Form Approved

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**PDO Prevention for States**

**Performance Monitoring and Evaluation Plan**

**[Insert State Name]**

The purpose of PDO Prevention for States is to advance and evaluate comprehensive state-level interventions for preventing prescription drug overuse, misuse, abuse, and overdose. As established in the Funding Opportunity Announcement, awardees are expected to implement robust evaluations of their program activities using timely data from a variety of sources. This template is designed to assist with the planning, execution, and monitoring of those evaluation activities. It also facilitates CDC’s technical assistance by ensuring that we offer the available and necessary support for evaluation design, data access and procurement, and facilitate connections among awardees who are engaging in similar evaluation activities.

This template will guide you through reporting a detailed evaluation plan for years 1 and 2. You will then provide a narrative description for years 3-4. With you, we will revisit this document often and use it as a resource and reference for planning. As we progress through each budget period, we will work with you to revise the template. You will resubmit revisions with the Annual Performance Report.

Work with your project staff to complete the following template to the best of your ability. Please reach out to your CDC team, and your Evaluation Officer in particular, for any needed assistance. You are encouraged to share drafts and works-in-progress with your Evaluation Officer. This is due to CDC on XXXX.

The table below should be copied and pasted for each activity that is part of your funded portfolio of prevention work.

**Definition of key terms used in this template:**

**Strategy:** These are the four strategies described in the FOA: (1) Enhance and maximize PDMP, (2) Implement community or insurer/health system interventions aimed at preventing prescription drug overdose and abuse, (3) Conduct policy evaluations, and (4) Develop and implement Rapid Response Projects.

**Activity:** These are the activities described in the FOA. Refer to the FOA for the full list. Examples of activities are provided for the “enhance and maximize PDMP” strategy: (1) Move toward universal PDMP registration and use, (2) Make PDMPs easier to use and access, (3) Move toward a real-time PDMP (i.e., reduce the data collection interval), etc.

**Evaluation Question:**

Evaluation questions can be either process or outcome focused. Evaluation questions describe exactly what you are evaluating. Example evaluation questions are provided for the “enhance and maximize PDMP” strategy: (1) To what extent were barriers to PDMP registration removed? (2) To what extent were healthcare professionals accessing the PDMP? (3) To what extent were PDMP registration and use percentages changed?

Additional examples of evaluation questions are in the FOA.

**Outcome:** Describe general benefits related to changes in behavior, skills, knowledge, attitudes, values, condition, status or other attributes. An outcome example is: *improved PDMP registration*.

**Indicator:** Measure achievement; basically indicators are operationalized outcomes; specify how the outcome will be measured. An indicator example for the outcome “improved PDMP registration” is *percent of prescribers registered with PDMP.*

A list of indicators will be provided by CDC in January 2016. These indicators are closely tied to the outcomes that are in the FOA, these indicators simply provide additional measurement specificity. In the “notes section” of the template, please include the rationale for selecting indicators if they are different from the ones provided by CDC.

**Data Source:**  List the source of your data. For example, if it is your PDMP, then list the name of your PDMP. If another existing data system is being used for health outcomes, list the name of that system. If you are collecting new data (as noted in the data collection column), then describe who you are interviewing, surveying, etc.

**Data Collection Method:** In this portion of the template, we would like for you to tell us if the data already exist or if the data need to be collected. If you have baseline line to track progress. How the data are new and need to be collected, describe how the data will be collected. For example, survey, key informant interview, document review, etc. And the frequency of the data collection—for example, monthly, quarterly, twice per year, annually, etc.

**Timeline:** In this column, describe the timeline line (Quarter/Year) for data collection, data analysis, write-up/reporting, and dissemination.

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| **PROJECT YEAR ONE and TWO**  |
| **Strategy 1: Enhance and Maximize PDMPs** |
| **Activity 1:** |

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| **Describe the specific activity being evaluated. The description should be 300 words or less.** |

| **Evaluation Question** | **Outcome** | **Indicator** | **Data Source** | **Data Collection Methods** | **Timeline (Quarter/Year)** |
| --- | --- | --- | --- | --- | --- |
| **1.**  |  |  |  | **Mark one:****\_ Data exist****\_ Data need to be collected (new data)****Baseline data:****\_\_ Known****\_\_ Unknown/TBD****If data are new, how collected:****Frequency of data collection:** | **Data Collection:****Data Analysis:****Write-up/Reporting:****Dissemination:** |
| **2.**  |  |  |  | **Mark one:****\_ Data exist****\_ Data need to be collected (new data)****Baseline data:****\_\_ Known****\_\_ Unknown/TBD****If data are new, how collected:****Frequency of data collection:** |  |
| **3.**  |  |  |  |  |  |
| **4.**  |  |  |  |  | **(add additional rows as needed)** |
| **Notes:** Any additional descriptions that would be helpful to understand the planned evaluation of this activity. Also, include the rationale for selecting indicators if different from the ones provided by CDC. |

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| **PROJECT YEAR ONE and TWO** |
| **Strategy 1: Enhance and Maximize PDMPs** |
| **Activity 2:** |

