

Performance Measurement for Public Health Policy

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About This Tool

This tool is intended to help health departments assess and improve the performance of their policy activities. The tool is geared towards health departments that are somewhat familiar with performance measurement and are already engaging in policy activities.

The tool was developed based on existing performance measurement and evaluation guides, as well as on conversations with health departments engaged in policy work.

The first section of the tool gives a brief overview of the role of health departments in public health policy, followed by an introduction to performance measurement within the context of performance management. It also includes a framework on page 5 for conceptualizing the goals and activities of policy work in a health department. The second section of the tool consists of tables with examples of activities that a health department might engage in and sample measures and outcomes for these activities. The tables are intended to provide possible examples of measures that health departments could use to assess the performance of their policy activities. Tool users are encouraged to use or adapt measures to meet their needs. The final section of the tool provides three examples of how a health department might apply performance measurement and the sample measures to assess its policy activities.

Suggestions for improvement and other feedback on the tool is encouraged and welcomed. Please send feedback to sondra.dietz@apha.org.

I. Applying Performance Measurement to Public Health Policy Activities

Public Health Policy and the Role of Health Departments

Policy is recognized as a cornerstone of public health practice. In fact, few public health interventions can affect people's health so broadly and with such impact as policy. Policy changes such as clean indoor air laws and tobacco taxes, for example, are responsible for much of the 50 percent decrease in smoking that occurred in the latter half of the 20th century.¹

Development of policies and plans that support individual and community health is one of the ten *Essential Public Health Services*.² Policy development is also one of the standards for public health accreditation.³ As described in the text box to the right, there are several different types of policies that health departments can use to improve public health.

Today, health departments are actively utilizing public health policy to solve our nation's toughest public health challenges. Policy activities in health departments range from identifying critical health problems, researching and analyzing various policy options, helping to implement solutions, increasing public awareness of existing policies or laws, and evaluating the impacts of policies. Some health departments may be accustomed to engaging in many of these types of policy activities, while some health departments may engage in only one or two. Health departments may also engage in these activities through partnerships with other organizations or government agencies. Regardless of the type of policy activities, this guide is designed to provide a general framework for thinking about performance measurement for policy activities, as well as possible indicators for a range of activities.

Types of Policy

Policies for addressing critical public health problems can be grouped into three types. The most appropriate type of policy for a health department to pursue will vary depending on the particular issue and situation.

Organizational (also known as internal policies) – rules or practices established within an agency or organization, such as those developed by the health department, schools or school districts, private hospitals or other health care delivery sites, or businesses or industries

Regulatory – rules, guidelines, principles, or methods created by government agencies with authority to regulate products or services (a government agency receives authorization to make regulations through legislation), such as standards for child care facilities

Legislative – laws or ordinances established by a federal or state legislature or local governing body

¹ Warner KE, Mendez D. Tobacco control policy in developed countries: yesterday, today, and tomorrow. *Nicotine Tob Res.* 2010 Sep;12(9):876-87.

² CDC. 10 Essential Public Health Services. <http://www.cdc.gov/nphpsp/essentialServices.html>.

³ Public Health Accreditation Board. Standards and Measures. <http://www.phaboard.org/wp-content/uploads/PHAB-Standards-and-Measures-Version-1.0.pdf>.

What is Performance Measurement?

Performance Measurement consists of quantitative or qualitative measures of capacities, processes, or outcomes relevant to the assessment of a performance indicator (e.g., the number of outbreak investigations completed within five days of reporting or the percentage of clients who rate health department services as “good” or “excellent”).

Performance Measurement is a central element to any **Performance Management System**.

Performance Management is the strategic use of performance standards, measures, progress reports, and ongoing quality improvement efforts to ensure an agency achieves desired results. In the case of public health, the ultimate purpose of these efforts is to improve the public’s health and make the community a better place to live.

Thus, **Performance Measurement** is most meaningful within a robust **Performance Management System** that has the following other elements:

- Objective standards of performance with targets or benchmarks to be met
- Reliable reporting of measures to intended users of the indicator data
- A program or process to manage change and quality improvement in policies, programs, processes, or infrastructure based on performance standards, measures, and reports



Figure 1: Public Health Performance Management System

The [Turning Point Performance Management System Framework](#)⁴ developed for the Performance Management National Excellence Collaborative shows how these elements work together. In 2012, the Public Health Foundation (www.phf.org) led a process to review and refresh the Framework to optimize its relevance and applicability to public health organizations. Changes to the Framework included adding representation of organizational leadership and culture to support Performance Management, as well as the arrows to indicate continuous interplay between elements of the Framework.

This tool focuses primarily on Performance Measurement, because that area can be the most challenging for those carrying out public health policy activities.

Applying Performance Measurement to Policy: Why is it Challenging?

