Amplify Your Results Using Getting to Outcomes®

August 27, 2015 2:00-3:30pm ET
Dial-in Number: 888-390-1454
Conference Passcode: 8272015
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

Deborah Chilcoat, M.Ed.

Abraham Wandersman, Ph.D.

Jamie Keith

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.
An Overview of Getting to Outcomes®

- Evidence-based Approach
- Empowerment Evaluation
- Accountability
- Quality & Fidelity
An Overview of Getting to Outcomes®

Adapted for Teen Pregnancy Prevention
GTO Tools & Resources

Evidence-Based Resource Center

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

The 10 Steps of Getting to Outcomes® (GTO®)

1. Assessment
2. Goals & Objectives
3. Best Practices
4. Fit
5. Capacities
6. Plan
7. Implement/Process Evaluation
8. Outcome Evaluation
9. CQI
10. Sustainability

OAH Milestones & the 10 Steps of GTO
What data do you use to understand teen pregnancy prevention in your community?
Part 1: Goal Setting

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

• Use data to build a logic model
Behavior-Determinant-Intervention Logic Model

Intervention
- This step comes later, when you will select or design an intervention (or program), with activities to change each determinant.

Determinants
- Identify determinants, or risk & protective factors, for each of the behaviors selected.

Behaviors
- Identify important behaviors to be changed.

Goal
- Establish a goal (i.e., health outcome).
Behavior-Determinant-Intervention Logic Model

Intervention: TBD

Determinants:
- Greater motivation to use condoms and other forms of contraception

Behaviors:
- Increased (correct and consistent) use of contraception
- Increased (correct and consistent) use of condoms

Goal:
By 2020, decrease the birth rate by 10% among teens ages 15-19 in Baltimore City.
Part 2: Program Planning

- Use your data & logic model to select a few candidate evidence-based programs
- Use previous data to inform your decision
### Evidence-Based Teen Pregnancy Prevention Programs at a Glance

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/oah-initiatives/teen_pregnancy/training/Assests/ebp-table.pdf](http://www.hhs.gov/ash/oah/oah-initiatives/teen_pregnancy/training/Assests/ebp-table.pdf).

#### Program Overview

<table>
<thead>
<tr>
<th>Program Name</th>
<th>Program Type</th>
<th>Outcomes</th>
<th>Duration of Intervention</th>
<th>Activities</th>
<th>Train-the-Trainer</th>
<th>Train-the-Facilitator</th>
<th># of Sessions</th>
<th>Session Length</th>
<th>Program Duration</th>
<th>Setting</th>
<th>Target Population</th>
<th>Age</th>
<th>Languages</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aban Aya Youth Project</td>
<td>SE</td>
<td></td>
<td>post-intervention</td>
<td></td>
<td></td>
<td></td>
<td>16-21</td>
<td>45 min</td>
<td>4 years</td>
<td></td>
<td>10-14”</td>
<td>En</td>
<td></td>
</tr>
<tr>
<td>Adult identity Mentoring (Project AIM)</td>
<td>YD</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>12</td>
<td>50 min</td>
<td>6 weeks</td>
<td>Y, AA*</td>
<td>(11-14)</td>
<td>En, Sp</td>
<td></td>
</tr>
<tr>
<td>All4You!</td>
<td>YA</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>14</td>
<td>70-140 min</td>
<td>7 weeks</td>
<td>Y, CM*</td>
<td>(0-16)</td>
<td>En</td>
<td></td>
</tr>
<tr>
<td>Be Proud! Be Responsible!</td>
<td>SE</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>6</td>
<td>60 min</td>
<td>6 days</td>
<td>C, S, AA*, CM*</td>
<td>(0-16)</td>
<td>En</td>
<td></td>
</tr>
<tr>
<td>Be Proud! Be Responsible! Be Protective!</td>
<td>Pp*</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>6</td>
<td>60 min</td>
<td>8 days</td>
<td>S, Sp*, As, Cm</td>
<td>(0-16)</td>
<td>En</td>
<td></td>
</tr>
<tr>
<td>Becoming a Responsible Teen (BART)</td>
<td>SE</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>6</td>
<td>90-120 min</td>
<td>8 weeks</td>
<td>C, As*</td>
<td>(0-16)</td>
<td>En</td>
<td></td>
</tr>
<tr>
<td>Children’s Aid Society (CAS) Carrera Program</td>
<td>YD</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>8</td>
<td>3-60 min</td>
<td>7 years</td>
<td>S, As*, Cm</td>
<td>(0-16)</td>
<td>En</td>
<td></td>
</tr>
<tr>
<td>¡Cuide!</td>
<td>SE</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>6</td>
<td>60 min</td>
<td>2 days</td>
<td>S, As*, Cm</td>
<td>(0-16)</td>
<td>En</td>
<td></td>
</tr>
<tr>
<td>Draw the Line/Respect the Line</td>
<td>SE</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>6</td>
<td>90-120 min</td>
<td>7 weeks</td>
<td>C, As*, Cm</td>
<td>(0-16)</td>
<td>En</td>
<td></td>
</tr>
<tr>
<td>Families Talking Together (FTT)</td>
<td>F</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>11 modules</td>
<td>Varies</td>
<td>Varies</td>
<td>Y, AA*</td>
<td>(0-16)</td>
<td>En</td>
<td></td>
</tr>
<tr>
<td>FOCUS</td>
<td>SE</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>4</td>
<td>120 min</td>
<td>8 hours</td>
<td>S, Sp*, As, Cm</td>
<td>(16-17)</td>
<td>En</td>
<td></td>
</tr>
<tr>
<td>Get Real</td>
<td>SE</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td>27</td>
<td>45 min</td>
<td>5 years</td>
<td>Y, AA*</td>
<td>(11-14)</td>
<td>En</td>
<td></td>
</tr>
</tbody>
</table>

