

Amplify Your Results Using Getting to Outcomes[®]



August 27, 2015 2:00-3:30pm ET
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This webinar was developed by Healthy Teen Network in partnership with Child Trends under contract #GS-10F-0030R/HHSP23320130043G for the Office of Adolescent Health; US Department of Health and Human Services as a technical assistance product for use with OAH grant programs.



Presenters



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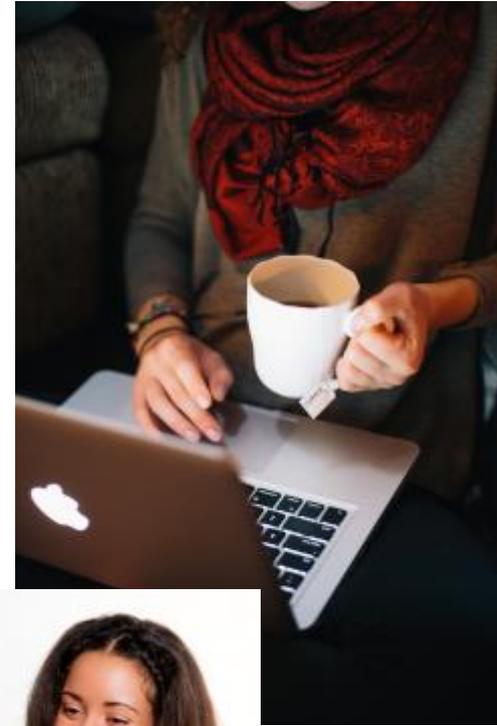


Chris Rollison



Open Response

- Name
- Organization
- City, State
- On a scale of 1-10...



At the conclusion of this webinar, attendees will be able to:

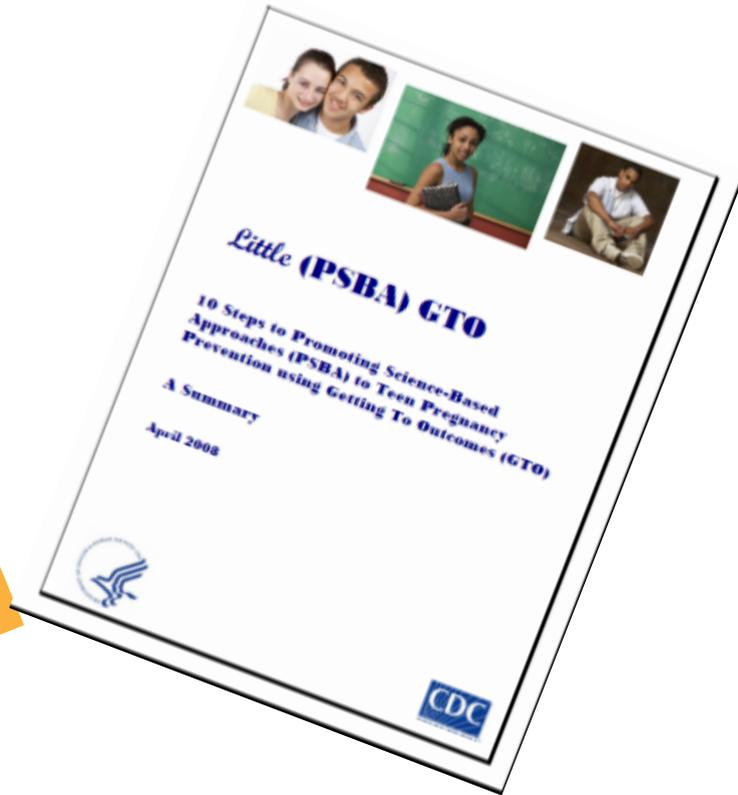
- Describe Getting to Outcomes[®] (GTO);
- Explain the relationship between organizational readiness and GTO;
- Describe the 10 GTO Steps; and,
- Summarize lessons learned from current GTO practitioners.



- Evidence-based Approach
- Empowerment Evaluation
- Accountability
- Quality & Fidelity

