Project Evaluation*

<table>
<thead>
<tr>
<th>Overall Topic Guide</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Long term goals of the program</td>
</tr>
<tr>
<td>2. Short term goals of the program</td>
</tr>
<tr>
<td>3. Current Priorities for the program</td>
</tr>
</tbody>
</table>

4/16/04 HSPO Administrator – IRB

What are the IRB definitions of not recruiting, recruiting, closed, and suspended studies?  
When is the IRB information put into the IRB database?  
Is data ever removed from the database?

7/28/04 Medical Coder – Medical Records  
What are your methods used for coding?  
How do you determine if you use a single code or a range of codes?  
Do you code by disease being studied or by participant criteria?

8/6/04 Maintenance – IT  
How are the IRB and CWR database linked?  
Can changes be made to the CWR access database without deleting the data already collected?

11/30/04 Last MPH student  
How were your hours spent at the Celebrate Research Project?  
What would help orient you better to the Celebrate Research Project process?  
What would you recommend to upcoming students who would work on the Celebrate Research Project?  
What improvements would you make to the Celebrate Research Project database?  
How would you improve the Celebrate research Project?  
Where could you see the Celebrate Research Project in a few years?
Celebrate Women Research Project

- Provides information regarding clinical study
- Determines study needs
- Study contact person
- Provides information on Clinical Study
- Celebrate Women Office/MPH Students
- Creates form and file for new clinical studies downloaded
- Solicits contact individual provided by Primary Investigator for recruitment status.
- If recruiting, obtains IRB approved ad for study
- Pi
  - Provides information regarding clinical study for approval
  - IRB
  - Approves Clinical Studies
  - Maintain database regarding active studies
  - Sends Ad and file to Medical records
  - Medical Records
  - IT Department
  - Downloads IRB database to CWResearch database
  - CWResearch Database
  - Query Database on Specific Condition ICD 9 Codes
  - Survey Members regarding desired knowledge on particular health condition
  - Provide results to Celebrate Women Members through Celebrate News, E-Celebrate and seminars
Appendix 5

Celebrate Research
As you know, *E-Celebrate!* includes information on clinical trials at the UConn Health Center. In order to best meet your areas of interest, please take a minute to complete the survey below. Please indicate those areas of research you would like us to include in upcoming issues of *E-Celebrate!*

Addiction: ______
Alcohol/Drug
   ______Gambling
   ______Smoking
   ______Alzheimer’s Disease/Dementia
   ______Bone Loss
Cancer: ______Breast
   ______Cervical/Uterine
   ______Lung
   ______Other
   ______Depression/Anxiety/Stress

Diabetes
   ______Heart Disease
   ______Hepatitis
   ______High Blood Pressure
   ______Lyme Disease
   ______Menopause
   ______Nutrition
   ______Obesity
   ______Pregnancy
   ______Other ______

Please email your areas of interest to celebrateresearch@exchange.uchc.edu. If you have any questions please call Celebrate Research at (860) 679-4572.
### Celebrate Research Survey Count

<table>
<thead>
<tr>
<th>Health Issue</th>
<th>Count</th>
<th>Frequency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Addiction</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>Alcohol/Drug</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Gambling</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Smoking</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Alzheimer's Disease/Dementia</td>
<td>15</td>
<td>8</td>
</tr>
<tr>
<td>Bone Loss</td>
<td>18</td>
<td>9</td>
</tr>
<tr>
<td>Cancer</td>
<td>18</td>
<td>9</td>
</tr>
<tr>
<td>Breast</td>
<td>10</td>
<td>5</td>
</tr>
<tr>
<td>Cervical/Uterine</td>
<td>3</td>
<td>2</td>
</tr>
<tr>
<td>Lung</td>
<td>4</td>
<td>2</td>
</tr>
<tr>
<td>Skin</td>
<td>10</td>
<td>5</td>
</tr>
<tr>
<td>Depression/Anxiety/Stress</td>
<td>20</td>
<td>10</td>
</tr>
<tr>
<td>Diabetes</td>
<td>10</td>
<td>5</td>
</tr>
<tr>
<td>Heart Disease</td>
<td>11</td>
<td>6</td>
</tr>
<tr>
<td>Hepatitis</td>
<td>2</td>
<td>1</td>
</tr>
<tr>
<td>High Blood Pressure</td>
<td>14</td>
<td>7</td>
</tr>
<tr>
<td>Lyme Disease</td>
<td>11</td>
<td>6</td>
</tr>
<tr>
<td>Menopause</td>
<td>14</td>
<td>7</td>
</tr>
<tr>
<td>Nutrition</td>
<td>18</td>
<td>9</td>
</tr>
<tr>
<td>Obesity</td>
<td>11</td>
<td>6</td>
</tr>
<tr>
<td>Pregnancy</td>
<td>1</td>
<td>1</td>
</tr>
</tbody>
</table>

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About 10%
Alzheimer's/Dementia
Bone loss
Cancer
Depression/Anxiety/Stress
High Blood Pressure
Menopause
Nutrition
<table>
<thead>
<tr>
<th>Cancer Other</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>Thyroid</td>
<td>New treatments for facial rejuvenation like lasers, topical, surgery. Female hair thinning</td>
</tr>
<tr>
<td>Bladder</td>
<td>Parkinson's</td>
</tr>
<tr>
<td>chronic lymphocytic leukemia</td>
<td>Vitamins, herbs</td>
</tr>
<tr>
<td></td>
<td>Post traumatic stress syndrome</td>
</tr>
<tr>
<td></td>
<td>migraines, PMS, Peri-menopause</td>
</tr>
<tr>
<td></td>
<td>Decreased sexual libido in menopausal women with progesterone patch</td>
</tr>
<tr>
<td></td>
<td>Depression in adults and depression or stresses on a care giver to a &quot;cranky&quot; parent</td>
</tr>
<tr>
<td></td>
<td>Hypoglycemia, (?) Joint pain weight</td>
</tr>
<tr>
<td></td>
<td>More reliable test</td>
</tr>
<tr>
<td></td>
<td>Migraines, hypothyroidism</td>
</tr>
<tr>
<td></td>
<td>Eating healthy and weight loss to cut back on medications</td>
</tr>
<tr>
<td></td>
<td>Open studies that pay money</td>
</tr>
<tr>
<td></td>
<td>Diet and exercise</td>
</tr>
<tr>
<td></td>
<td>MS</td>
</tr>
<tr>
<td></td>
<td>IBS, Menere's, acid reflux</td>
</tr>
</tbody>
</table>
Meta-Evaluation Results

