

# Collective of Results and Evidence

## Year Two: Exploring Capacity Building



County of Santa Cruz, Human Services Department

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*“CORE is a broader movement where funders, providers, policymakers and community are working together to achieve collective action.”*

- CORE Training Participant

## Background

The Collective of Results and Evidence-Based Investments (CORE) provides \$5.3 million in grants to organizations providing social safety net services to the community through a combination of funding from both the City and County of Santa Cruz. The County's investment is \$4.1 million. In fiscal year (FY) 2018-19 the County allocated funding to 67 programs operated by 40 agencies. The Human Services Department (HSD) administers funding to 65 of these programs and the Health Services Agency administers funding to 2 programs.

- 40 County CORE Funded Agencies
- 67 County CORE Funded Programs
- 65 HSD Administered CORE Programs<sup>1</sup>

The purpose of the report is to provide an update to the Board of Supervisors regarding HSD administered programs in the second year of a four-year contract cycle. This report focuses on the self-reported capacity of the funded programs to provide evidence-based services and is organized in three sections:

- Capacity Gains
- Capacity to Report on Performance Measurements
- Capacity Building.

The information presented in this report is from the required annual progress reports, which are sent to HSD by CORE programs at the end of the fiscal year. These progress reports provide cumulative information for the past fiscal year. HSD provides an individualized report template to each CORE program, which requests information on three areas: performance measurements, successes and challenges, and feedback on training. It is important to note that **this report includes information from 64 of the 65 programs**, as funding for one program ended during the fiscal year.

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<sup>1</sup> One contracted agency, Parents Center, was funded for two programs that are managed directly by the Health Services Agency (HSA) in order to meet Federal requirements for matched funding for the Early and Periodic Screening, Diagnostic, and Treatment (EPSDT) program, resulting in 65 programs that HSD monitors.

## Capacity Gains

Providing effective services to the most vulnerable in the community is one of the underpinnings of the CORE funding model. All the programs funded by CORE are considered evidence-based, although the level of evidence for each program varies along a spectrum. Some programs are based on evidence from published research, while others are informed by independent evaluations, and still others are informed by locally collected information. For a definition of EBP please see Appendix A.

The original proposals from CORE funded programs indicated that programs were starting at different points in implementation of EBPs. For example, some programs operated an EBP for many years while others started a new EBP in this contract cycle. This impacted the nature of the capacity gains (or successes) of programs and resulted in a wide variety of responses regarding gains. However, central themes emerged that articulated the benefits of an EBP approach.

Nearly half of the programs reported capacity gains with **using data to inform program planning and service delivery**. Comments in program annual reports reflected that many programs see value in the effort and the practice has led to improved services. Some programs noted new efforts to increase information regarding their services. For example, a youth community-based program reported they “...joined a team of 12 organizations nationwide, dedicated to the research and study of evidence-based practices for community-based organizations.” Other programs emphasized that using data has improved their services. A re-entry program supporting previously incarcerated individuals stated, “Implementing the CORE funded EBP model has encouraged staff to be more intentional about the way we work with clients and help them navigate our program and their reentry.”

Quite a few programs noted the CORE funding increased their capacity to provide **training on EBPs**. A volunteer-based organization serving children involved with child welfare stated, “One of the areas of growth and success we are most proud of is the revision of the training we provide.” A program serving those who are/were at risk of homelessness described that the EBP training their staff completed resulted in staff’s enhanced capacity to build rapport with participants and ability to help them succeed in their goals. Another program highlighted this success by citing that the training on EBPs helped the program to provide consistent quality care amid staff changes.

There were also programs that noted they had capacity gains **in adapting EBPs as necessary and/or improving fidelity to a model**. One program noted, “The most growth within the program related to the EBP surrounds efforts to deliver higher quality and model fidelity services. Several opportunities to enhance the curriculum and bring it into increased alignment with the model were identified and implemented.” (A definition of fidelity can be found in Appendix A.)