Adapted for Teen Pregnancy Prevention

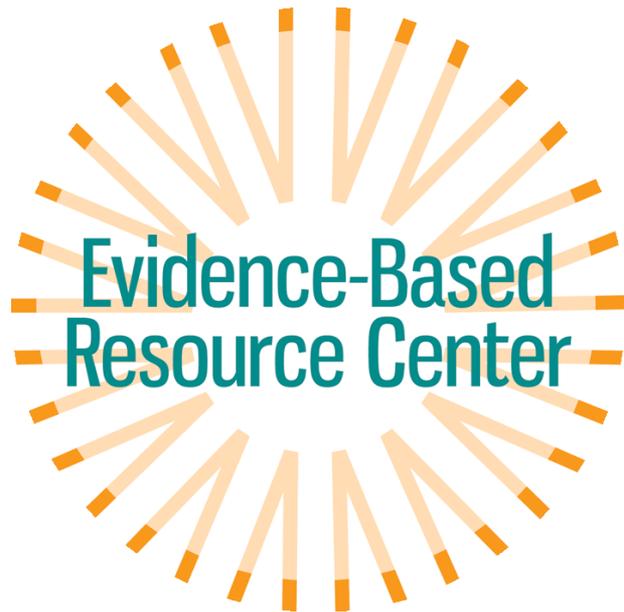




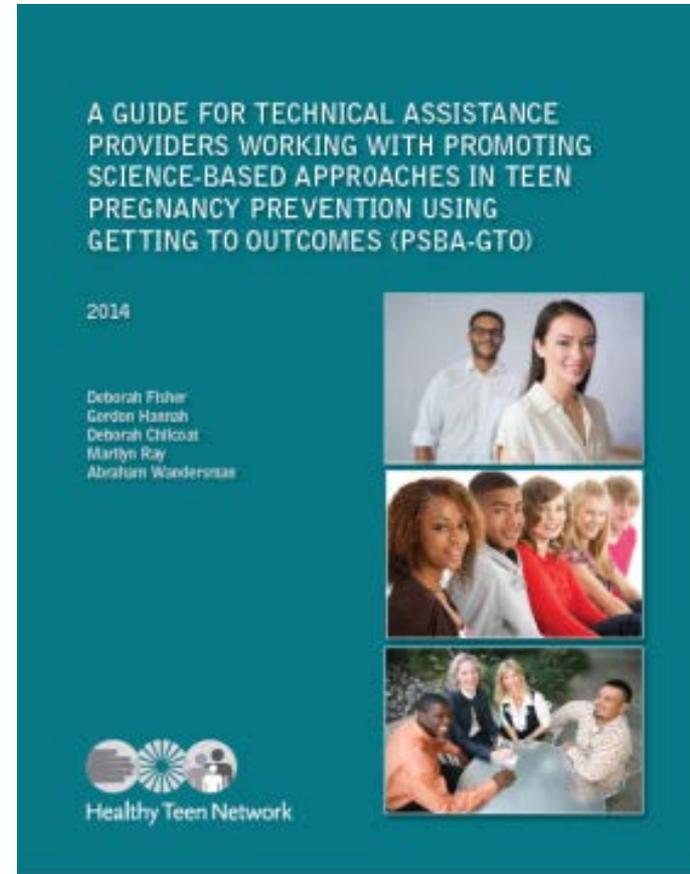
<http://www.cdc.gov/TeenPregnancy/PDF/LittlePSBA-GTO.pdf>

<http://www.hhs.gov/ash/oah/resources-and-publications/learning/tpp-evidence-based/>



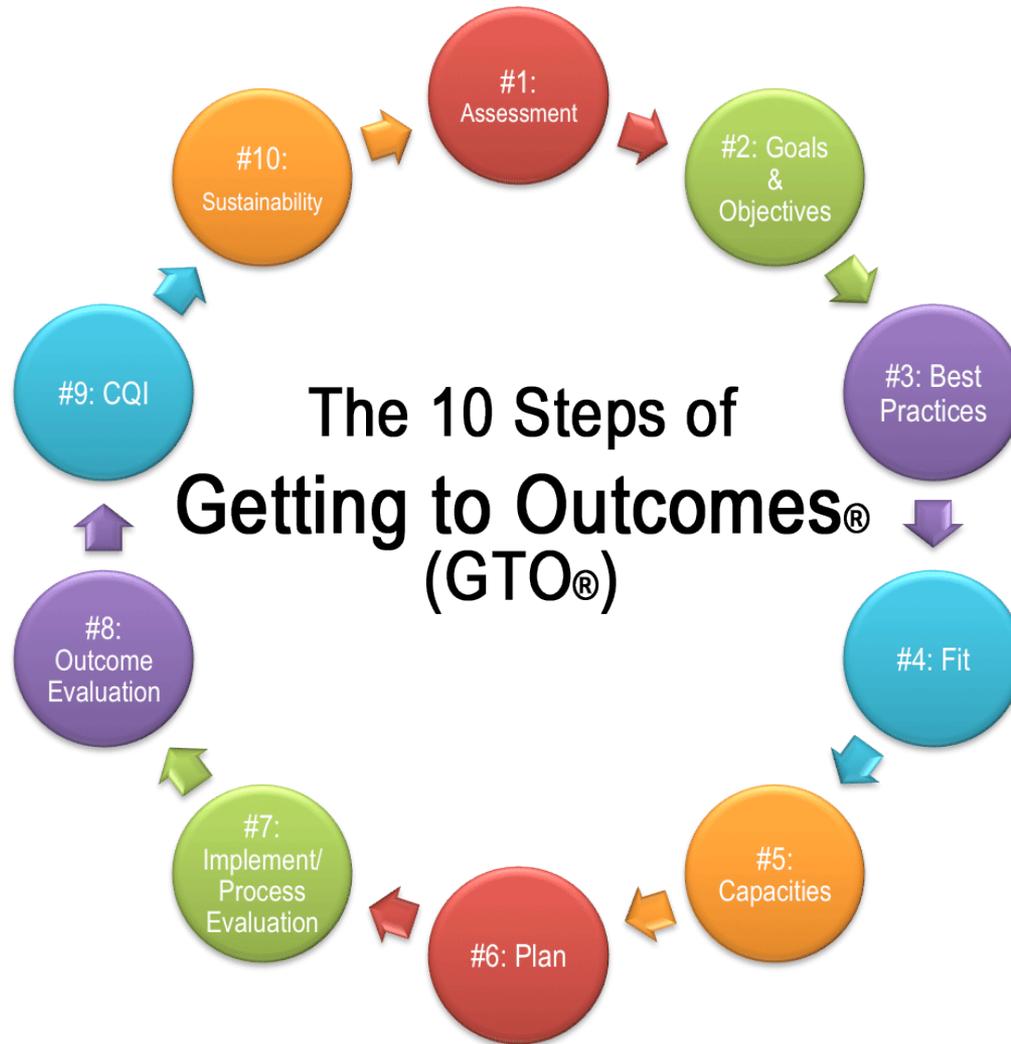


<http://healthyteennetwork.org/evidence-based-resource-center>



http://www.healthyteennetwork.org/sites/default/files/GTO_TAManual_Complete.pdf







What data do you use to understand teen pregnancy prevention in your community?