The first phase of the evaluation process involved engaging the Celebrate Research stakeholders. This was a process by which benefits of the evaluation were made apparent to all stakeholders. Successful completion of this phase ensures that the evaluation is correctly focused to support the needs of the stakeholders. Consequently, the two standards that apply most directly are utility and propriety. This means the evaluation is useful and answers questions relevant to the users needs, and the evaluation is ethical being conducted with regard for the rights and interest of all those involved.

To be considered useful and ethical Phase 1 of the evaluation must meet specific utility and propriety guidelines. First, in order to meet utility standards, stakeholders must be effectively identified and, second, participants in the evaluation must be deemed credible. Consequently, in order for phase 1 of the evaluation to have maintained utility the following guidelines need to be accessed: U1 Stakeholder identification, and U2 Evaluator Credibility. For the Celebrate Research program evaluation the following utility guidelines were met:

<table>
<thead>
<tr>
<th>U1 Stakeholder Identification</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Clearly identify the evaluation client</td>
</tr>
<tr>
<td>• Engage leadership figures to identify other stakeholders</td>
</tr>
<tr>
<td>• Consult potential stakeholders to identify their information needs</td>
</tr>
<tr>
<td>• Use stakeholders to identify other stakeholders</td>
</tr>
<tr>
<td>• With the client, rank stakeholders for relative importance</td>
</tr>
<tr>
<td>• Arrange to involve stakeholders throughout the evaluation</td>
</tr>
<tr>
<td>• Keep the evaluation open to serve newly identified stakeholders</td>
</tr>
<tr>
<td>• Address stakeholders' evaluation needs</td>
</tr>
</tbody>
</table>
Serve an appropriate range of individual stakeholders  
Serve an appropriate range of stakeholder organizations

<table>
<thead>
<tr>
<th></th>
<th>9-10 Excellent</th>
<th>7-8 Very Good</th>
<th>5-6 Good</th>
<th>3-4 Fair</th>
<th>1-2 Poor</th>
</tr>
</thead>
<tbody>
<tr>
<td>U2 Evaluator Credibility</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Engage competent evaluators</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Engage evaluators whom the stakeholders trust</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Engage evaluators who can address stakeholders’ concerns</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Engage evaluators who are appropriately responsive to issues of gender, socioeconomic status, race, and language and cultural differences</td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>□ Assure that the evaluation plan responds to key stakeholders’ concerns</td>
<td></td>
<td></td>
<td></td>
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<td></td>
</tr>
<tr>
<td>□ Help stakeholders understand the evaluation plan</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Engage evaluators who are appropriately responsive to issues of gender, socioeconomic status, race, and language and cultural differences</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>□ Give stakeholders information on the evaluation plan’s technical quality and practicality</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>□ Attend appropriately to stakeholders’ criticisms and suggestions</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>□ Stay abreast of social and political forces</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>□ Keep interested parties informed about the evaluation’s progress</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Similarly in order to be considered ethical a consensus between all individuals participating in the evaluation, including stakeholders, evaluators and program employees should be established. Conflicts of interest must be addressed and stakeholder rights and values must be upheld and honored. As a result four of the eight propriety guidelines must be met: P2 Formal Agreements, P3 Rights of Human Subjects, P4 Human Interactions, and P7 Conflict of Interest. The propriety guidelines met for the Celebrate Research program evaluation are as follows:

<table>
<thead>
<tr>
<th></th>
<th>9-10 Excellent</th>
<th>7-8 Very Good</th>
<th>5-6 Good</th>
<th>3-4 Fair</th>
<th>1-2 Poor</th>
</tr>
</thead>
<tbody>
<tr>
<td>P2 Formal Agreements, reach advance written agreements on:</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>□ Evaluation purpose and questions</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>□ Audiences</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>□ Evaluation reports</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>□ Editing</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>□ Release of reports</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>□ Evaluation procedures and schedule</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>□ Confidentiality/anonymity of data</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>□ Evaluation staff</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>□ Meta-evaluation</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>□ Evaluation resources</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>P3 Rights of Human Subjects</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>□ Make clear to stakeholders that the evaluation will respect and protect the rights of human subjects</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>□ Clarify intended uses of the evaluation</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
- Keep stakeholders informed
- Follow due process

- Uphold civil rights
- Understand participant values
- Respect diversity
- Follow protocol
- Honor confidentiality/anonymity agreements
- Do no harm

<table>
<thead>
<tr>
<th>9-10 Excellent</th>
<th>7-8 Very Good</th>
<th>5-6 Good</th>
<th>3-4 Fair</th>
<th>1-2 Poor</th>
</tr>
</thead>
</table>

**P4 Human Interactions**
- Consistently relate to all stakeholders in a professional manner
- Maintain effective communication with stakeholders
- Follow the institution's protocol
- Minimize disruption
- Honor participants' privacy rights
- Honor time commitments
- Be alert to and address participants' concerns about the evaluation
- Be sensitive to participants' diversity of values and cultural differences
- Be even-handed in addressing different stakeholders
- Do not ignore or help cover up any participant's incompetence, unethical behavior, fraud, waste, or abuse

<table>
<thead>
<tr>
<th>9-10 Excellent</th>
<th>7-8 Very Good</th>
<th>5-6 Good</th>
<th>3-4 Fair</th>
<th>1-2 Poor</th>
</tr>
</thead>
</table>