In addition, several programs shared that the process of implementing their EBP led to **enhancements within their agency** in some manner. One program articulated this well by stating that implementing the EBP helped them move their organization closer to a shared goal and purpose. Several other programs reported that the primary gains they noted were related to the fact that an EBP helped **make impact** on their intended outcomes. There were a multitude of examples of how this was expressed, and several programs emphasized that they were better able to meet the needs of their clients and saw excellent results due to the EBP. For example, one youth program based in South County reported that the EBP they have used was effective in helping them exceed some of their outcome targets.

## Capacity to Report on Performance Measurements

Each agency has one Scope of Work (SOW) per program in their contract, which details the expected program performance measurements. Each SOW is divided into four domains that answer three central questions, as described below.

<b>How much is done and for whom?</b>	
<b>Activities</b>	The number of “primary” or major components of services provided
<b>Participants</b>	The number of participants who received services
<b>How well were the services provided?</b>	
<b>Quality</b>	Indicators were identified for each program that are designed to measure quality, such as timeliness, engagement or adherence to an EBP.
<b>Is anyone better off?</b>	
<b>Outcome</b>	Indicators were identified for each program that attempt to describe the result of the services in changing knowledge, behavior or a condition.

The performance measurements provided by the programs in their annual progress reports were compared to the measurements stated in their SOW to determine if they were substantively similar. This is significant because reporting on performance measurements as stated in the SOW allows HSD and the programs to have a common understanding of the performance expected and the data reported so that both parties may assess impact.

For example, if a program’s SOW states an outcome of “80% of participants who exit the shelter maintain housing after six months, as measured by HMIS six months after exit,” but their annual progress report stated that “80% of participants were actively searching for housing,” this would not be considered substantively similar. Whereas, if the same programs stated in their annual progress report “80% of people who were served this year retained housing at 6 and 8 months after they left the program according to an HMIS report,” this would be considered substantively similar and would fulfil the requirement to report on the outcome despite slightly different wording. It is important to note that this analysis does not determine if the program met their performance measurement targets. Instead, the analysis in this report focuses on whether programs were successful in reporting their performance measurements.

### **Limitations**

The review process was implemented slightly differently for FY 2018-19 so comparisons to FY 2017-18 should be made with caution. A combination of HSD staffs’ greater understanding of specific program’s language, and program’s improvement in articulating their findings likely led to identifying more programs as able to report this year as opposed to last year. The information was better articulated, and HSD was able to determine what programs substantively meant more accurately. This highlights the iterative process in CORE where all parties are learning and applying continuous improvement processes.

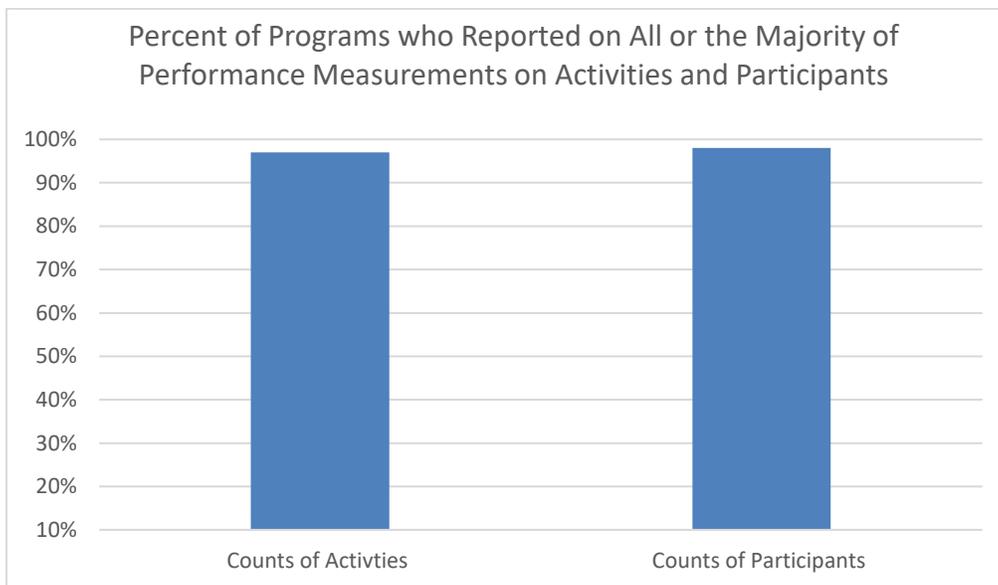
## Activities and Participants Performance Measurements

