Well Connected Communities (WCC) Initiative: evaluation plan

Draft 5/14/19

Overview of WCC evaluation planning process

- In March 2019, the National 4-H Council contracted with CCHE to collaboratively develop a longitudinal evaluation plan for WCC.

- CCHE conducted 13 interviews with key WCC stakeholders that included a mix of national, state, and local perspectives. Interviews explored what success looks like for WCC, short- and intermediate outcomes, data collection approaches, audiences for the evaluation, and learnings from Wave 1.

- CCHE attended the Utah State Harvest Session to better understand WCC implementation in one state.

- CCHE facilitated two virtual sessions to vet, prioritize, and get feedback on key concepts of the draft evaluation plan with state and local partners. Over the two sessions, 21 partners participated from 8 states, representing a mix of perspectives including 5 youths.

- CCHE reviewed program documents and resources to leverage and align with existing plans and vision for the initiative (e.g., original logic model, WCC portal, WCC QI plan, WCC competencies)

- CCHE participated in weekly check-ins with the WCC leadership team to discuss progress and get feedback on the plan.

- CCHE submitted a draft evaluation plan to the National 4-H Council on May 15, 2019. The plan includes an overall framework for the evaluation and suggestions for potential data collection. CCHE will continue to work with the WCC leadership team to refine the plans for data collection as more details on the scope of the evaluation and specific activities for Wave 2 are determined.

Rationale for investing in a long-term, longitudinal evaluation

- WCC has ambitious goals to promote health equity and create the conditions for a Culture of Health in communities across the country. WCC's success requires that work happens differently at various levels—within communities, within and across the Cooperative Extension System (CES), within and across land-grant universities. Evaluation can help to develop a consistent framework to **ensure common understanding of the initiative** and **explain how various pieces of the initiative fit together**.

- WCC is a long-term initiative with lofty goals to change systems and improve health and equity in communities. Evaluation can help to **define the north star** for the initiative, while also **systematically documenting short and intermediate-term progress** towards achieving its goals. Thus, **helping to tell the story of WCC** as it progresses through different "waves"/funding cycles.

- As a collaborative, community-based initiative, WCC relies on the engagement and commitment of many partners and stakeholders. Evaluation can **demonstrate the effectiveness of different**

elements of the initiative and **show partners the value of their investment(s)**. It can also help **make the case for other stakeholders to invest** in WCC.

- WCC is an opportunity for CES to develop a national model for how to work more collaboratively and partner more effectively with communities. By monitoring progress and facilitating reflection, evaluation can help **define the key components of this national model** and **increase the effectiveness of the model** so that it can be spread across the system.

- WCC is a complex initiative, with many unique features, being implemented in communities across the US. There is not a one-size-fits-all approach to the work. The evaluation can play an important role in **capturing insights and facilitating learning** so that communities can learn from each other and adjustments can be made to increase the effectiveness of the initiative.

- Given the uniqueness of many of WCC's features, evaluation can help to answer questions that help to **inform the field**—e.g., how does systems change happen in an expansive and decentralized entity like CES? What are the unique assets or challenges in rural communities for doing this type of collaborative work? What are structures to support effective youth-adult partnerships?

Evaluation goals

The goals of the evaluation are to:

- Assess the effectiveness of WCC implementation

- Provide real-time feedback to inform and improve the initiative

- Assess the impact of the initiative on the Cooperative Extension System and participating communities and youth