**P7 Conflict of Interest**
- Identify potential conflicts of interest early in the evaluation
- Provide written, contractual safeguards against identified conflicts of interest
- Engage multiple evaluators
- Maintain evaluation records for independent review
- As appropriate, engage independent parties to assess the evaluation for its susceptibility or corruption by conflicts of interest
- When appropriate, release evaluation procedures, data, and reports for public review
- Contract with the funding authority rather than the funded program
- Have internal evaluators report directly to the chief executive officer
- Report equitably to all right-to-know audiences
- Engage uniquely qualified persons to participate in the evaluation, even if they have a potential conflict of interest; but take steps to counteract the conflict

<table>
<thead>
<tr>
<th>9-10 Excellent</th>
<th>7-8 Very Good</th>
<th>5-6 Good</th>
<th>3-4 Fair</th>
<th>1-2 Poor</th>
</tr>
</thead>
</table>

Using the modified equation from Stufflebeam, et al, the utility standard strength is:

\[
\frac{((1\times4) + (1\times3) + (0\times2) + (0\times1)) + (2\times4)}{100} = 88\%. 
\]

This classifies the overall utility for Phase 1, engaging stakeholders, as very good. Meanwhile the propriety standard strength is:

\[
\frac{((2\times4) + (0\times3) + (2\times2) (0\times1)) + (4\times4)}{100} = 75\%. 
\]

While,
propriety is less than utility it is still classified as very good. Based on the assessments, the process of engaging stakeholders for Phase 1 met all required standards.

This is an example of how the standards were used and analyzed to determine the results of the meta-evaluation. The following table shows the remainder of the results for the *Celebrate Research Project Evaluation*.

<table>
<thead>
<tr>
<th>Step Compliance to Joint Committee Program Evaluation Standards</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Step 1 - Engage Stakeholders</strong></td>
</tr>
<tr>
<td>Utility % Standard Compliance                               88%</td>
</tr>
<tr>
<td>Propriety % Standard Compliance                              75%</td>
</tr>
<tr>
<td>Step Standard Compliance Met Yes</td>
</tr>
<tr>
<td><strong>Step 2</strong></td>
</tr>
<tr>
<td>Accuracy % Standard Compliance                               88%</td>
</tr>
<tr>
<td>Propriety % Standard Compliance                              100%</td>
</tr>
<tr>
<td>Step Standard Compliance Met Yes</td>
</tr>
<tr>
<td><strong>Step 3</strong></td>
</tr>
<tr>
<td>Utility % Standard Compliance                               75%</td>
</tr>
<tr>
<td>Feasibility % Standard Compliance                            83%</td>
</tr>
<tr>
<td>Propriety % Standard Compliance                              100%</td>
</tr>
<tr>
<td>Accuracy % Standard Compliance                               100%</td>
</tr>
<tr>
<td>Step Standard Compliance Met Yes</td>
</tr>
<tr>
<td><strong>Step 4</strong></td>
</tr>
<tr>
<td>Accuracy % Standard Compliance                               60%</td>
</tr>
<tr>
<td>Step Standard Compliance Met Yes</td>
</tr>
<tr>
<td><strong>Step 5</strong></td>
</tr>
<tr>
<td>Utility % Standard Compliance                               88%</td>
</tr>
<tr>
<td>Accuracy % Standard Compliance                               88%</td>
</tr>
<tr>
<td>Step Standard Compliance Met Yes</td>
</tr>
<tr>
<td><strong>Step 6</strong></td>
</tr>
<tr>
<td>Utility % Standard Compliance                               75%</td>
</tr>
<tr>
<td>Propriety % Standard Compliance                              63%</td>
</tr>
<tr>
<td>Accuracy % Standard Compliance                               88%</td>
</tr>
<tr>
<td>Step Standard Compliance Met Yes</td>
</tr>
</tbody>
</table>

Since each phase met the specific standards we can further support the use of the checklist in determining overall standard classification. When examining the Celebrate Research Program Evaluation as a whole the following percentages are found for utility, feasibility, propriety and accuracy.
<table>
<thead>
<tr>
<th>Joint Committee Program Evaluation Standard</th>
<th>Compliance Percentage (%)</th>
<th>Category Classification</th>
</tr>
</thead>
<tbody>
<tr>
<td>Utility</td>
<td>82</td>
<td>Very Good</td>
</tr>
<tr>
<td>Feasibility</td>
<td>83</td>
<td>Very Good</td>
</tr>
<tr>
<td>Propriety</td>
<td>78</td>
<td>Very Good</td>
</tr>
<tr>
<td>Accuracy</td>
<td>75</td>
<td>Very Good</td>
</tr>
</tbody>
</table>

So when compared to the tables provided for each section we can more clearly see where the break down occurred for the evaluation.
## Celebrate Research Evaluation

### 1. Scope
The Celebrate Research Program is being redesigned to increase recruitment in women’s research trials. An organized database is being enhanced to improve the search capability and allow for identification of health trends.

### 2. Accomplishments

<table>
<thead>
<tr>
<th>Milestones</th>
<th>Progress</th>
</tr>
</thead>
<tbody>
<tr>
<td>Revamped database form reducing redundancy</td>
<td>Completed</td>
</tr>
<tr>
<td>Increased database accuracy by 47%</td>
<td>Completed</td>
</tr>
<tr>
<td>Completed initial reports to implement second phase of project</td>
<td>Completed</td>
</tr>
<tr>
<td>Database updated to include second hyperlink, prevention and healthy people fields</td>
<td>Completed</td>
</tr>
<tr>
<td>Departmental cooperation improved to incorporate better IRB interaction</td>
<td>Completed</td>
</tr>
<tr>
<td>Distribution of survey to determine member areas of interest</td>
<td>Completed Ongoing</td>
</tr>
<tr>
<td>&quot;How to&quot; sheets developed for essential process</td>
<td>Completed</td>
</tr>
<tr>
<td>Successful implementation into the next phase of the program</td>
<td>Completed</td>
</tr>
<tr>
<td>Overall process efficiency increased by 60%</td>
<td>Completed</td>
</tr>
</tbody>
</table>