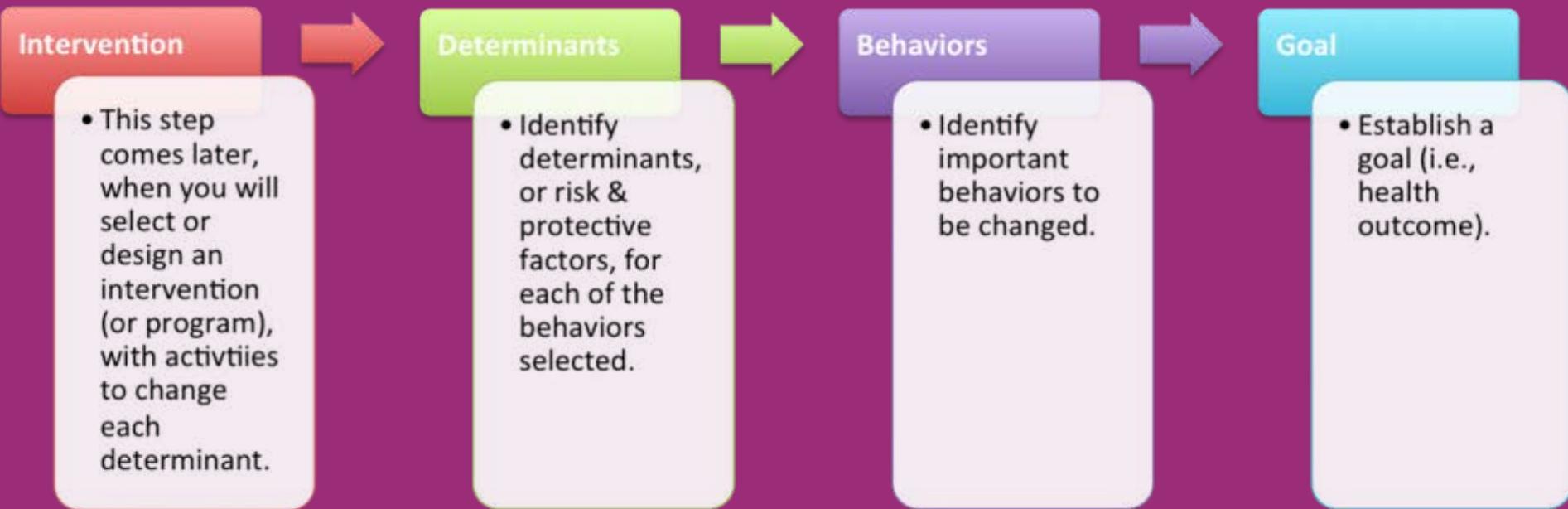
#1:
Needs/
Resources

- Gather quantitative data about youth and existing resources
- Collect qualitative data about youth and existing resources
- Determine population to be served