While a few programs serve one population, most programs have a SOW that displays they serve multiple types of participants (for example, programs may serve *both* parents and their children), and all program SOWs articulate programs engage in several primary activities.

As stated on page 4, 64 programs submitted an annual report. **Sixty-two or 97% of these programs reported either on “All” or the “Majority” of the performance measures about participants** listed in their SOW. For more information on how categories were defined please see Appendix A. Some of the programs included in the “Majority” reported category did not report as accurately as desired. For example, one program reported on the number of people served half of the year rather than a year. This still shows the program can accurately count and report the number of individuals impacted and is included in the “Majority” reported category.

There are two programs that did not report on the number of unique people, identified in their SOW, at all. It is known that both programs have significant data collection and analysis challenges and are a part of small agencies where resources are limited. One of these two programs was not able to report on activities as well. This is the only program who did not report on all or most of the activities as stated in their SOW, resulting in **98% being able to generally report on performance measurements regarding activities**, as displayed below in Figure 1.

**FIGURE 1**



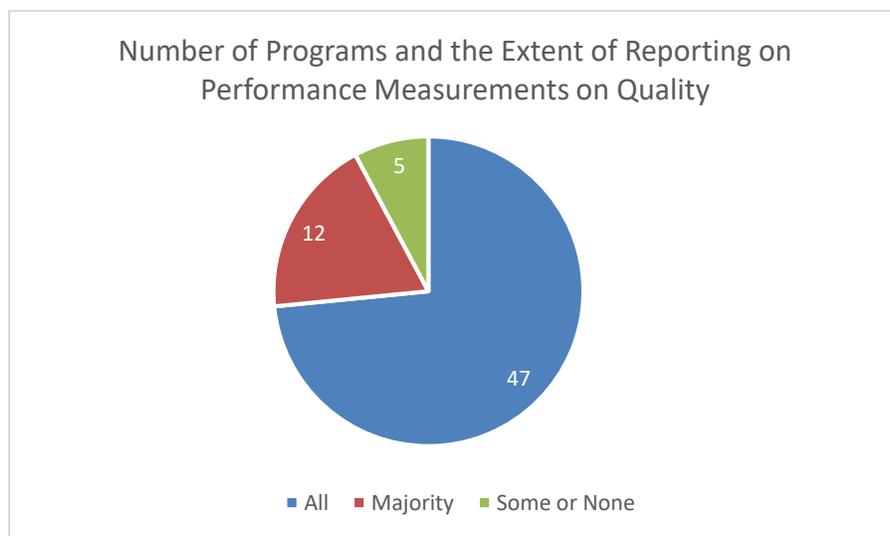
## Quality and Outcome Performance Measurements

All programs have multiple quality and outcome performance measurements, and some serve multiple target populations. As a result, one program can have numerous ways to measure their success with various groups of people.

### Quality

Fifty-nine of 64 programs who submitted an annual report **provided information on “All or the “Majority” most of their quality performance measurements** as stated in their SOW (Figure 2). Many of these programs reported exactly as required including citing the measurement tool and time frame while some articulated only the result of the measurement. While the goal is for programs to clearly report on all components of the quality indicator including the measurement tool and time frame, programs that articulate the results of the measurements were counted in this group of 59 programs who reported “All” or the “Majority” of their quality measures.