### 3. Dependencies / Actions

<table>
<thead>
<tr>
<th>Dependency</th>
<th>Responsible Party</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Celebrate Research Database must be maintained by collecting and entering updated information.</td>
<td>MPH student</td>
<td>Ongoing</td>
</tr>
<tr>
<td>Listing of IRB-approved studies must be updated to portray current and accurate information.</td>
<td>MPH student</td>
<td>Ongoing</td>
</tr>
</tbody>
</table>

### 4. Upcoming Activities

<table>
<thead>
<tr>
<th>Action/Initiative</th>
<th>Expected End Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Upgrading prevention and healthy people fields in recruiting studies</td>
<td>January 2005</td>
</tr>
<tr>
<td>Maintain quality of information provided from Celebrate Research Database</td>
<td>Ongoing</td>
</tr>
<tr>
<td>Research presentation to promote program</td>
<td>1/28/05</td>
</tr>
<tr>
<td>Finalize logic model</td>
<td>February 2005</td>
</tr>
<tr>
<td>Meta-evaluation</td>
<td>May 2006</td>
</tr>
<tr>
<td>Creating manual for future students</td>
<td>May 2006</td>
</tr>
</tbody>
</table>

### Issues

<table>
<thead>
<tr>
<th>Activity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Poor response rate to survey.</td>
</tr>
<tr>
<td>Medical records cooperation and communication lacking due to coder time constraints</td>
</tr>
</tbody>
</table>
Celebrate Research Evaluation

Alicia Hamburg

May 3, 2004
Status Update

---

1 - Project Scope

Currently the Celebrate Research Program is being redesigned to increase recruitment in women’s research trials. An organized database is being enhanced to improve the search capability to allow for the identification of health trends.

---

3 - Dependencies / Actions

<table>
<thead>
<tr>
<th>Dependency</th>
<th>Responsible Party</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Celebrate Research Database must be maintained by collecting and entering updated information.</td>
<td>MPH student</td>
<td>Ongoing</td>
</tr>
<tr>
<td>Listing of IRB approved studies must be updated to portray current and accurate information.</td>
<td>MPH student</td>
<td>Ongoing</td>
</tr>
</tbody>
</table>

---

2 - Accomplishments

<table>
<thead>
<tr>
<th>Milestones</th>
<th>Progress</th>
</tr>
</thead>
<tbody>
<tr>
<td>Developed an updated, comprehensive and accessible listing of IRB approved studies.</td>
<td>Completed</td>
</tr>
<tr>
<td>Updated the database to provide current recruiting status of IRB approved studies</td>
<td>Completed</td>
</tr>
<tr>
<td>Redesigned the filing system to improve efficiency and ease of use.</td>
<td>Completed</td>
</tr>
</tbody>
</table>

---

4 - Upcoming Activities

<table>
<thead>
<tr>
<th>ACTION / INITIATIVE</th>
<th>Expected End Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Updating contact listings in current database.</td>
<td>August 2004</td>
</tr>
<tr>
<td>Update Access file to incorporate “completion” field.</td>
<td>September 2004</td>
</tr>
<tr>
<td>Update access queries, forms and reports to reduce redundancy.</td>
<td>November 2004</td>
</tr>
<tr>
<td>Increase communication to promote more efficient utilization of resources.</td>
<td>December 2004</td>
</tr>
<tr>
<td>Maintain quality of information provided from Celebrate Research Database.</td>
<td>Ongoing</td>
</tr>
</tbody>
</table>

---

ISSUES

- Lack of interdepartmental cooperation to promote efficient use of services.
- Time and quality constraints due to personnel inconsistency.
Appendix 9

Celebrate Research General Information

Phone: 860-679-4572
Fax: 860-679-1887
Email: celebrateresearch@exchange.uchc.edu
Mail Code: C/O Celebrate Women
         MC – 4060
VoiceMail: Ext 4000
         Account: 4572
         Password: 04572

IRB Contact

HSPO Coordinator
IRB – Phone: 860-679-3054

Medical Records Contact

Medical Coder
Health Information Mgmt – Phone: 860-679-3649
CG102    Email: xxxxx@adp.uchc.edu
MC – 2925    Fax: 860-679-1035

For General Questions on Clinical Trials

Lorraine – 860-679-3445

Guidelines for Ads

1. Spell out what study is about
2. What, who eligible, advantages
3. Voluntary
4. What will happen to results
5. (i.e., forwarded, at request, end of study)
6. Be clear, mirror informed consent
7. Draw from Consent
8. Send to PI then IRB
9. Contact person on every informed consent form
10. Must apply for modifications if it changes
Opening CWResearch Database
- Open Access from the Program start menu
- Select open file and then select browse
- Go to the W: drive
- Then go to “Access Database”
- Followed by “CWResearch Project”
- Open “CWResearch” access file

Download mail at every session
- Open Outlook
- Look for any new study information that might have been sent

Celebrate Research Step-by-Step Process

1. Find new IRB study
   - Online at http://health.uchc.edu/clinicaltrials/index.asp
     - Print the Clinical trial “ad”
     - Place hyperlink in “Study Hyperlink” column of CWResearch database
     - Look up primary contact information in the CWResearch database
     - Fill in any information missing in appropriate column of CWResearch database
     - Contact by email or phone to determine current recruiting status
     - See Step 4
   - Folder in “To be done” drawer of file cabinet
     - Look up primary Contact information in the CWResearch database
     - Contact by email or phone to determine current recruiting status, and any IRB approved ads they might have for recruiting studies
     - See Step 2
   - New information from IRB folder
     - If it is an ad:
       - Fill in any information missing in appropriate column of CWResearch database
       - Look up primary contact information in CWResearch database
       - Contact by email or phone to determine current recruiting status
       - See Step 2
     - Any other information:
       - Look up primary contact information in CWResearch database
       - Contact by email or phone to determine current recruiting status
       - See Step 2