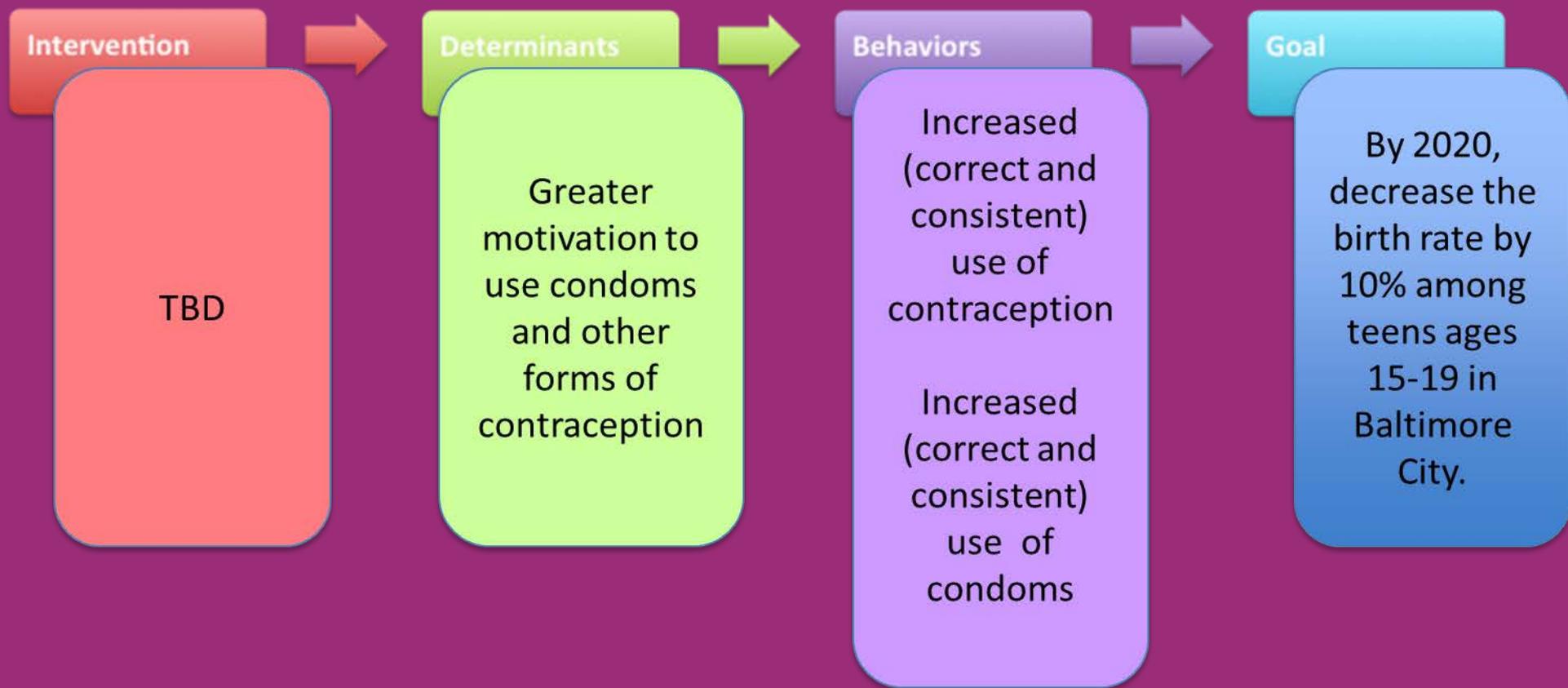


#2: Goals

- Use data to build a logic model



Behavior-Determinant-Intervention Logic Model



Behavior-Determinant-Intervention Logic Model

#3: Evidence- Based Approaches

- Use your data & logic model to select a few candidate evidence-based programs
- Use previous data to inform your decision

#4: Fit

Evidence- Based Teen Pregnancy Prevention Programs at a Glance



*This table was developed by Child Trends under contract number GS-10F-0030R for the Office of Adolescent Health, U.S. Department of Health and Human Services as a technical assistance product for use with OAH grant programs.

Recent Sexual Activity	# Sexual Partners	Frequency of Sexual Activity	Contraceptive Use and/or Consistency	Sexual Initiation & Abstinence	Pregnancy or Birth	STDs (Including HIV)	Technology (audio-visual/internet)	Parent Engagement	Service Learning Project	Condom Demonstration
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This table provides a brief overview of the program models on the HHS Teen Pregnancy Prevention Evidence Review website that are implementation ready and is intended to be used in conjunction with other resources when selecting a program model for implementation. For additional information, please visit <http://www.hhs.gov/ash/oah/resources-and-publications/ebp/>.

Note: Grantees may propose to implement an evidence-based TPP program with a population or in a setting other than those identified in the program's original evaluation; however, as a reminder, proposed adaptations must be shared with OAH and may require approval.

Program Name	Program Type	Outcomes	Duration of Outcomes	Activities	Train-the-trainer	Train-the-facilitator	# of Sessions	Session Length	Program Duration	Setting	Target Population	Age	Languages
Aban Aya Youth Project	SE	●	post-intervention	✓	✓		16-21	45 min	4 years	S*, Cm	♀/♂*, AA*	10-14*	En
Adult Identity Mentoring (Project AIM)	YD	●	3 mos			✓	12	50 min	6 weeks	S*, Cm	♀/♂*, All (AA)*, Lw	11-14 (12-14)*	En, Sp
All4You!	YA	●	6 mos	✓	✓	✓	14	70-140 min	7 weeks	Sp*	♀/♂*, All*	14-18 (14-17)*	En
Be Proud! Be Responsible!	SE	●	3-12 mos	✓	✓	✓	6	60 min	6 days	C, S, As*, Cm*	♀/♂*, All (AA)*	11-18 (11-13)*	En
Be Proud! Be Responsible! Be Protective!	Pp*	●	12 mos	✓	✓	✓	8	60 min	8 days	S, Sp*, As, Cm	♀, All (H, AA)*	12-18 (14-20)*	En
Becoming a Responsible Teen (BART)	SE	●	12 mos	✓	✓	✓	8	90-120 min	8 weeks	C*, As	♀/♂*, All (AA)*	14-18*	En
Children's Aid Society (CAS) Carrera Program	YD	●	3 yrs after program start for girls	✓	✓	✓	Daily	2-3 hours	7 years	S, As*, Cm	♀/♂*, All (H, AA)*	10-12 at program entry	En, Sp
iCuidate!	SE	●	3-12 mos	✓	✓	✓	6	60 min	2 days +	S, As*, Cm*	♀/♂*, H*	13-18*	En, Sp
Draw the Line/Respect the Line	SE	●	12 mos post-intervention; boys only	✓	✓	✓	19	45 min	3 years	S*	♀/♂*, All*	11-14*	En, Sp
Families Talking Together (FTT)	F	●	9-mos	✓		✓	11 modules	Varies	Varies	C*, As*, Cm*	♀/♂*, H*, AA*	10-14 (11-14)*	En, Sp
FOCUS	SE	●	11-mos	✓	✓		4	120 min	8 hours	S, Sp*, Cm	♀, All*	16+ (17+)*	En
Get Real	SE	●	post-intervention	✓	✓	✓	27	45 min	3 years	S*	♀/♂*, All*	11-14*	En