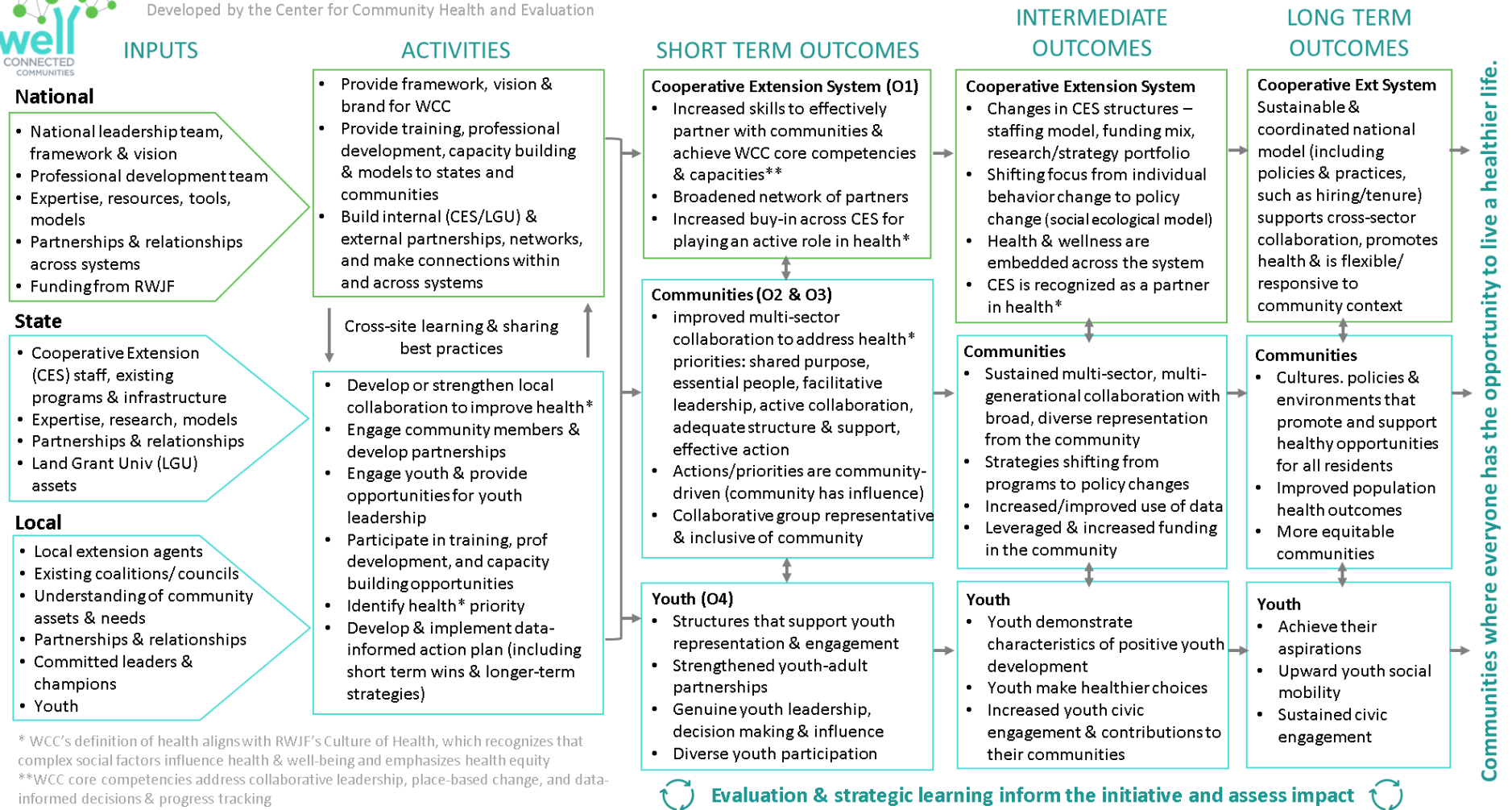- Inform the field by sharing lessons learned and best practices

Description of WCC

- An initiative logic model was adapted from the original logic model developed for Wave 1. The logic model shows the initiative activities and how those are envisioned to lead to outcomes for the Cooperative Extension System, participating communities, and participating youth over a 10-year period (see next page).

- Given the spread planned for the initiative, new communities will be added to the initiative with each wave, thus starting with activities and striving to achieve short term outcomes. It is expected that different communities will achieve the outcomes articulated at different timeframes. However, the long-term outcomes were intended to represent what would be different if the initiative was successful in 10 years.

- The logic model has been reviewed by the WCC leadership team and steering committee. While core concepts have been tested with a broader set of partners through the stakeholder interviews and the virtual sessions, additional work may be required to ensure that the final logic model is reflective of plans for future "waves" of the initiative and community's perception of and experience with the initiative.