2. Determine Recruiting Status
   - Any studies that are recruiting
o Update recruiting status in “Recruitment Status” column of CWResearch database
o If there is no ad:
  • Look up primary contact information in CWResearch database
  • Contact by email or phone to determine if an IRB ad is available
    • If no ad available
      o Type on “no ad” under the “Study Hyperlink” column in the CWResearch database.
    • If ad is available
      o Fill in any information missing in appropriate column of CWResearch database
      o Request a copy
      o Once copy received attach to CW form
      o Place CW form, ad, and folder in the “Scan Ad” folder
o If there is an ad:
  • Fill in any information missing in appropriate column of CWResearch database
  • Attach copy of ad to CW form
  • Place CW form, ad, and folder in the “Scan Ad” folder

• Any studies that are not recruiting/closed:
  o Fill in any information missing in appropriate column of CWResearch database
  o Place in “Done” drawer – no further information will be gathered at this time
• Any studies that are suspended:
  o Fill in any information missing in appropriate column of CWResearch database
  o Place in front of “Done” drawer, in marked folder
  o Determine when suspension might be lifted and write date on folder for further follow up

3. Any ads to be scanned
   • Once adds have been scanned hyperlink in the “Study Hyperlink” column of the CWResearch database
   • Place CW form, ad, and folder in the “Send to medical records” folder

4. Medical Records
   • All recruiting study folders in the “Send to Medical Records” folder will be dropped off and picked up weekly or biweekly depending on Karen Casey’s schedule
   • Set up meeting time with Karen Casey (see general information page)
   • Follow up with Karen Casey for pick up time
   • Enter coding into system

5. File
   • File chart in Completed file drawer

6. Progress Monitor
At the end of each “session” mark the progress of each case on the progress monitor located in the desk bin

- If there is a study that is not on the monitor, write it in on the bottom of the appropriate page
- If information has changed mark any new information next to the appropriate study

**Definitions of Recruitment Status**

**Not Recruiting**

Study is not actively recruiting subjects either from within the hospital or from external sources; or study is only recruiting subjects already scheduled at the hospital for appointments or procedures

**Recruiting**

Study is actively recruiting subjects both from within the hospital and from external sources.

**Suspended**

Study is pending further evaluation from the IRB office.

**Closed**

Study is no longer active for the IRB.

**Other Definitions**

**Active**

Study is recruiting, or is considered an open case per the IRB office.

**Inactive**

Study is not recruiting or is considered a closed case per the IRB office.
Old Access Database Form
New Access Database Form
Evaluation Checklists Project
www.wmich.edu/evalctr/checklists

PROGRAM EVALUATIONS META-EVALUATION CHECKLIST
(Based on The Program Evaluation Standards)
Daniel L. Stufflebeam
1999

This checklist is for performing final, summative metaevaluations. It is organized according to the Joint Committee Program Evaluation Standards. For each of the 30 standards the checklist includes 10 checkpoints drawn from the substance of the standard. It is suggested that each standard be scored on each checkpoint. Then judgments about the adequacy of the subject evaluation in meeting the standard can be made as follows: 0-2 Poor, 3-4 Fair, 5-6 Good, 7-8 Very Good, 9-10 Excellent. It is recommended that an evaluation be failed if it scores Poor on standards P1 Service Orientation, A5 Valid Information, A10 Justified Conclusions, or A11 Impartial Reporting. Users of this checklist are advised to consult the full text of The Joint Committee (1994) Program Evaluation Standards, Thousand Oaks, CA: Sage Publications.

TO MEET THE REQUIREMENTS FOR UTILITY, PROGRAM EVALUATIONS SHOULD:

U1 Stakeholder Identification
- Clearly identify the evaluation client
- Engage leadership figures to identify other stakeholders
- Consult potential stakeholders to identify their information needs
- Use stakeholders to identify other stakeholders
- With the client, rank stakeholders for relative importance
- Arrange to involve stakeholders throughout the evaluation
- Keep the evaluation open to serve newly identified stakeholders
- Address stakeholders' evaluation needs
- Serve an appropriate range of individual stakeholders
- Serve an appropriate range of stakeholder organizations

☑ 9-10 Excellent 7-8 Very Good 5-6 Good 3-4 Fair 1-2 Poor

U2 Evaluator Credibility
- Engage competent evaluators
- Engage evaluators whom the stakeholders trust
- Engage evaluators who can address stakeholders’ concerns
- Engage evaluators who are appropriately responsive to issues of gender, socioeconomic status, race, and language and cultural differences
- Assure that the evaluation plan responds to key stakeholders’ concerns
- Help stakeholders understand the evaluation plan
- Give stakeholders information on the evaluation plan’s technical quality and practicality
- Attend appropriately to stakeholders’ criticisms and suggestions
- Stay abreast of social and political forces
- Keep interested parties informed about the evaluation’s progress

9-10 Excellent 7-8 Very Good ☑ 5-6 Good 3-4 Fair 1-2 Poor

U3 Information Scope and Selection
- Understand the clients most important evaluation requirements
- Interview stakeholders to determine their different perspectives
- Assure that evaluator and client negotiate pertinent audiences, questions, and required information
- Assign priority to the most important stakeholders
- Assign priority to the most important questions
- Allow flexibility for adding questions during the evaluation

89
• Obtain sufficient information to address the stakeholders’ most important evaluation questions
• Obtain sufficient information to assess the program’s merit
• Obtain sufficient information to assess the program’s worth
• Allocate the evaluation effort in accordance with the priorities assigned to the needed information

9-10 Excellent 7-8 Very Good 5-6 Good 3-4 Fair 1-2 Poor

U4 Values Identification
• Consider alternative sources of values for interpreting evaluation findings
• Provide a clear, defensible basis for value judgments
• Determine the appropriate party(s) to make the valuational interpretations
• Identify pertinent societal needs
• Identify pertinent customer needs
• Reference pertinent laws
• Reference, as appropriate, the relevant institutional mission
• Reference the program’s goals
• Take into account the stakeholders’ values
• As appropriate, present alternative interpretations based on conflicting but credible value bases

