



Measuring The Difference: An Outcome Evaluation Resource for the Disability Sector

MODULE 1

Outcome Evaluation: Definition and Overview

Prepared for
Alberta Council of Disability Services

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Module 1

Outcome Evaluation: Definition and Overview

1.1 WHAT IS OUTCOME EVALUATION?

Outcomes, at the most general level, are changes in individuals, organizations, communities, or governments, depending on the goal and reach of the activities being examined.

Evaluation is a process of systematic inquiry directed at collecting, analyzing and interpreting information so that one can draw conclusions about the merit, worth, value or significance about a program, project, policy or whatever it is that is being examined.

Outcome evaluation, then, at its most general level, is a *systematic* examination of the *outcomes* (changes, usually benefits), resulting from a set of activities implemented to achieve a stated goal, and a systematic examination of the *extent* to which those activities actually caused those outcomes to occur. The intent of outcome evaluation is to assess the *effectiveness* of these activities with respect to the benefits achieved, suggest *improvements* and possibly provide direction for future activities.

Outcome evaluation is not the same as **program evaluation**. Program evaluation *may* include assessing its impact on client outcomes, but its scope also includes assessing those aspects of program activities, systems or processes that have been identified as needing examination for the purpose of the evaluation.

Program evaluation is the systematic collection of information about the activities, characteristics and results of programs to make judgments about the program, improve or further develop program effectiveness, inform decisions about future programming, and/or increase understanding.

Source: Patton, (2008: 39)

Program outcomes are changes in client knowledge, skills, attitudes, behaviours, condition or status, resulting from their involvement in a program or service. The changes may be positive or negative, intentional or unintentional. They may occur during or after the client's participation in the program and may be short-term, intermediate-term or long-term.

Outcome evaluation helps determine *what* outcomes a program helps achieve, *how much* change occurs in the client as a result of participating in the program, and the *extent* to which the change can be attributed to program activities. In addition to measuring the intentional outcomes desired by the program, outcome evaluation may also reveal the unintentional or unexpected outcomes (positive or negative) resulting from the program.

EXAMPLE

A disability service's employment program's goal is typically to assist clients find stable, paid employment of their choice in the community. The program may do this by increasing the client's *awareness* of the types of jobs they might want, *improving* the client's skills for the job, enhancing their *behaviours*, (e.g., time management or choosing appropriate work attire), and ultimately, helping them find and keep a suitable job. These are all the desired short-term outcomes that the program might strive to achieve for the client.

Finding and keeping a suitable job may subsequently result in the client *developing* positive relationships with co-workers, being *more included* in the work environment, *having higher* self-esteem, and perhaps, even achieving *greater* financial stability. These are all potential intermediate-term and long-term outcomes that may result from the initial outcome of finding a suitable job. Some of these might be stated, desired outcomes of the program, others may be *unintentional* benefits.

Outcome evaluation helps us determine *which* of the program's stated outcomes are achieved for the client, *how much change* has accrued for the client, and what *other* outcomes occurred that the program may not have anticipated. It also helps us learn what to change about the program to make it more effective for future clients.

1.2 OUTCOME EVALUATION — A KEY INGREDIENT IN QUALITY IMPROVEMENT

Outcome evaluation is sometimes referred to, among other terms, as **outcome measurement**, **results based management** or **outcome focused management**. Although the focus and the contexts in which some of the terms are used may be different, the intent and approaches are largely similar. They are all concerned with **continuous quality improvement**.

→ In *Measuring the Difference*, we use the terms **outcome evaluation** and **outcome measurement** interchangeably.

Continuous quality improvement (CQI) is a management approach that encourages examination of ways to continuously improve the efficiency and effectiveness of all aspects of the organization's programs and services in order to maximise benefits for clients. It is a client-centred philosophy that is committed to ongoing improvement in processes and practices, relying on evidence-based information to support the organization's success in achieving its goals and outcomes. CQI is also a process of creating an environment in which quality improvement is a key part of the organization's culture.