Policy work is an essential component of effective public health practice, regardless of whether that work focuses on organizational, regulatory, or legislative policy. Stating the objectives of policy work is a straightforward challenge; achieving those objectives is another matter entirely. Defining the standards that represent success against policy objectives and defining the measures used to evaluate

⁴ www.phf.org/resourcestools/Pages/Turning_Point_Project_Publications.aspx

performance are not complicated activities; however, a framework for doing so in a public health context has not existed until now.

Much of the work in public health consists of the same activities completed in a predictable sequence, with a sequence recurring periodically (e.g., chlorine level inspections, immunization programs). The recurring patterns of steps lend themselves naturally to quality improvement efforts, so that over time activities become more effective and efficient.

Public health policy work does not follow this pattern. Policy work tends to be time-bound—conducted within a defined set of circumstances and is not repeated again and again. However, adopting the practice of assessing performance and considering performance improvement opportunities makes it more likely that future policy work will meet its objectives.

Process for Applying Performance Measurement to Policy

While applying performance measurement to policy work may at first appear challenging, the basic steps are the same as for any other activity. Below are the basic questions health departments can ask themselves to assess and improve their performance and their relationship to the Turning Point Framework:

Questions to Guide Performance Measurement of Policy Work	Corresponding Element of the Turning Point Framework
1. What are the goals of the policy work?	Performance Standards
2. How can we measure and report on the effectiveness of our policy work (i.e., to figure out if policy goals have been met)?	Performance Measures and Reporting
3. What can we do differently that might improve the effectiveness of our policy work?	Quality Improvement

One of the reasons performance measurement of policy work can be challenging is that it is sometimes difficult to define and identify the components of policy work, and the associated goals or results. Figure 2 on the next page offers one framework for conceptualizing the goals and activities of policy work in a health department.

Inside the pyramid, results needed at each phase of policy work appear in **black text**. To the left of the pyramid, the activities required to accomplish those results appear in **green text**. As policy work progresses up the pyramid, health departments can select standards against which to measure success at achieving the result, as well as measures for assessing performance against each standard. The menus of activities provided in the tables that follow include ideas for standards at each level of the pyramid, and examples of quantity, quality, and outcome measures that may be applicable.