FIGURE 2



N=64 Programs

The five programs that did not substantively report had varied states of articulating the information on quality:

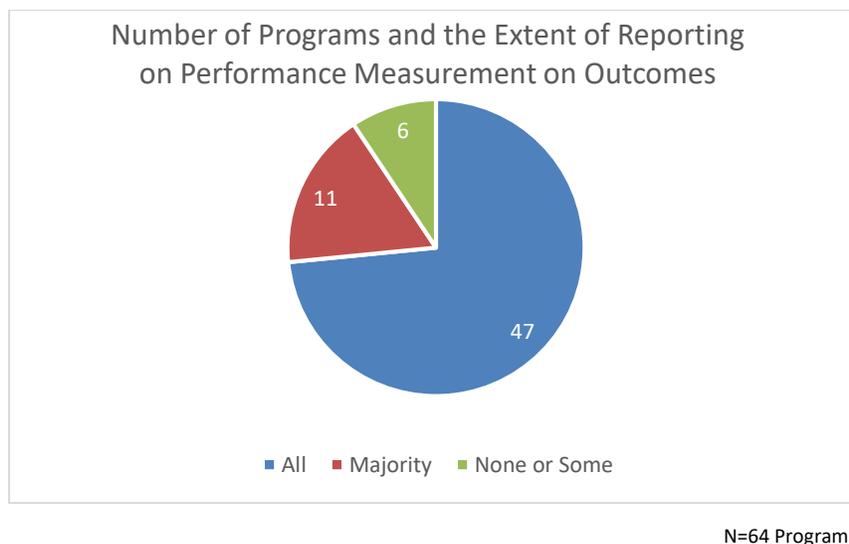
- One program did submit some of the information as required by their SOW, but it was not comprehensive.
- Two other programs submitted information on quality, but it was quite different than what was planned in the SOW, so it is difficult to assess their capacity. For example, a program was required to measure completion of the program and they only reported on the number of people who started services.
- The remaining two programs did not report any information on quality, which appears to be due to challenges with data analysis.

## Outcomes

**Fifty-eight out of 64 programs reported all or most of their outcome performance measurements** precisely as stated in their SOW or they substantively communicated the result of the outcome (Figure 3). Again, for programs where reported outcomes did not match the SOW, the missing components were frequently the measurement tool and/or the timeframe for data collection. Several programs demonstrated a high degree of understanding of their data. For example, one program noted its outcome finding and also acknowledged the sample size was too small this year to consider it valid information. Although this type of information points to a challenge, it also exhibits a solid understanding of the limitations of quantitative data.

One limitation of this review of the annual reports is that the complexities of measurements vary throughout the programs. For example, some programs use a survey they designed and rely on a participant's report of a positive result, whereas some programs implement multifaceted validated assessment tools. No weight was given to complexity so this analysis cannot be extrapolated to mean that all programs have the same capacity. However, these programs are generally reaching the goals of reporting they have agreed upon for CORE.