9-10 Excellent 7-8 Very Good 5-6 Good 3-4 Fair 1-2 Poor

U5 Report Clarity
• Clearly report the essential information
• Issue brief, simple, and direct reports
• Focus reports on contracted questions
• Describe the program and its context
• Describe the evaluation’s purposes, procedures, and findings
• Support conclusions and recommendations
• Avoid reporting technical jargon
• Report in the language(s) of stakeholders
• Provide an executive summary
• Provide a technical report

9-10 Excellent 7-8 Very Good 5-6 Good 3-4 Fair 1-2 Poor

U6 Report Timeliness and Dissemination
• Make timely interim reports to intended users
• Deliver the final report when it is needed
• Have timely exchanges with the program’s policy board
• Have timely exchanges with the program’s staff
• Have timely exchanges with the program’s customers
• Have timely exchanges with the public media
• Have timely exchanges with the full range of right-to-know audiences
• Employ effective media for reaching and informing the different audiences
• Keep the presentations appropriately brief
• Use examples to help audiences relate the findings to practical situations

9-10 Excellent 7-8 Very Good 5-6 Good 3-4 Fair 1-2 Poor

U7 Evaluation Impact
• Maintain contact with audience
• Involve stakeholders throughout the evaluation
• Encourage and support stakeholders’ use of the findings
• Show stakeholders how they might use the findings in their work
• Forecast and address potential uses of findings
• Provide interim reports
• Make sure that reports are open, frank, and concrete
• Supplement written reports with ongoing oral communication
• Conduct feedback workshops to go over and apply findings
• Make arrangements to provide follow-up assistance in interpreting and applying the findings
Scoring the Evaluation for UTILITY

Add the following:

Strength of the evaluation’s provisions for UTILITY:

- Number of Excellent ratings (0-7) \(1 \times 4 = 4\)
- Number of Very Good (0-7) \(5 \times 3 = 15\)
- Number of Good (0-7) \(1 \times 2 = 2\)
- Number of Fair (0-7) \(0 \times 1 = 0\)
- Total score: \(= 21\)

Total score: \(21\) (Total score) \(\div 28 = 0.75 \times 100\ = 75\%

TO MEET THE REQUIREMENTS FOR FEASIBILITY, PROGRAM EVALUATIONS SHOULD:

F1 Practical Procedures
- Tailor methods and instruments to information requirements
- Minimize disruption
- Minimize the data burden
- Appoint competent staff
- Train staff
- Choose procedures that the staff are qualified to carry out
- Choose procedures in light of known constraints
- Make a realistic schedule
- Engage locals to help conduct the evaluation
- As appropriate, make evaluation procedures a part of routine events

F2 Political Viability
- Anticipate different positions of different interest groups
- Avert or counteract attempts to bias or misapply the findings
- Foster cooperation
- Involve stakeholders throughout the evaluation
- Agree on editorial and dissemination authority
- Issue interim reports
- Report divergent views
- Report to right-to-know audiences
- Employ a firm public contract
- Terminate any corrupted evaluation

F3 Cost Effectiveness
- Be efficient
- Make use of in-kind services
- Produce information worth the investment
- Inform decisions
- Foster program improvement
- Provide accountability information
- Generate new insights
- Help spread effective practices
- Minimize disruptions
- Minimize time demands on program personnel

Scoring the Evaluation for FEASIBILITY

Add the following:

Strength of the evaluation’s provisions for FEASIBILITY:

- Number of Excellent ratings 0-3) \(1 \times 4 = 4\)

11 (93%) to 12: Excellent
Number of Very Good (0-3) 2x3 = 6  
Number of Good (0-3) 0 x 2 = 0  
Number of Fair (0-3) 0 x 1 = 0  
Total score: = 10  

83%  

TO MEET THE REQUIREMENTS FOR PROPRIETY, PROGRAM EVALUATIONS SHOULD:

**P1 Service Orientation**
- Assess needs of the program's customers
- Assess program outcomes against targeted customers' assessed needs
- Help assure that the full range of rightful program beneficiaries are served
- Promote excellent service
  - Make the evaluation's service orientation clear to stakeholders
- Identify program strengths to build on
- Identify program weaknesses to correct
- Give interim feedback for program improvement
- Expose harmful practices
- Inform all right-to-know audiences of the program's positive and negative outcomes

9-10 Excellent  7-8 Very Good  5-6 Good  3-4 Fair  1-2 Poor

**P2 Formal Agreements, reach advance written agreements on:**
- Evaluation purpose and questions
- Audiences
- Evaluation reports
  - Editing
  - Release of reports
- Evaluation procedures and schedule
- Confidentiality/anonymity of data
- Evaluation staff
- Meta-evaluation
- Evaluation resources

9-10 Excellent  7-8 Very Good  5-6 Good  3-4 Fair  1-2 Poor

**P3 Rights of Human Subjects**
- Make clear to stakeholders that the evaluation will respect and protect the rights of human subjects
- Clarify intended uses of the evaluation
- Keep stakeholders informed
- Follow due process
- Uphold civil rights
- Understand participant values
- Respect diversity
- Follow protocol
- Honor confidentiality/anonymity agreements
- Do no harm

9-10 Excellent  7-8 Very Good  5-6 Good  3-4 Fair  1-2 Poor

**P4 Human Interactions**
- Consistently relate to all stakeholders in a professional manner
- Maintain effective communication with stakeholders
- Follow the institution’s protocol
- Minimize disruption
- Honor participants' privacy rights
- Honor time commitments
- Be alert to and address participants' concerns about the evaluation
- Be sensitive to participants' diversity of values and cultural differences
• Be even-handed in addressing different stakeholders
• Do not ignore or help cover up any participant's incompetence, unethical behavior, fraud, waste, or abuse

\[ \begin{array}{c|ccccc} \text{Score} & 9-10 & 7-8 & 5-6 & 3-4 & 1-2 \\ \text{Quality} & \text{Excellent} & \text{Very Good} & \text{Good} & \text{Fair} & \text{Poor} \end{array} \]