Program Type SE - Sexual health education AE - Abstinence education YD - Youth development CB - Clinic based F - Program for families	YA - Youth in alternative schools HN - Parent with history of HIV STD - History of STD SD - Substance dependent	Outcomes ● Evidence of effect RA - Runaway youth TY - Incarcerated youth Pp - Pregnant/parenting P - Parenting	Settings S - School C - Clinic As - After school program Cm - Community based	Sp - Specialized setting * - Evaluated setting	Target Population ♀/♂ - Female/Male AA - African American H - Hispanic AI/AN - American Indian/Alaskan Native W - White	Available Languages En - English Sp - Spanish O - Other
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http://www.hhs.gov/ash/oah/oah-initiatives/teen_pregnancy/training/Assests/ebp-table.pdf

Becoming a Responsible Teen (BART)



Janet St. Lawrence, PhD
Professor Emerita of Arts & Sciences
Mississippi State University



Research Professor
Portland State University



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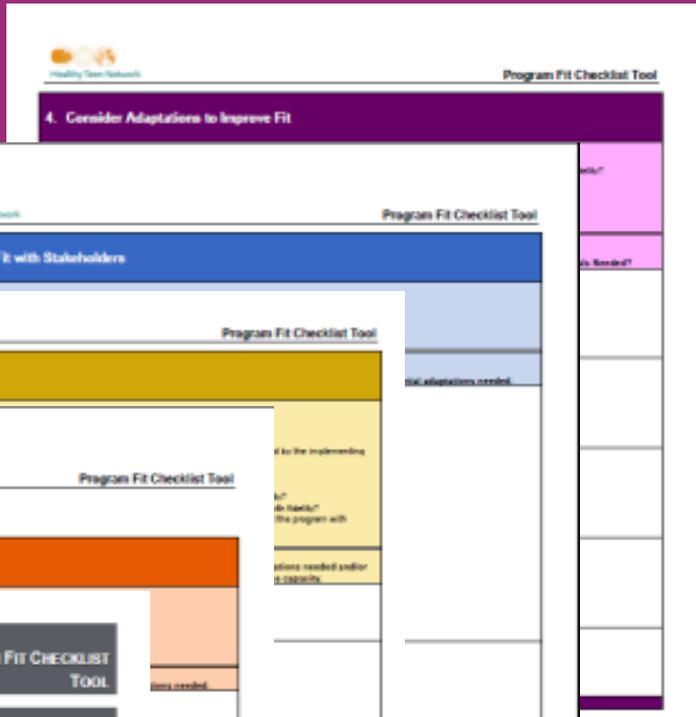


#3: Evidence- Based Approaches

- Use your data & logic model to select an evidence-based program

#4: Fit

- Determine if the intervention suits the needs of your youth, your organization, your community, and your stakeholders



Program Fit Checklist

http://www.healthyteennetwork.org/sites/default/files/Tool_Program%20Fit_0.pdf



What is Fit?

When selecting a program to implement, it is important to select a program that fits the youth, community, organization, and stakeholders because it increases the likelihood that you will be able to implement the program with fidelity, thereby increasing the likelihood of achieving the desired health outcomes.

Fit refers to how well the program matches, or is appropriate for, the community, organization, stakeholders, and potential participants (i.e., youth).

When considering programs, organizations may realize that a program is not a good match for prospective participants or organizational capacities. The implementing organization may want to adapt the program, or it may be more appropriate to select another potential program to explore further.

Often small changes to a program can and should be made to increase fit, especially when it comes to working with your particular youth participants. Thinking about possible adaptations now will help you implement the program with fidelity and quality and avoid making changes on the spur of the moment that may diminish its effectiveness. Understanding fit can help you identify key changes early and thoughtfully make appropriate adaptations ahead of time.

How to Use the Program Fit Checklist Tool

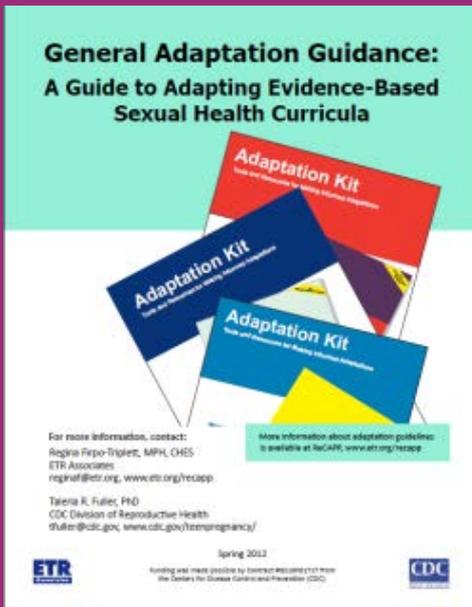
- Healthy Teen Network's Program Fit Checklist Tool helps to walk through the completion of the five steps to assess and select a program that fits:
1. Assess Fit with Participants
 2. Assess Fit with Organization
 3. Assess Fit with Stakeholders
 4. Consider Adaptations to Improve Fit
 5. Narrow the List of Potential Programs & Select a Program that Fits

Complete parts 1-4 of this checklist for each program you are assessing for fit. When you have completed the checklist for each potential program, complete part 5 of this checklist, narrowing your list of potential programs based on your assessment. Refer to your needs and resources assessment for much of this information. You may need to obtain additional information to better assess whether a program will fit for your youth, organization & community.