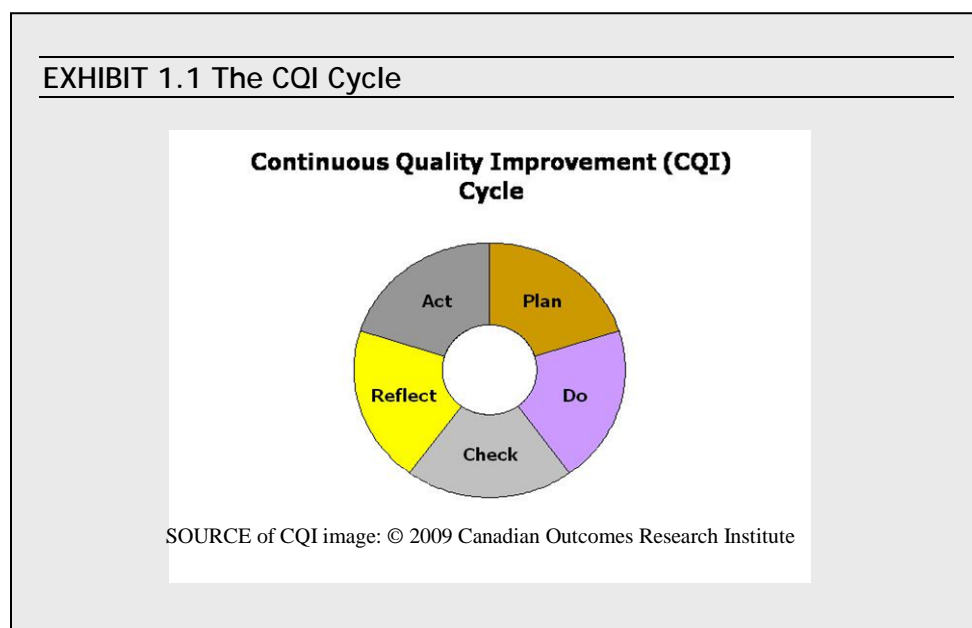
The CQI Cycle (see Exhibit 1.1) consists of multiple iterations of:

PLAN → DO → CHECK → REFLECT → ACT

The most visible activities of outcome evaluation are located in the “Check, Reflect” stages of the CQI Cycle. However, outcome evaluation is most usefully understood if it is seen as the lens through which we look at our decisions and activities in *all* segments of the CQI Cycle:

- how we *plan* programs and services (with client outcomes as our guiding focus);
- how we *deliver* them (in a way that maximizes client benefit);
- how we *assess* our performance (in terms of measurable changes to client outcomes);
- how we *interpret* our performance and identify ways to improve it (with client outcomes as our guiding focus);
- how we *choose and implement* strategies to improve our systems and processes;
- thereby, starting a new cycle again....

Outcome evaluation, thus, is a key ingredient in developing quality improvement processes and culture. It provides an outcome-focused way of thinking about the programs and services we provide, the changes we desire to make and the tools we can use to examine these.



1.3 RATIONALE AND BENEFITS OF OUTCOME EVALUATIONS

Greater accountability: Non-profit organizations rely largely on external revenues to operate their services. These revenues may be in the form of government funding, program grants from government or private foundations, tax-deductible donations from individuals or corporations and fees for service. Increasingly, all these groups and the tax-paying public-at-large are calling for clear evidence that the funds provided actually make a difference in the lives of people. Staff, volunteers and program clients also want evidence that the programs in which they invest their time, energies and expectations are achieving the desired benefits.

Service improvement: As important as measuring the benefits for clients, a key aspect of outcome evaluation is to provide a better understanding of how the program works (or does not work), and thus provide direction for improving its effectiveness as well as guidance for future

program design. Continuous quality improvement based on the learning loop provided by outcome evaluation process is an essential reason for conducting outcome evaluations and ensuring that services meet compliance standards.

Accreditation credentialing: Flowing from the need for greater accountability and a focus on service improvement, many credentialing organizations are requiring agencies to have outcome evaluation processes and systems in place as part of their set of standards. The Alberta Council of Disability Services' *Creating Excellence Together* Accreditation Levels 1 and 2 and Standard 43 is just one example of this increasing trend in credentialing bodies.

Management decision-making: Understanding through evidence how and to what extent a program is achieving its goals is a key source of information for making sound resource allocation decisions in order to continue or improve the program's likelihood for success. The information is also critical for comparing the relative effectiveness of multiple programs when faced with competing resource demands. Management decisions have implications for identifying staff and volunteer training needs, developing and justifying budgets, developing long-range plans and targeting services for expansion (or closure).

Staff and volunteer recruitment and retention: In a climate of high staff turnover all too familiar to disability services, outcome evaluation findings can be a strong motivator for program staff and volunteers, who can see in tangible and measurable terms the progress resulting from their efforts. It is also a powerful tool to attract new staff and volunteers if the agency can provide solid data on how their work makes a difference in the lives of their clients.

Attracting new participants: Evidence that a program is successful at achieving its outcomes is a sure-fire way to attract new participants into the program, and thus expand its reach. This could have the added benefit of increasing revenues into the organization (e.g., if the client's participation is funded by the government, or if the participant pays a fee for service).

Attracting new collaborators and partners: Other organizations will be more likely to want to collaborate with agencies that routinely assess their effectiveness and have a quality improvement focus to their activities. Collaborative work can enhance the organization's capacity to achieve or expand its mission.

Public recognition and community reputation: Demonstration of an organization's success at achieving its mission and being an effective organization, positions it favourably to garner community recognition and support in tangible and intangible ways.

Increased revenues: Most non-profit organizations operate with shoe-string budgets. Clear demonstration of impact is more likely to result in continued funding, or increased revenues from existing and new funders and donors, thus increasing the organization's ability to continue serving its mission.