**FIGURE 3**



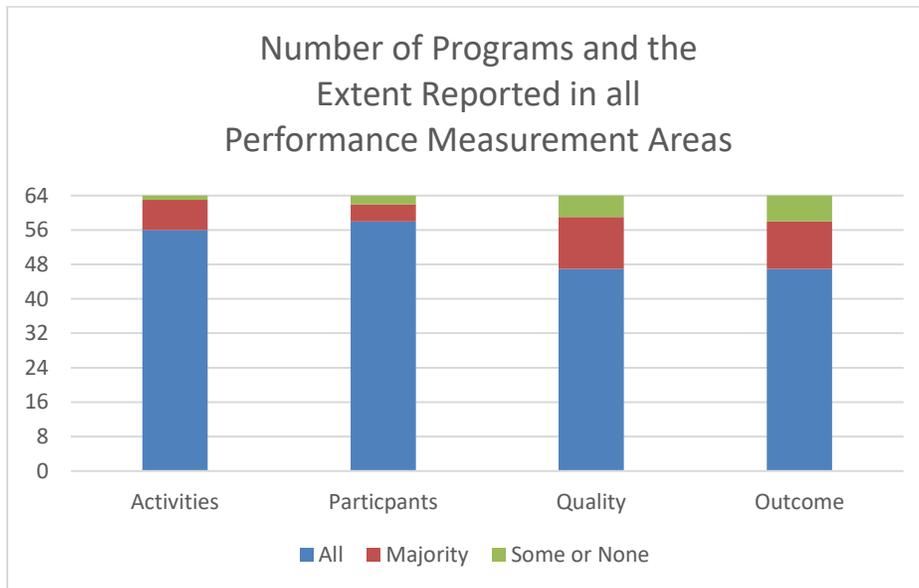
Six programs reported in a manner where only some or none of their outcome performance measurements were addressed. Four of these program's submitted reports where none of the information on outcome measurements on their SOW were detailed and these are described below

- Two programs reported on outcome information, but it was substantively different than the agreed upon indicators. One program is exploring changing their selected EBP since it is not meeting the needs of the population it serves and they reported on a different indicator. This is not due to a lack of ability to measure but instead due to issues related to the EBP. In the other case, the program reported on outcomes not as agreed in the SOW due to unforeseen challenges with getting data from another entity.
- Two programs did not report on any outcome information. One program is clearly implementing the measurement tool and they cite it is helpful information for the individuals served but they do not have the capacity to analyze the information across all the people served. The other program did not clarify the reason outcome information was not provided. The EBPs these programs are implementing are new to the programs and learning in this area would be expected. Both programs also identified performance measurements in their SOW that could be reasonably considered complex.

## Next Steps Across All Performance Measurements

As Figure 4 below displays, there are a small number of programs that potentially need to improve their capacity to report, based on the information they reported. For more information on how categories were defined please see Appendix A. Some of the programs who submitted an annual report with some or none of the information anticipated may only need limited support or adjustments while one or two may need more intensive support. HSD will contact them to explore the program's needs and perspectives, provide education on reporting, and/or consider adjustments to the SOW if needed. If required, a plan for enhancing their ability to measure results will be developed. This plan may include technical assistance from HSD, other funders, or qualified resources.

**FIGURE 4**



## Capacity Building

To better understand challenges faced by funded programs and identify effective capacity building efforts, programs were asked to report on challenges they faced, ideas to mitigate these challenges, and their access and perception of capacity-building efforts (in the form of training) in the past year. The themes of these challenges and the opportunities they suggest are quite similar to those reported in the prior year: EBP start up, staff retention, and participant engagement.

## Challenges and Opportunities

Programs were asked about the challenges they experienced in implementing their EBP or in achieving intended outcomes and what might mitigate these challenges. Solutions offered by programs included some that can be implemented by the programs while others advocated for more systemic changes.

Nearly one third of the programs articulated difficulties regarding **recruitment or retention of staff**. Several programs reported staff turnover would likely be improved if they could provide more competitive salaries, especially in light of the high cost of local housing. For example, one childcare agency noted the difficulty of recruiting and maintaining qualified childcare providers as many choose to leave the county due to housing costs. The primary solution that was suggested by several programs was an increase in funding but other strategies to support the workforce were also noted. The childcare agency noted earlier stated, *“We continue to believe that our county officials and business community must establish specific incentives as well as long range planning and a clear vision for early care professionals, if we are to retain these professionals.”*

Volunteer-based organizations also identified challenges with recruitment and retention of non-paid staff. These organizations are working to improve their recruitment strategies in hopes of gaining new volunteers. One program reported, *“We are continuing to improve our recruitment and training process to make it easier for adult mentors to serve for longer periods of time.”* Another volunteer-based program detailed the specific challenge of recruiting and retaining bilingual volunteers. The program displayed a tenacious approach when they reported, *“We have accepted this challenge and created an outreach commercial to recruit more Spanish speaking and more Latinx volunteers and we have also designated a bilingual staff person to dedicate more time to outreach in Spanish-speaking communities and businesses in this next fiscal year.”*

The remaining programs described varied operational factors that impacted their capacity to achieve results. Most were articulated as surmountable challenges and a part of the process of implementation. About 10 programs identified challenges related to **data systems** (including data collection or sharing), complexities of measurement, and technology issues. In citing this issue, several programs exhibited their desire to have reliable and valid data to support improvement efforts.