WELL CONNECTED COMMUNITIES INITIATIVE LOGIC MODEL (draft 5-17-19)

Developed by the Center for Community Health and Evaluation

INPUTS	ACTIVITIES	SHORT TERM OUTCOMES	INTERMEDIATE OUTCOMES	LONG TERM OUTCOMES

National

- National leadership team, framework & vision
- Professional development team
- Expertise, resources, tools, models
- Partnerships & relationships across systems
- Funding from RWJF

State

- Cooperative Extension (CES) staff, existing programs & infrastructure
- Expertise, research, models
- Partnerships & relationships
- Land Grant Univ (LGU) assets

Local

- Local extension agents
- Existing coalitions/ councils
- Understanding of community assets & needs
- Partnerships & relationships
- Committed leaders & champions
- Youth

ACTIVITIES

- Provide framework, vision & brand for WCC
- Provide training, professional development, capacity building & models to states and communities
- Build internal (CES/LGU) & external partnerships, networks, and make connections within and across systems

Cross-site learning & sharing best practices

- Develop or strengthen local collaboration to improve health*
- Engage community members & develop partnerships
- Engage youth & provide opportunities for youth leadership
- Participate in training, prof development, and capacity building opportunities
- Identify health* priority
- Develop & implement data-informed action plan (including short term wins & longer-term strategies)

SHORT TERM OUTCOMES

Cooperative Extension System (O1)
- Increased skills to effectively partner with communities & achieve WCC core competencies & capacities**
- Broadened network of partners
- Increased buy-in across CES for playing an active role in health*

Communities (O2 & O3)
- improved multi-sector collaboration to address health* priorities: shared purpose, essential people, facilitative leadership, active collaboration, adequate structure & support, effective action
- Actions/priorities are community-driven (community has influence)
- Collaborative group representative & inclusive of community

Youth (O4)
- Structures that support youth representation & engagement
- Strengthened youth-adult partnerships
- Genuine youth leadership, decision making & influence
- Diverse youth participation

INTERMEDIATE OUTCOMES

Cooperative Extension System
- Changes in CES structures – staffing model, funding mix, research/strategy portfolio
- Shifting focus from individual behavior change to policy change (social ecological model)
- Health & wellness are embedded across the system
- CES is recognized as a partner in health*

Communities
- Sustained multi-sector, multi-generational collaboration with broad, diverse representation from the community
- Strategies shifting from programs to policy changes
- Increased/improved use of data
- Leveraged & increased funding in the community

Youth
- Youth demonstrate characteristics of positive youth development
- Youth make healthier choices
- Increased youth civic engagement & contributions to their communities

LONG TERM OUTCOMES

Cooperative Ext System
Sustainable & coordinated national model (including policies & practices, such as hiring/tenure) supports cross-sector collaboration, promotes health & is flexible/responsive to community context

Communities
- Cultures. policies & environments that promote and support healthy opportunities for all residents
- Improved population health outcomes
- More equitable communities

Youth
- Achieve their aspirations
- Upward youth social mobility
- Sustained civic engagement

Communities where everyone has the opportunity to live a healthier life.

* WCC's definition of health aligns with RWJF's Culture of Health, which recognizes that complex social factors influence health & well-being and emphasizes health equity
**WCC core competencies address collaborative leadership, place-based change, and data-informed decisions & progress tracking

Evaluation & strategic learning inform the initiative and assess impact

Evaluation design

CCHE proposes a mixed methods evaluation design focused on initiative implementation and four key outcome domains that emerged from program documents and stakeholder feedback. Over a 10-year period, the evaluation will seek to answer the following questions:

Inputs & Activities	Outcomes
WCC implementation: • What does the WCC structure and support (i.e., the "model") entail? • What elements of WCC support are most/least useful? • What are the benefits and challenges of participation (for CES, LGUs, youth, and communities)? • What are facilitators and barriers to effective implementation? • How can the initiative be improved?	• To what extent has the **Cooperative Extension System** developed a sustainable, coordinated way of partnering with communities nationally to promote equity and advance a Culture of Health? • To what extent and how is **multi-sector, multi-generational collaboration** occurring in participating communities? How effective is the collaboration? • To what extent has WCC contributed to **positive youth development & leadership** in participating communities? • To what extent has WCC had an **impact on participating communities**?

Note: The evaluation plan provides *preliminary* ideas about where and how the evaluation might gather information. During interviews and the virtual learning sessions, stakeholders emphasized that the **evaluation must be mindful of minimizing burden on WCC participants**, particularly at the community-level. Some of the potential data collection methods propose leveraging existing WCC/CES program data or activities, but these methods have not yet been vetted to ensure feasibility. Additionally, the timing of various data collection needs to be aligned with key program activities and decision points. CCHE will work with the WCC leadership team to refine the approach to data collection—including developing a plan for how to leverage existing data/information.