**P5 Complete and Fair Assessment**

• Assess and report the program's strengths
• Assess and report the program's weaknesses
• Report on intended outcomes
• Report on unintended outcomes
• Give a thorough account of the evaluation's process
• As appropriate, show how the program's strengths could be used to overcome its weaknesses
• Have the draft report reviewed
• Appropriately address criticisms of the draft report
• Acknowledge the final report's limitations
• Estimate and report the effects of the evaluation's limitations on the overall judgment of the program

\[ \begin{array}{c|ccccc} \text{Score} & 9-10 & 7-8 & 5-6 & 3-4 & 1-2 \\ \text{Quality} & \text{Excellent} & \text{Very Good} & \text{Good} & \text{Fair} & \text{Poor} \end{array} \]

**P6 Disclosure of Findings**

• Define the right-to-know audiences
  • Establish a contractual basis for complying with right-to-know requirements
  • Inform the audiences of the evaluation's purposes and projected reports
  • Report all findings in writing
  • Report relevant points of view of both supporters and critics of the program
  • Report balanced, informed conclusions and recommendations
  • Show the basis for the conclusions and recommendations
  • Disclose the evaluation's limitations
  • In reporting, adhere strictly to a code of directness, openness, and completeness
  • Assure that reports reach their audiences

\[ \begin{array}{c|ccccc} \text{Score} & 9-10 & 7-8 & 5-6 & 3-4 & 1-2 \\ \text{Quality} & \text{Excellent} & \text{Very Good} & \text{Good} & \text{Fair} & \text{Poor} \end{array} \]

**P7 Conflict of Interest**

• Identify potential conflicts of interest early in the evaluation
  • Provide written, contractual safeguards against identified conflicts of interest
  • Engage multiple evaluators
  • Maintain evaluation records for independent review
  • As appropriate, engage independent parties to assess the evaluation for its susceptibility or corruption by conflicts of interest
  • When appropriate, release evaluation procedures, data, and reports for public review
  • Contract with the funding authority rather than the funded program
  • Have internal evaluators report directly to the chief executive officer
  • Report equitably to all right-to-know audiences
  • Engage uniquely qualified persons to participate in the evaluation, even if they have a potential conflict of interest; but take steps to counteract the conflict

\[ \begin{array}{c|ccccc} \text{Score} & 9-10 & 7-8 & 5-6 & 3-4 & 1-2 \\ \text{Quality} & \text{Excellent} & \text{Very Good} & \text{Good} & \text{Fair} & \text{Poor} \end{array} \]

**P8 Fiscal Responsibility**

• Specify and budget for expense items in advance
• Keep the budget sufficiently flexible to permit appropriate reallocations to strengthen the evaluation
• Obtain appropriate approval for needed budgetary modifications
• Assign responsibility for managing the evaluation finances
• Maintain accurate records of sources of funding and expenditures
• Maintain adequate personnel records concerning job allocations and time spent on the job
Employ comparison shopping for evaluation materials
Employ comparison contract bidding
Be frugal in expending evaluation resources
As appropriate, include an expenditure summary as part of the public evaluation report

9-10 Excellent 7-8 Very Good 5-6 Good 3-4 Fair 1-2 Poor

Scoring the Evaluation for PROPRIETY
Add the following:
Strength of the evaluation’s provisions for PROPRIETY
Number of Excellent ratings (0-8) $4 \times 4 = 16$
Number of Very Good (0-8) $2 \times 3 = 6$
Number of Good (0-8) $2 \times 2 = 4$
Number of Fair (0-8) $0 \times 1 = 0$
Total score: $= 26$

$26 (\text{Total score}) + 32 = 0.81 \times 100 =$

81%

TO MEET THE REQUIREMENTS FOR ACCURACY, PROGRAM EVALUATIONS SHOULD:

A1 Program Documentation
- Collect descriptions of the intended program from various written sources
- Collect descriptions of the intended program from the client and various stakeholders
- Describe how the program was intended to function
- Maintain records from various sources of how the program operated
- As feasible, engage independent observers to describe the program’s actual operations
- Describe how the program actually functioned
- Analyze discrepancies between the various descriptions of how the program was intended to function
- Analyze discrepancies between how the program was intended to operate and how it actually operated
- Ask the client and various stakeholders to assess the accuracy of recorded descriptions of both the intended and the actual program
- Produce a technical report that documents the program’s operations

A2 Context Analysis
- Use multiple sources of information to describe the program’s context
- Describe the context’s technical, social, political, organizational, and economic features
- Maintain a log of unusual circumstances
- Record instances in which individuals or groups intentionally or otherwise interfered with the program
- Record instances in which individuals or groups intentionally or otherwise gave special assistance to the program
- Analyze how the program’s context is similar to or different from contexts where the program might be adopted
- Report those contextual influences that appeared to significantly influence the program and that might be of interest to potential adopters
- Estimate effects of context on program outcomes
- Identify and describe any critical competitors to this program that functioned at the same time and in the program’s environment
- Describe how people in the program’s general area perceived the program’s existence, importance, and quality

A3 Described Purposes and Procedures
- At the evaluation’s outset, record the client’s purposes for the evaluation
- Monitor and describe stakeholders’ intended uses of evaluation findings
Monitor and describe how the evaluation's purposes stay the same or change over time

- Identify and assess points of agreement and disagreement among stakeholders regarding the evaluation's purposes
- As appropriate, update evaluation procedures to accommodate changes in the evaluation's purposes
- Record the actual evaluation procedures, as implemented
- When interpreting findings, take into account the different stakeholders' intended uses of the evaluation
- When interpreting findings, take into account the extent to which the intended procedures were effectively executed
- Describe the evaluation's purposes and procedures in the summary and full-length evaluation reports
- As feasible, engage independent evaluators to monitor and evaluate the evaluation's purposes and procedures

A4 Defensible Information Sources

- Obtain information from a variety of sources
- Use pertinent, previously collected information once validated
- As appropriate, employ a variety of data collection methods
- Document and report information sources
- Document, justify, and report the criteria and methods used to select information sources
- For each source, define the population
- For each population, as appropriate, define any employed sample
- Document, justify, and report the means used to obtain information from each source
- Include data collection instruments in a technical appendix to the evaluation report
- Document and report any biasing features in the obtained information