Five programs discussed **low client engagement** as a factor that was impacting results. These programs all cited new, creative ways to engage clients to participate. A few programs noted the need to adapt the operations of the EBP to the practical needs of the agency, such as hiring of additional staff, revision of policies and procedures, and improvements to trainings as potential solutions. For example, a youth provider indicated the need to examine the impact of hours of operations on EBP implementation as a potential solution to increase client engagement.

**Training or technical assistance** was commonly cited as a challenge as well as a solution. A few programs emphasized the increased training needs due to staff turnover or implementing new EBPs. One local health provider described the critical nature of training by stating, *“New staff require training as well as time in the practice to fully implement and internalize changes.”* Training and technical assistance was cited by several

programs as essential to ensuring quality services. Ideas to further training included more internal meetings focused on best practices, working with other agencies, and accessing formal training on specific EBPs.

### Technical Assistance and Training

Many of the comments regarding training and technical assistance in the annual reports reflect enthusiasm for continuous improvement. Technical assistance on reporting requirements was provided by HSD and trainings were offered by the CORE consulting team, Nicole Young (Optimal Solutions Consulting) and Nicole Lezin (Cole Communications, Inc). The consultants provided several trainings and technical assistance sessions to CORE funded programs as well as staff from other interested agencies, which focused on the use of evidence (data) to inform practice, the design and use of theories of change and logic models, and analyzing program data in preparation for completing their annual progress reports (see Appendix B: Trainings Provided by Optimal Solutions and Cole Communications, Inc. for CORE Programs).

### Technical Assistance

HSD staff provided technical assistance on reporting requirements and performance measurements. To help prepare both HSD and the programs in summarizing information in the Annual Report, HSD requested Semi-Annual Progress Reports that provided a mid-year update. This past spring after reviewing the Semi-Annual Progress Reports provided by programs, HSD staff identified and followed up with programs whose annual report appeared unclear. In general, it was found that areas that were unclear were due largely to administrative errors where the person(s) preparing the Semi-Annual Progress Reports on behalf of the CORE funded program erroneously did not provide relevant data although the data was available. In several cases, this technical assistance clarified reporting requirements and helped programs to better succeed in the annual report.

In the last annual report, HSD staff noted the desire to do more collaboration with other funding partners. This is still a goal, but HSD decided to have programs focus on input from the CORE consultants in trainings during FY 2018-19.

### Trainings

Programs were asked if they accessed training and if so, whether it was a CORE sponsored training offered by Optimal Solutions. Seventy-one percent of programs who responded to the question reported accessing training. Most of the programs attended a training led by Optimal Solutions and a few attended other trainings on specific EBPs.

Programs were asked about the impact of the training(s) they attended. Most of the programs reported that training increased their knowledge, and a few discussed this new knowledge. One program reported, *“My knowledge of Evidence Based Practices was minimal at the start of this contract. The multiple CORE trainings offered by the Nicole’s [referring to Nicole Young and Nicole Lezin] provided a great deal of information that helped me better understand the CORE process.”* Among those who already had a foundation of knowledge and experience with EBPs, several noted the usefulness of the CORE trainings. One program cited the training was helpful because it reinforced what they already understood and validated changes they made. Another program stated, *“We now have a deeper understanding of what it means to be an Innovative EBP, and how we can strengthen our evaluation practices.”* A few programs talked about how the CORE trainings helped them see their pivotal role in the community. One program reported, *“I learned how my specific program is effectively contributing to CORE conditions for health and well-being and achieving community level impacts for many target populations to thrive!”*