Organization/Community Information

Implementing Organization: _____
 Community: _____
 Potential Programs: _____
 Priority Population (Potential Program Participants): _____
 Date: _____ Tool Completed By: _____
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Adaptation Resources & Kits



<http://recapp.etr.org/recapp/documents/programs/GeneralAdaptationGuidanceFINAL.pdf>



<http://recapp.etr.org/recapp/index.cfm?fuseaction=pages.adaptationhome>

Adaptations

Research

- Inclusive for All: Adaptations and Supplements to Meet the Needs of LGBTQ Youth (HHS, Office of Adolescent Health); May, 2013
- Wails from the Field (HHS, Office of Adolescent Health); May, 2013
- How Much Change is Too Much Change? Preserving Fidelity While Making Informed Adaptations (HHS, Family and Youth Services Bureau); March, 2013; Slides, Transcript
- Making Adaptations Tip Sheet (HHS, Family and Youth Services Bureau); October, 2012
- Adaptation Guidance for TPP Grantees (HHS, Office of Adolescent Health); June, 2011
- Taking the Mystery Out of Adaptation (HHS, Office of Adolescent Health); April/July 2011

http://www.hhs.gov/ash/oah/oah-initiatives/teen_pregnancy/training/implementation.html#adaptation

#5: Capacities

- Determine if you have what is needed to implement the intervention

#6: Plan



Organizational Capacity Assessment for Teen Pregnancy Prevention (TPP)

What is the Organizational Capacity Assessment for Teen Pregnancy Prevention (TPP)?

This assessment is intended to guide you through a process of assessing your organization's strengths and challenges related to implementing your Teen Pregnancy Prevention (TPP) program. Some questions relate to general organizational resources; others are specific to your TPP program. It is important to adopt a team approach to the completion of this assessment. Involving multiple individuals with various perspectives and ensuring that team members have adequate time to collect accurate and comprehensive data will help you obtain meaningful results. The assessment covers:

Leadership capacity – These items assess how well your TPP program aligns with your organizational mission and the capacity of your organization's leadership team to support your TPP program.

Operational capacity – These items assess whether your organization has sufficient funding for general operations as well as the necessary resources to implement your TPP program.

Management capacity – These items assess whether your organization effectively and efficiently manages financial resources, staff performance, and strategic relationships with partner organizations.

Adaptive capacity – These items assess how well your organization uses data to achieve sustainable impacts and meet the changing needs of your community.

How can results from this assessment help with program sustainability?

Your team can use the information you gain through this assessment process to **prioritize, plan, and monitor** your organization's efforts to increase organizational capacity. Enhancing your organizational capacity is key to ensuring high quality programs and program sustainability. Strategies identified to address organizational challenges should be integrated into your work plan and/or sustainability plan. Follow [this link](#) for additional Office of Adolescent Health resources related to developing a sustainability plan.

Prioritize

Use these results to identify priorities to focus your plan for increasing organizational capacity. You may prioritize areas with lower scores, or you may choose to focus on areas that are of particular importance based on your current stage of program implementation or other contextual factors. Remember, broader organizational functioning can strongly influence program success; don't just focus your attention on items that are directly related to your TPP program.

Plan

As your team works to develop a plan for increasing organizational capacity, you might consider inviting other individuals who were not involved in completing the assessment to contribute to the planning process. For example, your team might identify individuals with particular knowledge of an area that you intend to target or individuals whose support will be particularly critical for successful implementation of the plan (e.g., members of the leadership team or finance office).

Monitor

Once your team has begun to implement the plan (generally 3-6 months), you can use this assessment tool to document progress. You should set specific intervals for your team to reconvene and take the assessment so that you can work together to make necessary adjustments to the plan.

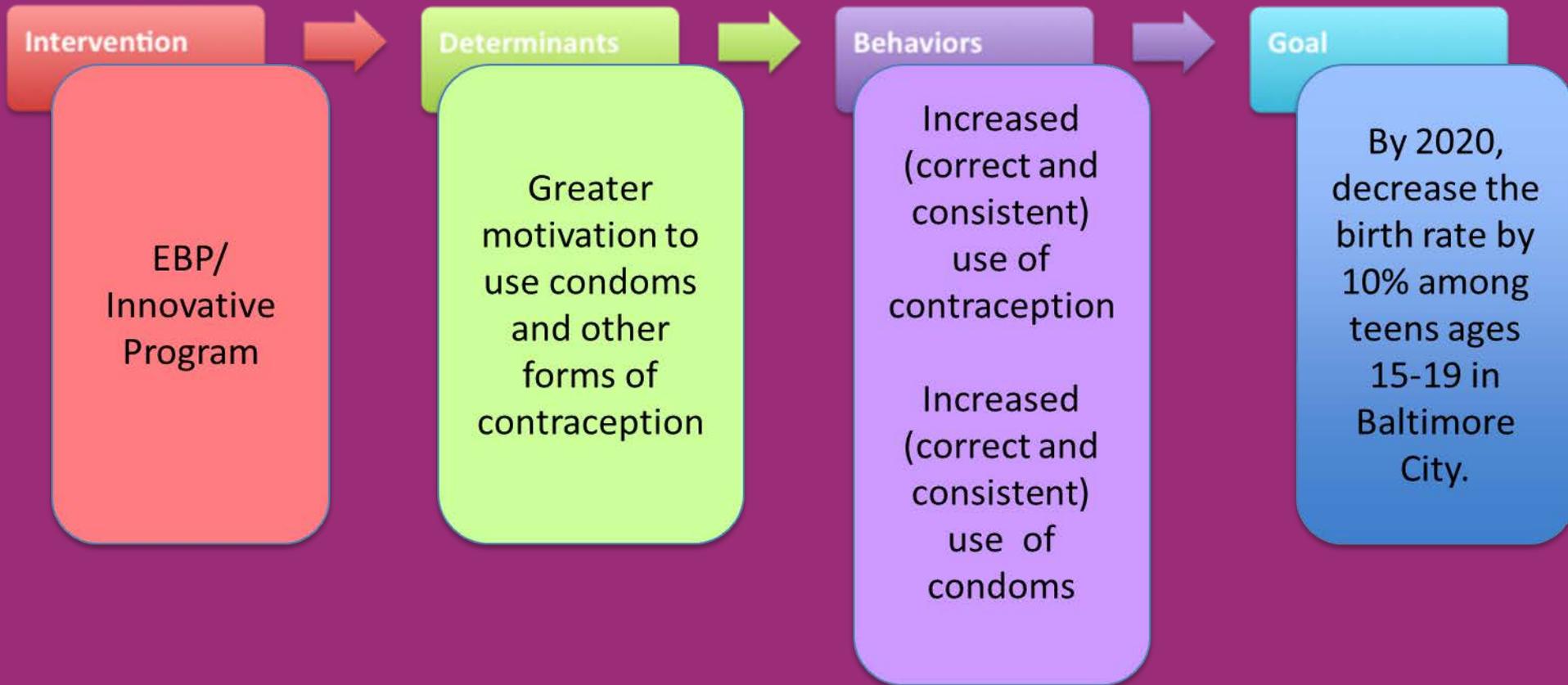
http://www.hhs.gov/ash/oah/oah-initiatives/teen_pregnancy/training/Assests/organizationalcapacity-assessment.pdf