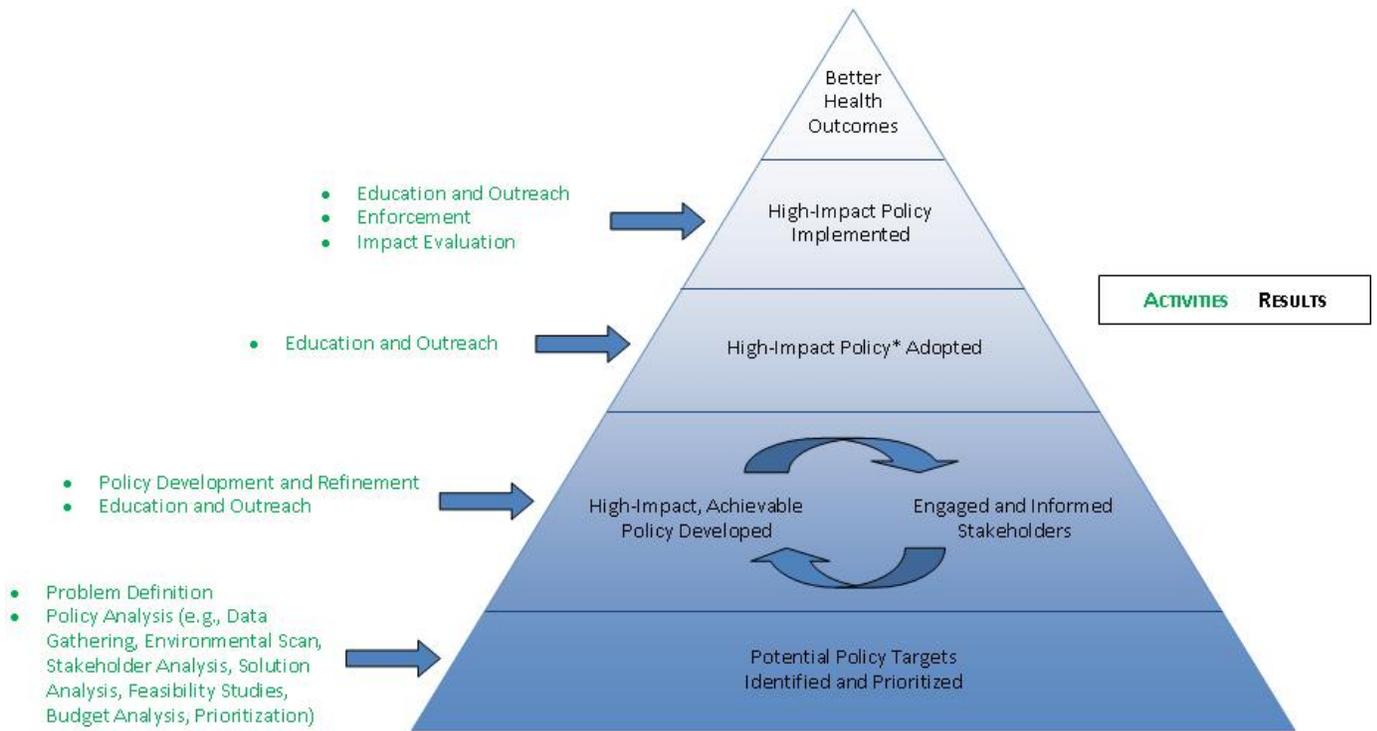


Figure 2: Framework for conceptualizing goals and activities of policy work

* High-impact policies refer to policies that address an important public health problem and are evidenced-based such that their implementation is expected to have a meaningful impact on population health outcomes.

II. Sample Measures

About the Tables

As mentioned earlier in this tool, performance measurement for policy activities begins with defining what success means to your health department and public health, both for the short-term and the long-term. The tables below offer some suggestions of measures a health department may use to evaluate the success of its and others' policy activities. One way a health department may evaluate success is by the **quantity** of activities completed, such as the number of products that have been developed and disseminated about a given policy topic. Another way to measure performance is by the **quality** of policy work, considering factors such as the usefulness of products developed, responsiveness to media inquiries, or effectiveness in conveying information to the public or other stakeholders. A third way is to look at the **outcome** of policy work, for example by assessing how many high-impact policies have been implemented effectively, or the impact of policy changes on health outcomes of interest. **Time** is an overarching measure that applies to quantity, quality, and outcome (e.g., timeliness in completing activities or achieving a particular outcome within a certain timeframe). Health departments should define what timely means to them and set realistic deadlines.

In the following tables are example measures for activities falling in the categories outlined in figure 2:

- Problem Identification & Definition
- Policy Analysis
- Policy Development & Adoption
- Education & Outreach
- Policy Implementation
- Impact Evaluation

For each activity, the tables provide possible measures to assess the quantity of work being conducted, the quality of the work, and the desired outcome or result. The activities and measures included in the tables may be relevant for activities a health department engages in for all three types of policy—legislative, regulatory, and organizational. This is not meant to be an exhaustive list of activities or measures. In addition, health departments are not expected to engage in all of the listed activities. Instead, the activities and sample measures are meant as examples of possible measures for health departments to use as is or modify to suit their needs.

Tips for Selecting Measures

There are a few things a health department should keep in mind when selecting from among the measures in the tables below or creating others:

1. Reporting cycle – Some of the measures below can be reported on monthly, while others can be reported on every few months or even only once during the policy process. Thus, health departments should select measures that are appropriate for their reporting cycle.
2. Existing logic models – Health departments should review existing logic models or defined objectives before selecting or creating measures as a logic model lays out expected changes or results.
3. Utility of the measure – The most useful measure is one that indicates whether or not goals are met. Although a particular measure may provide interesting information, it will not show if efforts are successful unless it can be linked directly to the desired outcomes.

Problem Identification & Definition

Problem identification and definition refers to identifying the problem or problems to address, analyzing the problem to determine the size and scope and causes, describing the problem(s) and scope, and prioritizing the problem(s).

Problem Identification & Definition			
Sample Activities	Sample Measures		
	Quantity	Quality	Outcome
a) Collecting and analyzing data regarding the extent of the problem(s) in measurable terms	<ul style="list-style-type: none"> # of data collection and analyses conducted # of staff hours or dollars expended 	<ul style="list-style-type: none"> Data collection and analysis is useful for describing the impact of the problem and setting priorities among multiple problems (e.g., considers financial cost, mortality, morbidity, who is impacted (e.g., particular geographic region, certain racial or ethnic, age or sex group), immediate and long-term impacts, and causes or factors that contribute to the problem) 	<ul style="list-style-type: none"> Problems that have greatest impact on the community and greatest potential for intervention are identified
b) Describing the problem(s) in measurable terms	<ul style="list-style-type: none"> # of problem statements written # of staff hours or dollars expended 	<ul style="list-style-type: none"> Problem statement effectively conveys the nature of the problem to stakeholders 	
c) Prioritizing the problems that have the greatest impact on the community and the greatest potential for intervention	<ul style="list-style-type: none"> # of problems identified for policy intervention # of staff hours or dollars expended 	<ul style="list-style-type: none"> Data indicates that problems prioritized have a large impact on the community and potential for intervention 	

Policy Analysis

Policy analysis refers to critically examining the problem and the policy environment to develop possible policy solutions and/or decide between multiple solutions.