Findings from United Way Survey of Agency Experiences with Outcome Measurement

Of 298 agencies responding to the survey, the percentage of respondents who agreed that outcome measurement helped them in the following ways (United Way of America, 2000):

- Communicate program results to stakeholders; focus staff on common goals/shared purposes (88%)
- Clarify the intended purposes of the program (86%)
- Identify effective practices within the program (84%)

- Successfully compete for resources/funding (83%)
- Enhance record-keeping systems (80%)
- Improve the service delivery of the program (76%)
- Share effective practices with other agencies (72%)
- Inform program participants about outcome measurement results (70%)
- Assess staff performance; identify staff training needs (64%)
- Allocate resources within the program and the agency (61%)
- Increase program participants' investment in achieving program outcomes (55%)
- Recruit staff or volunteers to work in the program (42%)

1.4 LIMITATIONS OF OUTCOME EVALUATIONS

Outcome evaluations have many benefits and value to offer to human services. However, outcome evaluations are not without limitations or problems. This includes:

- **Right outcomes?** Outcome evaluations do not show whether the desired outcomes are indeed the right ones for the client group. Alternative program theories may believe in different pathways to change.
- **Best outcomes to measure?** Outcome evaluations cannot tell whether the outcomes being measured are the best ones to show meaningful change in the program participants.
- **Where's the problem?** Outcome evaluations can show if clients are not benefiting as a result of a program to the extent desired. However, they cannot show where in the logic chain the problem lies or how to fix it. Program evaluation that examines and assesses program inputs, activities, processes and outputs may provide the necessary insight to identify and fix program-related problems.
- **Caused by program?** Outcome evaluations cannot prove that the changes measured in client outcomes are due to the program alone. Evaluation designs that randomly assign some clients to receive the program (treatment group) and others to not receive the program (control group) are needed to prove causality. Such designs are more costly and require greater research expertise than outcome evaluations, and are therefore more costly to implement. In many cases, such designs may not be ethical (e.g., if the program provides necessary medical treatment to clients, it would be unethical to deny treatment to those who need it, just so that the evaluation can have a control group for comparison).
- **Can we afford this?** Outcome evaluations require money, staff time, effort, commitment and in some cases, technical expertise. The hardest of these for most human services that operate with limited financial and human resources is money and staff time. A lot of effort may also have to be devoted to make sure all stakeholders (especially staff and clients who have the most direct, vested interest in the program) "buy-in" to the evaluation. If stakeholders feel threatened by the evaluation and fear the consequences of its findings (e.g., that the program or staff jobs may be cut), the evaluation effort may be significantly hindered, or result in invalid findings.
- **Ethical concerns?** It is also important to ensure that program participants are not unduly burdened by having to provide evaluation data (e.g., participate in focus groups, interviews, answer survey questions, etc.). Program clients sign on to receive the program's services, not to be research subjects. Particular attention must be paid that clients do not feel that their ability to continue to receive program services will be jeopardized if they do not participate in the evaluation activities. These concerns are particularly important for vulnerable and marginalized groups.

- But how do we *measure* outcomes? The *biggest* challenge to outcome evaluation is how to measure outcomes in a meaningful and valid way. Many of the outcomes that disability services hope to achieve are known as “soft outcomes”, for example, improved social interaction, greater self-esteem or self-confidence, better coping skills, greater engagement with natural supports, stronger sense of inclusion, etc. There have been some considerable efforts in the outcome measurement literature in recent years to address this issue, but it remains a big challenge for many human services.

1.5 USEFUL ONLINE RESOURCES

Canadian Outcomes Research Institute.

<http://www.cori.ca/>

A Calgary-based organization supporting the evaluation needs of nonprofit organizations. Offers training and use of the HOMES software, an online program evaluation software package.

Center for Civic Partnerships. *Evaluation*.

<http://www.civicpartnerships.org/index.htm>.

Tips, tools, resources and links on evaluation.

Organizational Research Services.

http://www.organizationalresearch.com/publications_and_resources.htm.

This website has two free downloadable handbooks focusing on outcome measurement, planning and dissemination of the results.

“How to Manage and Analyze Data for Outcome-Based Evaluation” (2000) teaches how to prepare and analyze outcome evaluation data using common Microsoft programs. It is thorough and informative.

“Outcomes for Success” (2000) provides an accessible overview of outcome evaluation together with examples of logic models, outcome plans, coaching exercises, etc. Informative and well-written.

United Way of America Outcome Measurement Resource Network.

<http://auth.unitedway.org/Outcomes/Library/pgmomres1.cfm>

An excellent website full of publications, tools and links on outcome measurement theory and practice.

W. K. Kellogg Foundation.

<http://wkkf.org/Default.aspx?LanguageID=0>.

A number of tools and links related to evaluations.

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