#5: Capacities

- Determine if you have what is needed to implement the intervention

#6: Plan

- Who, what, where, when, how, and how much will it take to implement and evaluate the program?
- Complete logic model.



Behavior-Determinant-Intervention Logic Model



#7:
Implement
/ Process
Evaluation

- Record attendance & dosage
- Assess participant and facilitator satisfaction
- Monitor fidelity
- Document adaptations



#8:
Outcome
Evaluation

- Determine baseline
- Identify behavior changes that can be linked to your intervention



- What went well?
- What needs improvement and how to achieve it?



Continuous Quality Improvement

Continuous Quality Improvement (CQI) is a systematic approach that uses information to make improvements to a program with an emphasis on future results.¹ CQI is an ongoing process of gathering and reviewing process and outcome data in order to improve the program, both during and after implementation. Specific steps in the CQI process are outlined in **Table 1**. However, CQI is a frequently overlooked component of the program implementation process; program implementers may address immediate problems without creating a plan with an intentional feedback loop and system of accountability to ensure that all levels of the program are working smoothly.² CQI is used to make positive changes even when things are going well with a program.

Table 1. Specific Steps in the Continuous Quality Improvement Process³

- **Step 1:** Identify a need/issue/problem and develop a problem statement
- **Step 2:** Define the current situation—break down the problem into component parts, identify major problem areas, develop a target improvement goal
- **Step 3:** Analyze the problem—identify the root causes of the problem
- **Step 4:** Develop an action plan—outline ways to correct the root causes of the problem and specific actions to be taken
- **Step 5:** Look at the results—confirm that the problem and its root causes have decreased, identify whether the target has been met
- **Step 6:** Start over—go back to the first step and use the same process for the next problem

Figure 1. CQI: The Process



How CQI Differs from Process Evaluation

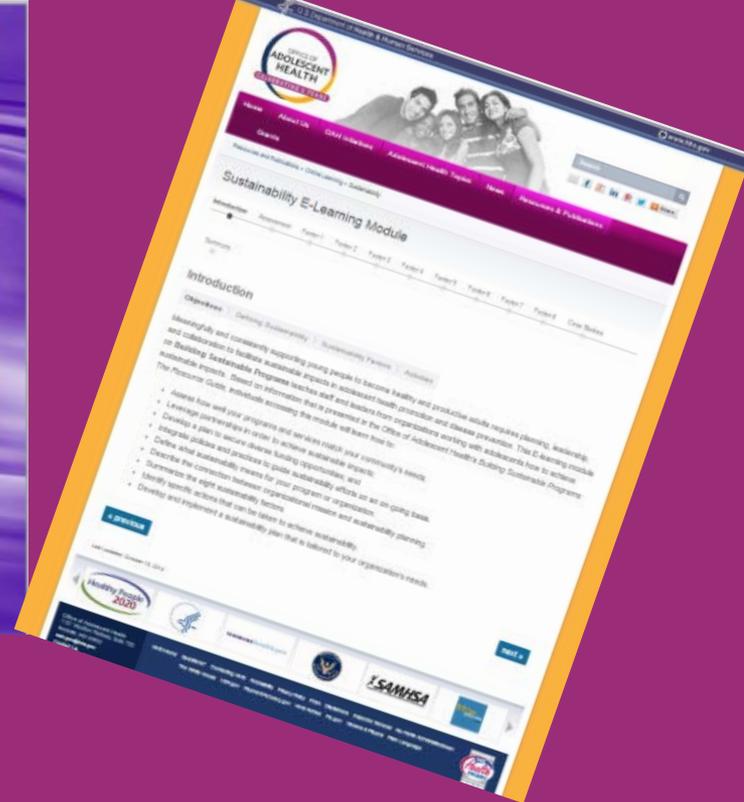
While process evaluation is conducted independently of program activities by internal staff or consultants, CQI is conducted as part of routine program activities by program staff or internal evaluation staff and should not be conducted by an external contractor or consultant. Additionally, process evaluation is designed to answer specific questions about program implementation, acceptability, and/or relevance and addresses values and priorities of stakeholders. CQI, on the other



- What went well?
- What needs improvement and how to achieve it?