Notations in the below table

- * indicates areas where the evaluation may be able to leverage existing data
- Green font = items that were prioritized in the virtual sessions (outcome questions only)

Domain	Evaluation focus (i.e., indicators)	*Potential* data collection methods	Notes/considerations
WCC implementation	**Systems changes** within CES to successfully engage in the initiative **Types of support provided & roles** of CES and other key partners (e.g., technical assistance, peer exchange, funding, tools/resources) - State/community **participation in support activities** **Benefits & challenges of participating** in WCC (for youth, communities, local/regional/state extension, LGUs) - Usefulness of **peer learning**/sharing best practices **Facilitators and barriers** to effective implementation (e.g., engaging youth, getting decision makers involved) **Contribution of WCC support** to communities' efforts to improve health and increase health equity **Lessons learned** & recommendations for improvements (e.g., what does it take to do this work?)	- Program document review* - Participant surveys - Individual interviews - Virtual or in-person learning sessions*	Ideally, data collection would leverage opportunities to get feedback through existing program requirements and events to minimize burden. Data collection plans will be refined as Wave 2 plans are developed, particularly plans for convenings/learning sessions.

Domain	Evaluation focus (i.e., indicators)	*Potential* data collection methods	Notes/considerations

O1: Cooperative Extension System	• Changes in **individual system leaders & field staffs' capacity/competencies** related to collaborative leadership, place-based change, and data-informed decisions
	• Changes in how CES is **working/collaborating internally** (i.e., within and across CES; within and across LGUs)
	• Changes in how CES is **partnering with the community** to advance a Culture of Health & increase equity
	• Continuum of **strategies/approaches** CES are using to influence change (e.g., more **policy/systems work**)
	• **Structural & cultural changes** within CES that:
	  • Promote collaboration and community engagement
	  • Prioritize health and equity
	Structural/cultural changes may include: shared language, agreement/commitment, job descriptions, staffing, hiring, tenure, funding fix, research/project portfolio.
	• Community partners' perception of CES as a key partner in health and equity
		• Extension Director/PI interviews
		• Extension staff survey
		• Virtual or in-person focus groups
		• Community stakeholder interviews
		• Document review*
			Mostly qualitative. Interested in exploring whether competencies are assessed through other mechanisms or if that would be done as part of this evaluation. The evaluation will need to rely on PIs or others in CES to point to relevant documents that capture the internal changes being made.

Domain	Evaluation focus (i.e., indicators)	*Potential* data collection methods	Notes/considerations

O2: Community collaboration	• Documenting **reach & representation of collaboration**
	   • # of people engaging in collaboration
	   • sectors represented
	   • demographics of those engaging
	• Documenting the **context & nature of collaboration**
	   • Looser network, structured coalition/council
	   • Stage of development
	• Documenting any **new collaborations or partnerships** that formed because of WCC
	• Assessing **collaborative effectiveness** in the following domains:
	   • Shared vision & purpose
	   • Active collaboration (e.g., established trust, shared power/have a voice)
	   • Essential people
	   • Adequate structure/support
	   • Facilitative leadership
	   • Taking action
	• Assessing changes in **individuals' capacity/competencies** related to collaborative leadership, place-based change, and data-informed decisions
	• Understanding how/if **data are being used to inform decisions**
	• Understanding perceived **sustainability/ embeddedness of collaboration** (i.e., structures to support collaborative community-driven work over time, like funding, consistent participation)
		• Community dashboard & reporting*
		• Coalition member survey
		• Select interviews or observations (if linked to other in-person events)
			The evaluation will leverage the community dashboard and reporting to capture information on participation and stage of collaboration. Depending on resources and consideration of burden on communities, may need to sample communities to understand community collaboration more deeply.
			
			NOTE: Stakeholders asked the evaluation to be mindful of how much we are asking of community partners (e.g., surveys)

Domain	Evaluation focus (i.e., indicators)	*Potential* data collection methods	Notes/considerations

O3: Youth engagement	• **Youth participation** in WCC (e.g., # & demographics of youth)
	• **Motivations** for participating
	• **Coalition structure and conditions to engage & empower youth** (e.g., transportation, local, time of day, etc.)
	• Extent to which **youth feel they have a voice, influence decisions, and are in a leadership role**
	• Youths' perception of **benefits and challenges to participating** in WCC
	    • Extent to which youth are forced to "code switch"
	• Effectiveness of **youth-adult partnerships** (e.g., understanding differences, working effectively and respectfully together)
	• Outcomes for participating youth
	    • Making healthy choices
	    • Leadership skills
	    • Community service
	    • Social skills
	    • Citizenship & civic engagement
		• Youth survey (leverage Common Measures data)*
		• Youth virtual/in-person focus groups
		• Interviews with WCC alumni
			Will explore how to leverage existing data being collected from participating youth.