Policy Analysis			
Sample Activities	Sample Measures		
	Quantity	Quality	Outcome
a) Identifying and analyzing existing policies	<ul style="list-style-type: none"> # of existing policies identified and analyzed # of staff hours or dollars expended 	<ul style="list-style-type: none"> Analysis useful for describing shortcomings and areas for improvement Analysis useful for describing promising ways to address the problem or similar problems (e.g., reflects current evidence-based practices) 	<ul style="list-style-type: none"> High-impact, achievable policies identified and selected from among various policy options
b) Identifying stakeholders	<ul style="list-style-type: none"> # of stakeholder analyses completed 	<ul style="list-style-type: none"> All relevant stakeholders identified (e.g., public, policymakers, organization leaders, other divisions within the health department, coalitions) # of meaningful internal and external contacts made to identify stakeholders 	
c) Analyzing the policy environment	<ul style="list-style-type: none"> # of policy environment analyses conducted # of staff hours or dollars expended 	<ul style="list-style-type: none"> Factors that affect the policy environment and their impact accurately captured by the analysis (e.g., political climate; economic conditions; awareness, needs, interests, preferences, assets, and support of decision makers or stakeholders; availability of resources; past efforts to enact or change policies related to the problem) 	

Policy Analysis			
Sample Activities	Sample Measures		
	Quantity	Quality	Outcome
d) Identifying and analyzing alternative policy solutions	<ul style="list-style-type: none"> • # of alternative policy solutions identified • # of policy analyses performed • # of criteria identified for policy analysis • # of policy analysis products developed and distributed • # of staff hours or dollars expended 	<ul style="list-style-type: none"> • Policy solutions identified that are expected to effectively address the problem • Appropriate criteria established to analyze the policy alternatives (e.g., population benefit, cost, equity, feasibility, stakeholder support) • Analysis directs health department to a possible solution and provides the rationale for why it is expected to address the problem • Alternative policy solutions identified and analyzed, and policy solution ultimately selected • Quantitative and qualitative rationale for selecting a particular policy alternative and decision-making process effectively described in the policy analysis report or decision memo 	See table above on pg. 8

Policy Development & Adoption

Policy development and adoption refers to the process of formulating policies and how a policy moves through the legislative, regulatory or organizational approval process. A key component of policy development involves collaboration with stakeholders. Sample measures for collaboration are described in more detail on the next page under “Education & Outreach.”

Policy Development and Adoption			
Sample Activities	Sample Measures		
	Quantity	Quality	Outcome
a) Drafting high-impact policies	<ul style="list-style-type: none"> # of high-impact policies drafted # of staff hours or dollars expended 	<ul style="list-style-type: none"> Drafted policy matches evidence-based approaches, expert recommendations, and state, local, or organizational needs (e.g., equity, cost) 	<ul style="list-style-type: none"> High-impact, achievable policies developed and adopted
b) Reviewing and revising newly drafted or existing policies, for example at the request of legislators or executive staff	<ul style="list-style-type: none"> # of policies reviewed or revised # of (or # of times) comments, revisions, or recommendations provided # of staff hours or dollars expended 	<ul style="list-style-type: none"> Timely response to requests to review, assess, or revise policies Risks and benefits of the policy thoroughly assessed Recommendations or revised drafts considered or adopted 	
c) Analyzing the health impacts of proposed policies, for example at the request of legislators or executive staff (can include Health Impact Assessments (HIAs))	<ul style="list-style-type: none"> # of policies analyzed # of staff hours or dollars expended 	<ul style="list-style-type: none"> Health impacts of proposed policies accurately captured by the analysis 	
d) Introducing the policy to the approval process	<ul style="list-style-type: none"> # of policies introduced # of legislative hearings or organization meetings held # of staff hours or dollars expended 	<ul style="list-style-type: none"> High-impact policy introduced to the approval process High-impact policy formally adopted 	

Education & Outreach

Education and outreach activities can occur during any stage of the policy change process. Education and outreach refers to the activities a health department engages in to educate stakeholders about a particular health issue or policy—either proposed or implemented. Education and outreach can also be used to share the results of a policy that has been evaluated. Stakeholders may include members from the same community as the health department, but may also include other health departments that may be interested in learning about a new policy approach.

Education & Outreach			
Sample Activities	Sample Measures		
	Quantity	Quality	Outcome
a) Developing an education and outreach plan	<ul style="list-style-type: none"> • # of plans developed • # of staff hours or dollars expended 	<ul style="list-style-type: none"> • Plan effectively captures the purpose, audience, appropriate outreach methods and outlets for each audience, available resources, potential obstacles, how to connect with the media and others who can help disseminate the message, plan of action, and how these efforts will be evaluated 	<ul style="list-style-type: none"> • # or % of stakeholders aware of or knowledgeable about the issue or policy or with increased awareness or knowledge • # and types of actions stakeholders take as a result of the information received • # or % increase in supporters of the policy and types of supporters
b) Developing and disseminating educational materials about the health issue or policy (could include guidance on implementing the policy, or the results of a policy evaluation)	<ul style="list-style-type: none"> • # and types of educational materials developed and disseminated (e.g., fact sheets, PSAs, press releases) • # and types of audiences reached or targeted • # of staff hours or dollars expended 	<ul style="list-style-type: none"> • Materials effectively convey information about the health issue or policy to stakeholders 	