- Garner support
- Strive to reach your Health Goal
- Proceed to GTO Step 1

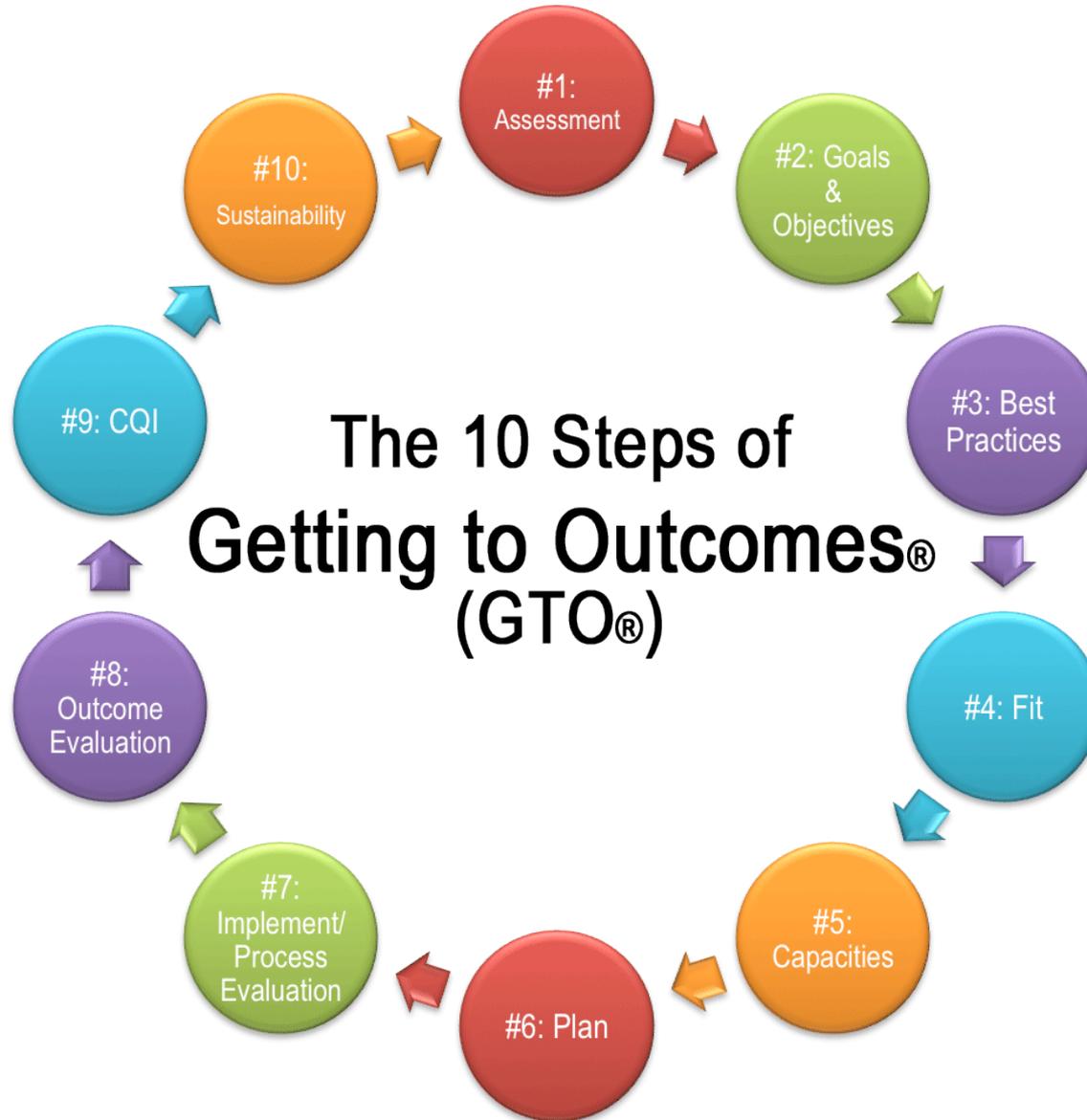


http://www.hhs.gov/ash/oah/snippets/508%20documents/creating_sustainableimpacts_framework.pdf

<http://www.hhs.gov/ash/oah/oah-initiatives/assets/sustainability-resource-guide.pdf>

<http://www.hhs.gov/ash/oah/resources-and-publications/learning/sustainability/index.html>

Let's Talk About GTO



Questions & Answers



What is one “ah-ha” you had during today’s webinar?



- How to Select an Evidence-Based Teen Pregnancy Prevention Program online learning module
<http://www.hhs.gov/ash/oah/resources-and-publications/learning/tpp-evidence-based/>
- Teen Pregnancy Prevention Evidence Review
<http://tppevidencereview.aspe.hhs.gov/EvidencePrograms.aspx>
- Kirby, D. & Lepore, G. (2007). Executive summary: Sexual risk and protective factors. Scotts Valley, California: ETR.
<http://recapp.etr.org/recapp/documents/theories/ExecutiveSummary200712.pdf>



Closure & Feedback

