## CDC's Center for State, Tribal, Local, and Territorial Support



CDC-RFA-OT21-2103 National Initiative to Address COVID-19 Health Disparities Among Populations at High-Risk and Underserved, Including Racial and Ethnic Minority Populations and Rural Communities

## Performance Measures and Logic Model

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## **Performance Monitoring & Evaluation**

## Purposes

- Monitor recipient use of funds and progress
- Inform CDC's management of the grant
- Understand the extent to which program outcomes are being achieved, and how program strategies and contextual factors contribute to these outcomes
- Contribute to the evidence base for effective health equity practice

## Priority Evaluation Question

To what extent do grant recipients improve capacity and services to address COVID-19 health disparities and advance health equity among populations at higher risk and that are underserved, including racial and ethnic minority groups and people living in rural communities?

## OT21-2103 Logic Model

## **Inputs**

If resources are provided to recipients...

## **Strategies**

to implement flexible strategies focused within COVID 19 activity areas\*...

### **Outcomes**

we expect these to occur...

## **Government funding**



## **Technical assistance**

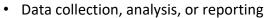


## **Communities**



## 1. Expand existing and/or develop new mitigation and prevention resources and services

- Testing, contact tracing, and case investigation
- Quarantine and Isolation
- Vaccine administration support
- Evidence-based policies, systems, and environmental strategies
- 2. Increase/improve data collection and reporting



- Data systems infrastructure
- Evaluation
- 3. Build, leverage, and expand infrastructure support
- Health equity training
- · Inclusive workforce
- Organization infrastructure and plans
- Health equity staffing
- 4. Mobilize partners and collaborators
- Partnerships
- Culturally appropriate messaging
- Community capacity/engagement
- Council, community group, coalition, or other working group

- Improved state, local, territorial, freely associated state health departments and community capacity and services to prevent and control **COVID-19** infection (or transmission)
- Improved and increased testing and contact tracing

To achieve our ultimate goal

Reduced COVID-19-related health disparities

All in support of populations at high risk and underserved, including racial and ethnic populations and rural communities.



## Poll: Do you see your jurisdiction's work within this logic model?

## **Performance Measures**

- Intended to be used by CDC and recipients to
  - Monitor implementation and progress toward achieving intended outcomes
  - Demonstrate accountability to interested parties by showing how funds are being allocated
  - Maximize learning opportunities associated with the implementation and impacts of this grant
- Other methods of collecting information will also be used to assess progress
  - Work Plan updates
  - Success stories
  - Enhanced evaluation projects

## Reporting

- Recipients will report on measures that align with their selected strategies, and all will report on 4.1 – Partnerships
- Measures will be reported quarterly in REDCap
- Recipients will set targets in initial reporting cycle
- Data validation with CDC

		<b>Jun-Jul 2021</b> (60 days)	Jul-Sep 2021	Oct-Dec 2021	Jan-Mar 2022	Apr-Jun 2022	Jul-Sep 2022	Oct-Dec 2022	Jan-Mar 2023	Apr-Jun 2023
Quarterly Performance / Expenditure Report	Due 30 days after each fiscal quarter. (in REDCap)		Nov 1, 2021*	Jan 31, 2022	May 2, 2022*	Aug 1, 2022*	Oct 31, 2022	Jan 31, 2023	May 1, 2023	Jul 31, 2023

<sup>\*</sup>When the end of a quarter falls on a weekend, the corresponding report will be due the next business day.

## **Performance Measures at a Glance**

	OT21-2103 Strategy	Corresponding Performance Measure(s)
日の日日日日日日日日日日日日日日日日日日日日日日日日日日日日日日日日日日日日	Strategy 1: Expand existing and/or develop new mitigation and prevention resources and services to reduce COVID-19 related disparities among populations at higher risk and that	Measure 1.1: Number of COVID-19 mitigation and prevention resources and services delivered in support of populations that are underserved and disproportionately affected by type
	are underserved.	Measure 1.2: Number of COVID-19/SARS-CoV-2 tests completed by test type, results and race and ethnicity
		Measure 1.3: Caseload, number of cases per case investigator, and number of contacts per contact tracer during the data collection period
MQ.	Strategy 2: Increase/improve data collection and reporting for populations experiencing a disproportionate burden of COVID-19 infection, severe illness, and death to guide the response to the COVID-19 pandemic.	Measure 2.1: Number of improvements to data collection, quality, and reporting capacity for recipients, partners, and agencies related to COVID-19 health disparities and inequities
	Strategy 3: Build, leverage and expand infrastructure support for COVID-19 prevention and control among populations that are at higher risk and underserved	Measure 3.1: Number of improvements to infrastructure to address COVID- 19 health disparities and inequities
11	Strategy 4: Mobilize partners and collaborators to advance health equity and address social determinants of health as they relate to COVID-19 health disparities among populations at higher risk and that are underserved.	Measure 4.1: Number and proportion of new, expanded, or existing partnerships mobilized to address COVID-19 health disparities and inequities



Poll: I feel confident in my jurisdiction's ability to report on the OT21-2103 performance measures.

# Measure 1.1: Number of COVID-19 mitigation and prevention resources and services delivered in support of populations that are underserved and disproportionately affected by type

- Number of: types of COVID-19 mitigation and prevention resources and services delivered in support of populations that are underserved and disproportionately affected
- Type: categorical description of COVID-19 mitigation and prevention resources and services delivered in support of underserved and disproportionately affected populations
- Request to report at the lowest geographical level

## Measure 1.2: Number of COVID-19/SARS-CoV-2 tests completed by test type, results, and race and ethnicity

- COVID-19/SARS-CoV-2 molecular (+positive) and serology tests conducted
- Individuals planned to be tested
- Report by racial and ethnic populations
- Aligns with ELC measure E.2
  - Optional for non-ELC recipients for first reporting cycle
- Request to report at the lowest geographical level

## Measure 1.3:

Caseload, number of cases per case investigator, and number of contacts per contact tracer during the data collection period

- Cases reported to health department (confirmed and, if possible, probable)
- Cases sent to case investigation team
- Contacts identified through case investigators
- Contact tracers
- Report by racial and ethnic populations
- Aligns with ELC measure E.17
  - Optional for non-ELC recipients for first reporting cycle
- Request to report at the lowest geographical level

## Measure 2.1:

Number of improvements to data collection, quality, and reporting capacity for recipients, partners, and agencies related to COVID-19 health disparities and inequities

- Improvements to data collection and reporting
- Improvements to data quality
- Within recipient organization or related partner/agency organization
- All data systems and staffing related to data infrastructure improvements

## Measure 3.1: Number of improvements to infrastructure to address COVID-19 health disparities and inequities

- Improvements to infrastructure within recipient organization
- Improvements to infrastructure across relevant partner or agency organizations
- Excludes data infrastructure
- Can include newly developed, improved upon, or maintained infrastructure

## Measure 4.1:

Number and proportion of new, expanded, or existing partnerships mobilized to address COVID-19 health disparities and inequities

- New partnerships mobilized
- Existing partnerships mobilized
- Expanded partnerships mobilized
- Total partnerships mobilized
- Proportion of each type of partnership auto-calculated in REDCap
- All recipients report
- Funded and unfunded partnerships included

## Q&A

## For additional information, contact us at

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The findings and conclusions in this report are those of the authors and do not necessarily represent the official position of the Centers for Disease Control and Prevention.