Education & Outreach			
Sample Activities	Sample Measures		
	Quantity	Quality	Outcome
c) Hosting educational events (e.g., briefings, meetings, presentations, trainings)	<ul style="list-style-type: none"> • # and types of educational events held (including dates and locations) • # of attendees to each event • # of staff hours or dollars expended 	<ul style="list-style-type: none"> • Participant satisfaction with educational events • Educational events effectively convey information about the issue or policy 	<ul style="list-style-type: none"> • # or % increase in partners and coalitions that collaborate, coordinate activities, and agree on important issues
d) Conducting outreach and sharing key messages with stakeholders	<ul style="list-style-type: none"> • # of times education and outreach conducted • # of stakeholders reached out to • # of staff hours or dollars expended 	<ul style="list-style-type: none"> • Types of education and outreach conducted • Stakeholders support addressing the issue or the policy/likely to take action as a result of outreach <ul style="list-style-type: none"> ○ # of Fans, Likes, or Tweets for social media ○ % of stakeholders with favorable attitudes toward or interest in the issue or policy (e.g., say the issue or policy is important to them, claim to support the issue or policy, say they are willing to take action on behalf of a specific issue or policy) ○ % of stakeholders who take action and types of activities (e.g., voting, contacting representative, speaking out, signing on) ○ # of attendees at educational events (e.g., meetings, briefings) • Increased breadth of supporters <ul style="list-style-type: none"> ○ # of new individuals or groups expressing support • Policymakers or organization leaders support addressing the issue or the policy/likely to take action <ul style="list-style-type: none"> ○ # of decision makers who publicly support the effort (e.g., issue press releases, give testimony, declare support) ○ # of times key messaging or health department products utilized by decision makers (e.g., speeches, debates, board meetings) ○ # of decision makers attending or hosting educational events ○ # of decision makers sponsoring and cosponsoring legislation 	<ul style="list-style-type: none"> • # or % of stakeholders that vote in support of the policy

Education & Outreach			
Sample Activities	Sample Measures		
	Quantity	Quality	Outcome
e) Conducting outreach and sharing key messages with media outlets	<ul style="list-style-type: none"> • # of outreach attempts to media • # of media outlets reached out to • # of staff hours or dollars expended 	<ul style="list-style-type: none"> • # of successful outreach attempts to media • Information about the issue or policy highly visible in the media/ issue increasingly salient in the media <ul style="list-style-type: none"> ○ # of reporters or media outlets reporting on the issue (including names of outlets) ○ # and geographic locations of reporters or media outlets reporting on the issue (i.e., how far-reaching is the issue) ○ # of times the issue appears and dates (e.g., over several months) ○ Page in print media or section of the website the story appears ○ # of times an ad is displayed (i.e., impressions) ○ Open-rate or click-through rate on e-mail messages to media outlets (i.e., number of unique individuals who click on one or more links in an e-mail expressed as a percentage of the total number of people who opened the e-mail) • Issue or policy accurately portrayed by the media <ul style="list-style-type: none"> ○ Issue is framed accurately ○ Key messaging included and # of times it appears • Stakeholders reached by media outlets covering the issue or policy <ul style="list-style-type: none"> ○ Readership, viewership, or listener data from news outlets reporting on the issue ○ # of op-eds, letters to the editor, etc. and author ○ # of web page views (if web link mentioned in coverage) • Health department or partners recognized as trusted source of information (also applies to “e)” below) <ul style="list-style-type: none"> ○ # of media outlets, reporters, or stakeholder that reach out for information ○ # or % of media outlets, reporters, or stakeholders who believe health department or partners are an authority on the issue or policy ○ Open-rate on e-mails sent by health department or partners ○ % of communications to media outlets, reporters, or stakeholders returned 	See table above on pgs. 11-12

Education & Outreach			
Sample Activities	Sample Measures		
	Quantity	Quality	Outcome
f) Responding to requests for health policy information	<ul style="list-style-type: none"> • # of requests received • # of requests fulfilled • # of staff hours or dollars expended 	<ul style="list-style-type: none"> • Types of requests (e.g., resources, invitations for health department staff or partners to speak as experts, requests to review or draft policies) • Type of stakeholders making the request (e.g., public, policymakers, organization leaders) • Requests responded to in a timely manner 	See table above on pgs. 11-12
g) Building or sustaining active and cohesive coalitions or partnerships	<ul style="list-style-type: none"> • # of coalitions or partnerships established • # of (new, active, etc.) coalition members or partners • # of coalition or partner meetings held • # and description of trainings held for coalition members or partners • # of staff hours or dollars expended 	<ul style="list-style-type: none"> • Roles and responsibilities of the coalition or partners defined (e.g., media outreach, policy enforcement) • Description of meeting outcomes (e.g., were decisions made, what decisions were made) • # or % of members or partners who are active (e.g., attend meetings, serve on committees) • # or % of members or partners that collaborate on activities (e.g., develop and disseminate information, perform a specific task, connect an additional member) • # or % of members or partners that agree on important issues (e.g., common language to describe the issue or policy) • Coalitions or partnerships established by target deadline or per specified time period • Coalition and partner activities completed by target deadline or per specified time period 	

Policy Implementation

Policy implementation refers to the activities a health department engages in to ensure that a new policy or a change to an existing policy is implemented and enforced appropriately and consistently.