A few answers to these questions also highlighted a potentially positive impact the trainings had on networking among CORE programs. A common theme in the responses was the benefit of peer-to-peer exchange at the CORE trainings. Two programs shared that they appreciated the forum. One of these programs reported, *“Trainings always offer a venue for talking with other service providers to make connections, deepen learning, and reinforce understanding.”* Along these lines, a theme of several comments was that CORE trainings promoted collaboration and movement toward collective impact. One program noted that their staff said it was useful to have a greater *“...understanding of how CORE is a broader movement where funders, providers, policymakers and community are working together to achieve collective action.”* These comments suggest that the trainings accessible this year increased knowledge in a few aspects. Some programs gained foundational information on EBPs while others gained a greater awareness of the possibilities of local collective impact.

## Summary

Overall, the information reported by programs point to a local landscape of engaged community providers who are driven to build capacity, meet the needs of the community, and achieve results. Themes were cited in multiple reports that described gains over the past year in many areas including:

- Using data to inform planning and service delivery
- Training on EBPs
- EBP adaptations and adherence to models
- Agency enhancements and
- Impact on outcomes

Capacity gains were also exhibited in that most programs were able to report on all or most of their performance measurements. There are one or two programs that may need more intensive support to be able to measure and report and HSD will collaborate with these programs to identify a plan to build capacity. HSD will also be following up with programs that are not providing comprehensive information, to explore if clarification is needed or SOW adjustments are appropriate.

As with all complex efforts, challenges have occurred, and programs articulated a wide variety of experiences. Challenges expressed by programs cluster around the same themes as last year which were related to EBP start up, staff retention, and participant engagement. There was a cluster of responses that articulated challenges in the areas of staff or volunteer recruitment and retention, data systems (including collection, obtainment and measurement), and engagement of participants. Several programs identified a need to pay more competitive salaries and quite a few programs also cited plans that they will implement steps within their agency to meet the challenges such as increased recruitment or enhanced data collection and measurement efforts.

Programs widely expressed that the training they accessed was valuable. Some participants who were new to EBPs expressed appreciation of the introduction to the key concepts while others who were more familiar with these principles acknowledged the refresher training was validating and it offered them a helpful venue to connect with other service providers. Although experience and knowledge differed, comments suggested that the training promoted a greater awareness that CORE, in addition to a funding resource, is evolving into a collaborative platform where programs, funders, and policy makers join to promote positive results.

## Appendix A: Definitions

### ***Categories of the Extent of Reporting***

- **All Reported:** In the program's annual report the performance measurements in that specific area were reported in a manner substantively similar to the SOW and contained all the key information such as a data source and time frame.
- **Majority Reported:** In the program's annual report most of the performance measurements in that specific area were provided in a manner that is substantively similar to the SOW and may or may not have contained all details such as data source or time frame.
- **Some Reported:** In the program's annual report some information on the performance measurements in that specific area were reported but it may not have been clear or was vastly different from the SOW.
- **None Reported:** In the program's annual report none of the performance measurements in that area, that are on the program's SOW, were addressed.

### ***Evidence-Based Practices and Programs (EBPs)***

EBPs are proven ways to improve outcomes for target populations. EBPs focus on approaches demonstrated to be effective through some type of empirical research rather than through anecdote or one individual experience alone.

### ***Fidelity***

Fidelity is the extent to which a practice or program is implemented in a way that adheres to the protocol of the evaluated practice/program. Programs that are implemented with fidelity demonstrate that critical elements including the type, amount, and quality of the services are provided.

## Appendix B: Participant Voices

CORE programs had the opportunity to provide participant stories in the Progress Report and below are samples of the stories indicating success of the varied programs funded by CORE.



