

80% by 2018 Strategic Mapping Evaluation and Measurement Pre-Meeting Survey Results

Mary Doroshenk, MA, NCCRT Director
November 19th, 2014
Washington, DC





80% by 2018 Strategic Mapping Moving Professionals to Action Pre-Meeting Survey Results

What:

- Participants took a 15 question on-line survey

Participants:

- 15 individuals took the survey; 14 organizations represented
- 16 organizations represented at the meeting

Purpose:

- To help inform our work to develop a practical plan for measuring the success of the 80% by 2018 effort in both the short and long term and for both individual organizations and collectively.



Survey Insights – Keys to Success

Convey that participating in the 80% by 2018 effort is not pass/fail.

Use measurement to motivate and course correct; not alienate.

There is no wrong starting point for partners

Be practical about our partners' capacity to evaluate.

Keep it simple.



Survey Insights – Role for NCCRT

Develop overall evaluation framework

As initiatives are designed and launched, create corresponding evaluation component

Continue to development tools and templates to help partners with measurement

Regularly assess satisfaction

Provide motivation with use of website/recognition



Survey Insights

Role of NCCRT in Measurement and Evaluation:

- Develop logic model/metrics related to initiatives
- A strong process evaluation plan is needed. For each function, there should be clear recommendations for strategies to achieve each of the action items as well as an evaluation plan to assess. Use both qualitative and quantitative data
- Structured, regular, but short assessments of satisfaction through surveys or stakeholder interviews
 - Include annual survey and survey after specific events
 - Survey both NCCRT members and 80 by 18 organizations
 - Ask for specific suggestions for improvement
- Provide more evaluation resources in toolkits to members
 - Explanation of various data sources and what they mean
 - Explanation of how to do baseline data



Survey Insights

Role of NCCRT in Measurement and Evaluation:

- Develop visual/clock counter of progress to use as a rallying tool
- Highlight successes on website
- Use nccrt.org as nerve center and track hits/visitors
- Use Blue Star award to recognize innovative/effective programs
- Spur competition between states and/or locales
- Assess what's been created already (tools, collaborations, etc) and then track improvement
- Publish annual report on progress in CA



Survey Insights

Measurement suggestions tended to focus on screening rates for long term.



Survey Insights

What long term measures should we use?:

- Screening rates
- Incidence and mortality
- Adenoma detection rate
- State at diagnosis



Survey Insights

BRFSS allows for national and state reporting

Couple this with national measures that look at segments of the population – UDS, HEDIS GRP

Desire for state/local data

We want to see trends over time across data sources



Survey Insights

Possible nationwide measures:

- BRFSS – most commonly recommended as “official” benchmark/barometer; can provide national and state level data; self report, which can be inaccurate
- NHIS – can be measured in tandem with BRFSS

Nationwide, but population specific data sources:

- UDS – offers snapshot of one segment of population
- HEDIS – covers huge portion of insured population
- GPR – HIS
- Medicare claims data – may be more timely, but may miss FITs or colos that turn diagnostic
- Medicaid claims data – may not be as readily available, but useful for assessing “safety net” population and how we are doing with “Newly enrolled



Survey Insights

Possible nationwide measures:

- BRFSS – most commonly recommended as “official” benchmark/barometer; can provide national and state level data; self report, which can be inaccurate
- NHIS – can be measured in tandem with BRFSS

Nationwide, but population specific data sources:

- UDS – offers snapshot of one segment of population
- HEDIS – covers huge portion of insured population
- GPR – HIS
- Medicare claims data – may be more timely, but may miss FITs or colos that turn diagnostic
- Medicaid claims data – may not be as readily available, but useful for assessing “safety net” population and how we are doing with “Newly enrolled



Survey Insights

Desire for state and local measures:

- ACS is developing county-level screening rates
- BRFSS state level data
- Other regional data sets exists (NYC DOH data)



Survey Insights

Lots of secondary data sources to consider.

Use secondary sources to track progress of specific initiatives and partner efforts.



Survey Insights

Secondary measures:

- Several plugs for using local institutional data (payers, universities, private groups)
- EHR data – work with Arcadia or AMGA to extract
- GIQuic -- assess colonoscopy volume
- New GIs quality reporting requirements
- Annual progress reports from granting agencies
- Health departments and CCCs data from BRFSS and on incidence and mortality
- Quality metrics from university group practices
- CRCCP Data for those participating
- Hospital community partnership initiatives and tracking from CoC.



Survey Insights

Secondary measures to track specific initiatives:

- NCI provider surveys could help assess how well we are moving providers to action
- Assess level of awareness of CRC screening
- Medicaid claims data could assess work with state Medicaid program
- UDS could track work with individual health centers.



Survey Insights

Parking lot issues:

- Should we measure the screening process, ie., how often is a positive FIT followed by colonoscopy?
- Do we need to discuss the denominator? Do we count those who are severely ill or institutionalized?



Survey Insights

Tie short term
measures to
specific initiatives.



Survey Insights

Possible Short term measures:

80 by 18 org activity:

- Number of 80% by 2018 organizations
- Identify key national organizations and set goals for engagement
- Individual member accomplishments
- Number of presentations on CRC screening done at state/local meetings

Provider progress:

- Individual and practice screening rate data for physicians
- Number of patients screened
- Continuing education completed by health care professionals

Consumer changes:

- Changes in awareness, knowledge and behavior
- Marketing research assessment on target population
- 6 month national self report survey



Barriers to partner evaluation efforts



Lack of
Resources

Lack of
expertise

Fear of
results



Barriers to partner evaluation efforts

Solutions

- Provide evaluation training, best practices and tools, ideas – promote existing evaluation toolkit
- Develop core measures and metrics
- Create an evaluation template for common interventions that relate to the 80% by 2018 plan
- Host an evaluation webinar geared toward 80% by 2018 partners around the effort
- Break it up into bite sized chunks, so it feels doable
- Have experts partners do occasional consults
- Keep it simple; but encourage partners to track one measure



Barriers to partner evaluation efforts

Solutions

- Develop a template to record their own success stories
- Recognize both highest achievement and most improved in 2016, 2017 and 2018!
- Remind everyone it's fine where you start – it's about making progress
- Find reasons to celebrate – if a community does not reach 80%, but an individual health system did within that community – celebrate!
- Recognize organizations when they join, when they implement, when they achieve benchmarks
- Celebrate successes that may not be captured by individual benchmarks.



Can we get specific?

What are we tracking and when?

What are we reporting and when?

What are we featuring, celebrating, and/or awarding and when?