Policy Implementation			
Sample Activities	Sample Measures		
	Quantity	Quality	Outcome
a) Developing a policy implementation plan	<ul style="list-style-type: none"> • # of plans developed • # of staff hours or dollars expended 	<ul style="list-style-type: none"> • Plan that identifies: the purpose, description of the policy to be implemented, description of the implementation and enforcement strategies and what will be accomplished by each of those strategies, description of how the implementation will be managed and the major tasks involved, required resources (including those responsible), and a plan for evaluating the implementation process 	<ul style="list-style-type: none"> • # or % of high-impact policies effectively implemented • # or % of stakeholders who modify their behavior
b) Training policy implementers	<ul style="list-style-type: none"> • # and types of trainings held • # and types of implementers trained • # of staff hours or dollars expended 	<ul style="list-style-type: none"> • Participant satisfaction with training • Trainings effectively convey information about implementing the policy 	<ul style="list-style-type: none"> • # or % of stakeholders who modify their behavior

Policy Implementation			
Sample Activities	Sample Measures		
	Quantity	Quality	Outcome
c) Monitoring the implementation process and assessing impacts	<ul style="list-style-type: none"> • # of times and frequency of monitoring and assessment • # of staff hours or dollars expended 	<ul style="list-style-type: none"> • Policy is consistently implemented and enforced as intended <ul style="list-style-type: none"> ○ # or % of settings/sectors/municipalities that have adopted or complied with the policy in accordance with plans ○ # or % and demographics of stakeholders reached by the policy as compared to projected numbers and demographics ○ # of enforcement actions (e.g., compliance checks, warnings, penalties) ○ # or % of stakeholders who report complying with the policy • Positive feedback about the policy received from stakeholders before and after implementation • # or % of stakeholders that report that the implementation is acceptable, feasible, affordable, etc. • Costs in-line with predictions • Monitoring and assessment activities completed by target deadline or per specified time period 	See table above on pg. 15
d) Revising the policy as needed	<ul style="list-style-type: none"> • # of revisions made to the policy • # of staff hours or dollars expended 	<ul style="list-style-type: none"> • Responsive to requests to review or revise policies • Suggestions for revising the policy or revised drafts adopted • Solutions developed that address issues with implementation 	

Impact Evaluation

Impact evaluation refers to evaluating the effects of the policy on the health issue. The measures included in the previous tables can help health departments evaluate the policy process from problem identification and definition through policy implementation. The measures in this table focus on assessing your evaluation efforts and evaluating the impact of the policy and whether or not better health outcomes have been achieved.

Impact Evaluation			
Sample Activities	Sample Measures		
	Quantity	Quality	Outcome
a) Developing an evaluation plan	<ul style="list-style-type: none"> • # of plans developed • # of staff hours or dollars expended 	<ul style="list-style-type: none"> • Plan useful for evaluating the policy and includes evaluation questions, indicators that show what will be measured, written list of data sources and the method of data collection, timeframe, plan for data analysis and communicating the results, and designated responsibility for carrying out the evaluation 	<ul style="list-style-type: none"> • # of high-impact policies evaluated for effectiveness and refined • # of improved policies developed, adopted, and implemented
b) Collecting and analyzing data to document the policy's impact and any unintended consequences	<ul style="list-style-type: none"> • # of data collection and analyses conducted • # of staff hours or dollars expended 	<ul style="list-style-type: none"> • Data is useful for conveying changes in financial cost, mortality, morbidity, disparities, behavior (e.g., compliance) or attitudes reported by stakeholders, etc. 	<ul style="list-style-type: none"> • # of people reached • % of stakeholders (e.g., people, organizations) that comply with the policy
c) Revising the policy as needed, based on evaluation	<ul style="list-style-type: none"> • # of policies revised • # of times revisions provided • # of staff hours or dollars expended 	<ul style="list-style-type: none"> • Timely response to requests to review or revise policies • Suggestions for revising the policy or revised drafts adopted 	<ul style="list-style-type: none"> • Change in attitude towards the health issue • Improved health outcomes and equitable distribution of those outcomes

III. Putting it All Together

To conclude the tool, this section includes three examples of how a health department can apply performance measurement and the sample measures from the tables above to assess its policy activities.