A5 Valid Information

- Focus the evaluation on key questions
- As appropriate, employ multiple measures to address each question
- Provide a detailed description of the constructs and behaviors about which information will be acquired
- Assess and report what type of information each employed procedure acquires
- Train and calibrate the data collectors
- Document and report the data collection conditions and process
- Document how information from each procedure was scored, analyzed, and interpreted
- Report and justify inferences singly and in combination
- Assess and report the comprehensiveness of the information provided by the procedures as a set in relation to the information needed to answer the set of evaluation questions
- Establish meaningful categories of information by identifying regular and recurrent themes in information collected using qualitative assessment procedures

A6 Reliable Information

- Identify and justify the type(s) and extent of reliability claimed
- For each employed data collection device, specify the unit of analysis
- As feasible, choose measuring devices that in the past have shown acceptable levels of reliability for their intended uses
- In reporting reliability of an instrument, assess and report the factors that influenced the reliability, including the characteristics of the examinees, the data collection conditions, and the evaluator's biases
- Check and report the consistency of scoring, categorization, and coding
- Train and calibrate scorers and analysts to produce consistent results
• Pilot test new instruments in order to identify and control sources of error
• As appropriate, engage and check the consistency between multiple observers
• Acknowledge reliability problems in the final report
• Estimate and report the effects of unreliability in the data on the overall judgment of the program

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<th>9-10 Excellent</th>
<th>7-8 Very Good</th>
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<th>1-2 Poor</th>
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**A7 Systematic Information**

• Establish protocols for quality control of the evaluation information
• Train the evaluation staff to adhere to the data protocols
• Systematically check the accuracy of scoring and coding
• When feasible, use multiple evaluators and check the consistency of their work
• Verify data entry
• Proofread and verify data tables generated from computer output or other means
• Systematize and control storage of the evaluation information
• Define who will have access to the evaluation information
• Strictly control access to the evaluation information according to established protocols
• Have data providers verify the data they submitted

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**A8 Analysis of Quantitative Information**

• Begin by conducting preliminary exploratory analyses to assure the data's correctness and to gain a greater understanding of the data
• Choose procedures appropriate for the evaluation questions and nature of the data
• For each procedure specify how its key assumptions are being met
• Report limitations of each analytic procedure, including failure to meet assumptions
• Employ multiple analytic procedures to check on consistency and replicability of findings
• Examine variability as well as central tendencies
• Identify and examine outliers and verify their correctness
• Identify and analyze statistical interactions
• Assess statistical significance and practical significance
• Use visual displays to clarify the presentation and interpretation of statistical results

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**A9 Analysis of Qualitative Information**

• Focus on key questions
• Define the boundaries of information to be used
• Obtain information keyed to the important evaluation questions
• Verify the accuracy of findings by obtaining confirmatory evidence from multiple sources, including stakeholders
• Choose analytic procedures and methods of summarization that are appropriate to the evaluation questions and employed qualitative information
• Derive a set of categories that is sufficient to document, illuminate, and respond to the evaluation questions
• Test the derived categories for reliability and validity
• Classify the obtained information into the validated analysis categories
• Derive conclusions and recommendations and demonstrate their meaningfulness
• Report limitations of the referenced information, analyses, and inferences

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**A10 Justified Conclusions**

• Focus conclusions directly on the evaluation questions
• Accurately reflect the evaluation procedures and findings
• Limit conclusions to the applicable time periods, contexts, purposes, and activities
• Cite the information that supports each conclusion
• Identify and report the program's side effects
• Report plausible alternative explanations of the findings
• Explain why rival explanations were rejected
• Warn against making common misinterpretations
• Obtain and address the results of a prerelease review of the draft evaluation report
• Report the evaluation's limitations

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**A11 Impartial Reporting**

• Engage the client to determine steps to ensure fair, impartial reports
• Establish appropriate editorial authority
• Determine right-to-know audiences
• Establish and follow appropriate plans for releasing findings to all right-to-know audiences
• Safeguard reports from deliberate or inadvertent distortions
• Report perspectives of all stakeholder groups
• Report alternative plausible conclusions
• Obtain outside audits of reports
• Describe steps taken to control bias
• Participate in public presentations of the findings to help guard against and correct distortions by other interested parties

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**A12 Metaevaluation**

• Designate or define the standards to be used in judging the evaluation
• Assign someone responsibility for documenting and assessing the evaluation process and products
• Employ both formative and summative meta-evaluation
• Budget appropriately and sufficiently for conducting the meta-evaluation
• Record the full range of information needed to judge the evaluation against the stipulated standards
• As feasible, contract for an independent meta-evaluation
• Determine and record which audiences will receive the meta-evaluation report
• Evaluate the instrumentation, data collection, data handling, coding, and analysis against the relevant standards
• Evaluate the evaluation's involvement of and communication of findings to stakeholders against the relevant standards
• Maintain a record of all meta-evaluation steps, information, and analyses

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**Scoring the Evaluation for ACCURACY**

Add the following:

**Strength of the evaluation's provisions for ACCURACY**

| Number of Excellent ratings (0-12) 4 x 4 = 16 | 45 (93%) to 48: Excellent |
| Number of Very Good (0-12) 7 x 3 = 21 | 33 (68%) to 44: Very Good |
| Number of Good (0-12) 0 x 2 = 0 | 24 (50%) to 32: Good |
| Number of Fair (0-12) 0 x 1 = 0 | 12 (25%) to 23: Fair |
| Total score: = 37 | 0 (0%) to 11: Poor |

\[
\text{37(Total score) + 48 = .77 x 100 = 77}\%
\]

This checklist is being provided as a free service to the user. The provider of the checklist has not modified or adapted the checklist to fit the specific needs of the user and the user is executing his or her own discretion and judgment in using the checklist. The provider of the checklist makes no representations or warranties that this checklist is fit for the particular purpose contemplated by user and specifically disclaims any such warranties or representations.