*Notes: 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 Types:**
- SE - Sexual education
- AE - Abstinence education
- YD - Youth development
- HIV - Parent with history of HIV
- CB - Clinic based
- P - Program for families

**Outcomes:**
- Evidence of affect

**Settings:**
- S - School
- C - Clinic
- Aa - After school program
- Parenting
- STD - History of STD
- SD - Substance dependent

**Languages:**
- SP - English
- EN - French
- ES - Spanish
- CH - Chinese
- AR - Arabic
- OTHER

Interviews with TPP Program Developers

Becoming a Responsible Teen (BART)

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

Research Professor
Portland State University

http://www.hhs.gov/ash/oah/oah-initiatives/tpp_program/db/
Part 2: Program Planning

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

• 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
Adaptation Resources & Kits

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

http://www.hhs.gov/ash/oah/oah-initiatives/teen_pregnancy/training/implementation.html#adaptation
• Determine if you have what is needed to implement the intervention
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.

Part 2: Program Planning

- Determine if you have what is needed to implement the intervention
- Who, what, where, when, how, and how much will it take to implement and evaluate the program?
- Complete logic model.
EBP/ Innovative Program

Greater motivation to use condoms and other forms of contraception

Increased (correct and consistent) use of contraception

Increased (correct and consistent) use of condoms

By 2020, decrease the birth rate by 10% among teens ages 15-19 in Baltimore City.
Part 3: Program Evaluation

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

- Determine baseline
- Identify behavior changes that can be linked to your intervention
Part 4: Improving & Sustaining Program

- 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. 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. 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 Process

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

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

www.healthyteennetwork.org/sites/default/files/Tip%20Sheet_CQI.pdf
Part 4: Improving & Sustaining Program

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

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


Let's Talk About GTO

The 10 Steps of Getting to Outcomes® (GTO®)

#1: Assessment
#2: Goals & Objectives
#3: Best Practices
#4: Fit
#5: Capacities
#6: Plan
#7: Implement/Process Evaluation
#8: Outcome Evaluation
#9: CQI
#10: Sustainability
What is one “ah-ha” you had during today’s webinar?
• How to Select an Evidence-Based Teen Pregnancy Prevention Program online learning module

• Teen Pregnancy Prevention Evidence Review
  http://tppevidencereview.aspe.hhs.gov/EvidencePrograms.aspx

  http://recapp.etr.org/recapp/documents/theories/ExecutiveSummary200712.pdf
Closure & Feedback