Example #1

Local Health Department X has engaged in a strategic planning process and identified their policy goals for the upcoming year. Because of the high rates of tobacco use in the city, one of these goals is to encourage property owners and managers of multi-unit buildings to implement smoke-free housing policies. With this goal in mind, LHD X has established targets that it hopes to meet. It plans to assess its progress towards meeting these targets quarterly.

LHD X’s primary activities center around policy development and adoption, education and outreach, and policy implementation. Recall that education and outreach can happen before, after, or simultaneously with other activities, so the table below is not in chronological order.

Target/Benchmark	LHD X’s Measures
Policy Development & Adoption	
Review at least 5 multi-unit smoke free housing policies from other jurisdictions by X date	<ul style="list-style-type: none"> • # of smoke-free housing policies reviewed • Target met by deadline
Draft one sample smoke-free policy for adoption that matches evidence-based or promising approaches by X date	<ul style="list-style-type: none"> • # of policies drafted • Drafted policy matches evidence-based or promising approaches • Target met by deadline
Meet with at least 50% of property owners/managers of multi-unit buildings in the city in-person to present the draft policy by X date	<ul style="list-style-type: none"> • % of property owners/managers met with • Target met by deadline
At least 20% of property owners/managers agree to adopt the policy by X date	<ul style="list-style-type: none"> • % of property owners/managers that agreed to adopt the policy • Target met by deadline
Education & Outreach	
Disseminate educational materials about the importance of adopting smoke-free housing policies to ≥90% of property owners/managers by X date	<ul style="list-style-type: none"> • % of property owners/managers that received materials • Target met by deadline
Reach out to the top five print, TV, and radio news media outlets in the city to pitch a story about the importance of adopting smoke-free housing policies; have the issue covered by at least one of each outlet type by X date	<ul style="list-style-type: none"> • # of outlets pitched to • # of outlets that covered the issue • Target met by deadline
Policy Implementation	
Provide technical assistance and training to at least 80% of the owners/managers that agree to implement the policy by X date. At the conclusion of the training, ≥90% of attendees report that the training better prepared them to implement the policy. Trainings completed within budget.	<ul style="list-style-type: none"> • % of property owners/managers that received training • Target met by deadline • % of attendees that reported that the training better prepared them to implement the policy • Cost of training
At least 20% of property owners/managers implement the policy by X date	<ul style="list-style-type: none"> • % of property owners/managers that implemented the policy • Target met by deadline

Example #2

The primary way that State Health Department Y engages in policy work is by coordinating bill analyses at the request of state legislators and their staff. This involves providing information, testifying before legislative committees, suggesting amendments, and tracking a bill's progress. Once SHD Y receives a request for bill analysis, they work closely with subject matter experts within the health department—or with other state departments if the bill pertains to more than just health department programs—to turn the bill around within 24 hours. The office diligently tracks the time between when they receive a bill to when the analysis is completed. Because the majority of SHD Y's policy work occurs during the legislative session, they plan to assess their progress at the end of each session.

Target/Benchmark	SHD Y's Measures
Policy Analysis	
Respond to ≥95% of the requests received for bill analysis within 24 hours	<ul style="list-style-type: none"> • % of requests responded to within 24 hours
Enter completed bill analyses into the bill tracking tool within 24 hours of their completion	<ul style="list-style-type: none"> • % of completed analyses entered into tracking tool within 24 hours of completion
Respond to 100% of requests to appear before a legislative committee	<ul style="list-style-type: none"> • % of requests responded to
Collaborate successfully with appropriate health department or external staff on 100% of policy analyses (where deemed necessary)	<ul style="list-style-type: none"> • % of policy analyses collaborated on
Suggest alternative policies or amendments to 100% of policies (where deemed necessary); ≥75% of these suggestions are adopted	<ul style="list-style-type: none"> • % of alternatives or amendments proposed • % of suggestions adopted by legislators

Example #3

Five years ago, in State Z, new playground safety regulations were adopted. To determine if there were any changes in childhood injuries during the first five years after the regulations were implemented, State Health Department Z plans to collect medically attended injury incident reports for children ages 14 and younger filed by child care centers, schools, and after-school programs for the five-year period. SHD Z will enter the information into a database and then analyze the data. They will make recommendations for the policy based on their findings and present it to the regulatory agency for consideration.