*“A family of six (four adults, 2 children) were assisted with rental assistance to avoid eviction and homelessness. The family was referred by PVUSD Healthy Start. [The father] is the sole provider of the family and was injured at work, putting him behind on his rent. Family has 2 children with disabilities. While creating personal goals and housing stability plans with the family, the case manager suggested the family seek assistance with Social Security. [The father] and his wife were unaware that their children could possibly qualify for SSI since their understanding was that it was only given to retired individuals. They went to SSI and are currently in the process of seeking SSDI benefits for one of their disabled children. [The father] has returned back to work with light restrictions and he and his family are now making ends meet.”*

– South County Housing Collaborative, Community Action Board

*““L” is an LGBTQ+ youth who joined our Watsonville Youth Group in the Winter of 2019. When they first arrived in our Friday afternoon support group, they wouldn’t talk to anyone, and wouldn’t even introduce themselves to our Youth Program Coordinator. But after about two months, they began to grow comfortable and their demeanor completely changed. In fact, at our Queer Prom in May 2019, they ended up doing a drag performance for the other attendees. They eventually told us that they had been suicidal before beginning the program and had now built such a support group that they were coming out at school. They are still not safe to come out at home, but they now feel they are able to cope with that dynamic and live fully outside.”*

– Youth Program, The Diversity Center

*“A child enrolled in our preschool after having been kicked out of another preschool. Our Special Education specialist spoke with the previous teacher and was warned about challenging behaviors. We took the time to connect with each of the parents from different households to create a plan to address their concerns. We implemented consistent expectations and integrated him socially into the group. Though it was challenging, he now has authentic friends and is well prepared to begin kindergarten this fall.”*

*“Michele becomes emotional when she thinks about her granddaughter’s new home: a tent on a plot of land in Watsonville, where the family will move this month because they can’t afford to rent anymore on her \$400-a-month income. With her daughter and granddaughter, Michele and her husband, who has been out of work for two years, plan to cook on a camp stove and bathe outdoors in a plastic pool on a ranch owned by a relative. “We have stuff like we’re going camping. So .... we tell my beautiful little granddaughter [that we are camping] when she asks us: ‘Nana, why do we have to move? Why?’” Michele said, her voice cracking. She said the food bank has been a “lifeline” that has helped relieve the economic pressures placed on the family.”*

– Participant, Second Harvest Food Bank

*“Cancer has no rhyme or reason. It takes some, it spares some. It comes in and shakes the foundation of your very core so vigorously, so violently..... You think there’s no way out, until you meet others like you, who understand exactly where you are and see you for who you are.”*

- Participant, WomenCARE, Family Service Agency

*“I have felt so alone in my life and in my suffering. At points in my life I would have rather not be living and contemplated suicide. This space, facilitator and group have given me a safe place where I am not alone. And maybe most important my children have a mom that has a safe place.”*

– Group Participant, Survivors Healing Center, Family Service Agency of the Central Coast

## Appendix C: Trainings Provided by Optimal Solutions and Cole Communications, Inc.

Date	Topic
November 13, 2018	Introduction to Evidence-based Programs and Practice (live version of 11/19/18 and 11/26/18 webinars)
November 19, 2018	Introduction to Evidence-based Programs and Practice (Webinar Session 1)
November 26, 2018	Introduction to Evidence-based Programs and Practice (Webinar Session 2)
December 4, 2018	Taking Evidence Based Programs and Practice to the Next Level
March 29, 2019	Taking Evidence Based Programs and Practice to the Next Level
May 1, 2019	Using a Continuum of Results & Evidence to Deepen Your Evidence-based Practice
May 1, 2019	Taking Evidence Based Programs and Practice to the Next Level
June 13, 2019	Using Local Data to Create a Theory of Change and Logic Model (joint training with DataShare)
June 21, 2019	Peer Learning Circle
June 24, 2019	Peer Learning Circle (2 sessions)
June 25, 2019	Peer Learning Circle
June 26, 2019	Peer Learning Circle