Domain	Evaluation focus (i.e., indicators)	*Potential* data collection methods	Notes/considerations
O4: Community impact in health and equity	• **Types of communities reached** (e.g., location, rural/urban, demographics, contextual factors) • **Health issues being addressed** by communities & changes over time (e.g., nutrition & physical activity, mental health, opioids) • Continuum of **strategies/approaches** communities are using to influence change (e.g.., shift from individual behavior change efforts to more **policy/systems work**) & changes over time in strategies/approaches being used. • Ability to leverage WCC participation to bring in **additional funding** for health and wellness into communities • Unique facilitators and barriers to engaging in this work in **rural communities** • Case studies and stories of **promising practices and community impact** on health and equity	• Community dashboard & reporting* • Select interviews (as needed) • Case studies/stories: site visits, interviews, PhotoVoice, secondary data (County Health Rankings, community assessments)	Focus in Wave 2 would be on understanding the communities being reached and strategies being implemented. The evaluation will also capture success stories throughout the 10-year initiative. However, more evaluation resources would be devoted to case studies in later years.

Analysis & interpretation

Once the data collection plans are finalized, a more robust analytic plan will be developed. Both qualitative and quantitative data will be collected and analyzed.

Quantitative analysis of survey data is expected to consist of frequencies and averages calculated using Microsoft Excel, as well as statistical analysis using statistical analysis software (e.g., SPSS, R) when needed for more complex analyses. Content analysis of qualitative data (e.g., key informant interviews, document review, event observation, and open-ended responses to survey questions) will be conducted using Atlas.ti to identify themes and sub-themes using both a-priori codes from evaluation questions, as well as examining the data for emergent themes.

After the initial analysis is complete, CCHE recommends holding periodic "data dives" or "sensemaking sessions" with key stakeholders to discuss and interpret preliminary data in order to draw conclusions and/or identify areas for further inquiry. These discussions will help to inform any evaluation deliverables and identify adjustments that need to be made to the evaluation plan or approach.

Reporting/communication

Reporting of evaluation results will be aligned with existing communication structures and integrated into reports to Robert Wood Johnson Foundation (RWJF). Final mechanisms for reporting evaluation results will be developed in collaboration with initiative key partners, but communication structures in Wave 2 are anticipated to include:

Stakeholder	Deliverable	Frequency
RWJF	WCC progress reports (evaluation results integrated)	Quarterly
Cooperative Extension System	Report/presentation – what we have learned, pivot points	Annually
PIs/local staff (project leads)	Updates/learnings via existing calls	Quarterly
Community representatives/ collaborative members	TBD – in Wave 1 done through Harvest Sessions	TBD
National 4-H Council	Brief evaluation progress reports on key activities and progress	Monthly

Budget

More details on the budget for Wave 2 (Jan 2020-Dec 2021) are forthcoming. The budget for the evaluation is estimated to be 8-14% of the initiative budget. WCC Leadership Team is considering whether the evaluation contract could start in 2019 to ensure that the evaluation (and any baseline data collection) is ready to go when the program officially launches in January 2020. More details on the evaluation budget will be provided as plans for Wave 2 are developed.

Implementation considerations for Wave 2

This document presents an evaluation framework for a longitudinal evaluation of the 10-year Well Connected Communities initiative. However, the evaluation must also answer relevant and timely questions during each of the two-year waves of the initiative. As plans for Wave 2 are solidified, CCHE will create a more detailed evaluation workplan for Wave 2, including the timing and sequencing of data collection and reporting.

During Wave 2, it is anticipated that the evaluation will focus its resources on:

- Understanding and assessing the effectiveness of implementation—including both the support provided by the national team and the activities being implemented by communities.
- Assessing progress toward short-term outcomes, as defined in the logic model (e.g., engagement, collaborative structure, new partnerships, individual competencies).

In addition, the Wave 2 evaluation will be set up to monitor progress toward intermediate and long-term outcomes. While it is not anticipated that most communities will achieve the intermediate and long-term outcomes articulated in the logic model during Wave 2, the evaluation will capture achievements when there is progress towards these longer-term outcomes. As the data collection plan is finalized, some intermediate outcomes—particularly related to youth engagement—may also be elevated as priorities to focus on during Wave 2.