Target/Benchmark	SHD Z's Measures
Impact Evaluation	
Develop an evaluation plan by X date	<ul style="list-style-type: none"> • Evaluation plan developed by deadline
Collect relevant data to document the policy's impact by X date	<ul style="list-style-type: none"> • Data collection completed by deadline • Data conveys changes in injury rates
Analyze data by X date	<ul style="list-style-type: none"> • Data analysis completed by deadline
Policy shows improved health outcomes and equitable distribution of those outcomes by X date	<ul style="list-style-type: none"> • % decline in the annual rate of medically attended injury • Data indicates that there is equitable distribution of improved health outcomes
Suggestions made for improving the policy are adopted by the regulatory agency by X date	<ul style="list-style-type: none"> • Improved policy is adopted by deadline

Bibliography

The Annie E. Casey Foundation. (2007). A Guide to Measuring Advocacy and Policy. Retrieved from <http://www.aecf.org/upload/PublicationFiles/DA3622H5000.pdf>

Describes the landscape and context for evaluation of policy work and offers guidance about specific evaluation approaches that are relevant to the policy arena. The guide provides a menu of outcomes (e.g., shift in social norms), the strategies associated with the outcomes (e.g., media activities), and unit of analysis (e.g., population groups).

Audience: The primary audience is foundation officers and other grant-making organizations, but it also applies to organizations engaged in policy work.

The Annie E. Casey Foundation. (n.d.). A Handbook of Data Collection Tools: Companion to A Guide to Measuring Advocacy and Policy. Retrieved from http://www.organizationalresearch.com/publicationsandresources/a_handbook_of_data_collection_tools.pdf

Companion to “A Guide to Measuring Advocacy and Policy.” Provides examples of tools and processes for collecting useful information from policy efforts. Provides data collection options for broad outcome areas including: Shifts in Social Norms, Strengthened Organizational Capacity, Strengthened Alliances, Strengthened Base of Support, Improved Policies, and Changes in Impact.

Audience: The primary audience is foundation officers and other grant-making organizations, but it also applies to organizations engaged in policy work.

The Annie E. Casey Foundation. (2004). A Practical Guide to Documenting Influence and Leverage in Making Connections Communities. Retrieved from <http://www.aecf.org/upload/publicationfiles/cc2977k439.pdf>

Provides concrete approaches to documenting influence and leverage outcomes.

Audience: This guide is directed specifically to a Making Connections (family strengthening / community change demonstration project) audience; however, the content is relevant to a wide range of partners involved in community and systems change work.

The Annie E. Casey Foundation. (2007). A Road to Results: A Performance Measurement Guidebook for the Annie E. Casey Foundation’s Education Program. Retrieved from <http://www.aecf.org/upload/PublicationFiles/Education.pdf>

Offers information about understanding performance measurement, selecting performance measures, setting performance goals, and reporting performance results.

Audience: Education grantees and others interested in the topic of performance measurement.

The California Endowment. (2005). The Challenge of Assessing Policy and Advocacy Activities: Strategies for a Prospective Evaluation Approach. Retrieved from http://www.calendow.org/uploadedFiles/Publications/Evaluation/challenge_assessing_policy_advocacy.pdf

Recommends an evaluation strategy for prospectively evaluating policy activities.

Audience: The document is geared towards policy grant projects but is applicable to all policy projects.

The California Endowment. (2006). The Challenge of Assessing Policy and Advocacy Activities: PART II—Moving from Theory to Practice. Retrieved from http://www.blueprintrd.com/text/06_10_challengeofassessing.pdf

Compilation of feedback from a meeting to discuss Part I of the report and generate ideas on how to implement it.

Audience: The document is geared towards policy grant projects but is applicable to all policy projects.

Center for Training and Research Translation. (2011). Policy Evaluation Framework. Retrieved from <http://www.center-trt.org/index.cfm?fa=evidence.evaluation>

Includes a sample logic model, sample evaluation plan, and tips for developing a logic model and evaluation plan. Also includes sample evaluation questions for formative evaluation, process evaluation, and outcome evaluation as well as suggestions for data collection.

Audience: Specifically geared towards policies targeting environmental and behavioral obesity-related outcomes, but could be adapted to other policy topics.

Harvard Family Research Project. (2009). A User's Guide to Advocacy Evaluation Planning. Retrieved from <http://www.hfrp.org/var/hfrp/storage/fckeditor/File/file/Supporting%20files%20for%20publications/UserGuideAdvocacyEvaluationPlanning.pdf>

The tool has four steps to complete in sequence: focusing, mapping, prioritizing, and designing. Focusing involves understanding who the evaluation's users are and how they will use the evaluation, as well as what evaluation questions they want answered; mapping involves developing a visual map of the strategy being evaluated (logic model); prioritizing involves prioritizing what to evaluate and how; and designing involves deciding what data points will be captured and how. Includes a planning worksheet.

Audience: Organizations involved in policy work, evaluators, funders, or other stakeholders.

Northern California Grantmakers. (2004). Evaluating Philanthropic Support of Public Policy Advocacy: A Resource for Funders. Retrieved from <http://www.publicpolicytoolkit.org/pdfs/ncgevaluatingppgm.pdf>

Provides case studies of different approaches to evaluating policy work, analyzes the potential strengths and weaknesses of these different approaches, and raises questions to be considered when designing an evaluation.

Audience: The guide is geared towards funders. However, the evaluation approach and lessons learned may be helpful to those developing their own policy evaluation plan.