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| **Describe the specific activity being evaluated. The description should be 300 words or less.** |

| **Evaluation Question** | **Outcome** | **Indicator** | **Data Source** | **Data Collection Methods** | **Timeline (Quarter/Year)** |
| --- | --- | --- | --- | --- | --- |
| **1.**  |  |  |  | **Mark one:****\_ Data exist****\_ Data need to be collected (new data)****Baseline data:****\_\_ Known****\_\_ Unknown/TBD****If data are new, how collected:****Frequency of data collection:** | **Data Collection:****Data Analysis:****Write-up/Reporting:****Dissemination:** |
| **2.**  |  |  |  | **Mark one:****\_ Data exist****\_ Data need to be collected (new data)****Baseline data:****\_\_ Known****\_\_ Unknown/TBD****If data are new, how collected:****Frequency of data collection:** |  |
| **3**  |  |  |  |  |  |
| **4.**  |  |  |  |  | **(add additional rows as needed)** |
| **Notes:** Any additional descriptions that would be helpful to understand the planned evaluation of this activity. Also, include the rationale for selecting indicators if different from the ones provided by CDC. |

**Note: Copy and paste additional tables if more than 2 activities are being evaluated/tracked per strategy.**

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| **PROJECT YEAR ONE and TWO**  |
| **Strategy 2: Implement Community or Insurer/Health System Intervention** |
| **Activity 1:** |

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| **Describe the specific activity being evaluated. The description should be 300 words or less.** |

| **Evaluation Question** | **Outcome** | **Indicator** | **Data Source** | **Data Collection Methods** | **Timeline (Quarter/Year)** |
| --- | --- | --- | --- | --- | --- |
| **1.**  |  |  |  | **Mark one:****\_ Data exist****\_ Data need to be collected (new data)****Baseline data:****\_\_ Known****\_\_ Unknown/TBD****If data are new, how collected:****Frequency of data collection:** | **Data Collection:****Data Analysis:****Write-up/Reporting:****Dissemination:** |
| **2.**  |  |  |  | **Mark one:****\_ Data exist****\_ Data need to be collected (new data)****Baseline data:****\_\_ Known****\_\_ Unknown/TBD****If data are new, how collected:****Frequency of data collection:** |  |
| **3.**  |  |  |  |  |  |
| **4.**  |  |  |  |  | **(add additional rows as needed)** |
| **Notes:** Any additional descriptions that would be helpful to understand the planned evaluation of this activity. Also, include the rationale for selecting indicators if different from the ones provided by CDC. |

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| **PROJECT YEAR ONE and TWO**  |
| **Strategy 2: Implement Community or Insurer/Health System Intervention** |
| **Activity 2:** |

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| **Describe the specific activity being evaluated. The description should be 300 words or less.** |

| **Evaluation Question** | **Outcome** | **Indicator** | **Data Source** | **Data Collection Methods** | **Timeline (Quarter/Year)** |
| --- | --- | --- | --- | --- | --- |
| **1.**  |  |  |  | **Mark one:****\_ Data exist****\_ Data need to be collected (new data)****Baseline data:****\_\_ Known****\_\_ Unknown/TBD****If data are new, how collected:****Frequency of data collection:** | **Data Collection:****Data Analysis:****Write-up/Reporting:****Dissemination:** |
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| **3.**  |  |  |  |  |  |
| **4.**  |  |  |  |  | **(add additional rows as needed)** |
| **Notes:** Any additional descriptions that would be helpful to understand the planned evaluation of this activity. Also, include the rationale for selecting indicators if different from the ones provided by CDC. |

**Note: Copy and paste additional tables if more than 2 activities are being evaluated/tracked per strategy.**

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| **PROJECT YEAR ONE and TWO**  |
| **Strategy 3: Policy Evaluation** |
| **Activity 1:** |

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| **Describe the specific activity being evaluated. The description should be 300 words or less.** |

| **Evaluation Question** | **Outcome** | **Indicator** | **Data Source** | **Data Collection Methods** | **Timeline (Quarter/Year)** |
| --- | --- | --- | --- | --- | --- |
| **1.**  |  |  |  | **Mark one:****\_ Data exist****\_ Data need to be collected (new data)****Baseline data:****\_\_ Known****\_\_ Unknown/TBD****If data are new, how collected:****Frequency of data collection:** | **Data Collection:****Data Analysis:****Write-up/Reporting:****Dissemination:** |
| **2.**  |  |  |  | **Mark one:****\_ Data exist****\_ Data need to be collected (new data)****Baseline data:****\_\_ Known****\_\_ Unknown/TBD****If data are new, how collected:****Frequency of data collection:** |  |
| **3.**  |  |  |  |  |  |
| **4.**  |  |  |  |  | **(add additional rows as needed)** |
| **Notes:** Any additional descriptions that would be helpful to understand the planned evaluation of this activity. Also, include the rationale for selecting indicators if different from the ones provided by CDC. |

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| **PROJECT YEAR ONE and TWO**  |
| **Strategy 3: Policy Evaluation** |
| **Activity 2:** |

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| **Describe the specific activity being evaluated. The description should be 300 words or less.** |

| **Evaluation Question** | **Outcome** | **Indicator** | **Data Source** | **Data Collection Methods** | **Timeline (Quarter/Year)** |
| --- | --- | --- | --- | --- | --- |
| **1.**  |  |  |  | **Mark one:****\_ Data exist****\_ Data need to be collected (new data)****Baseline data:****\_\_ Known****\_\_ Unknown/TBD****If data are new, how collected:****Frequency of data collection:** | **Data Collection:****Data Analysis:****Write-up/Reporting:****Dissemination:** |
| **2.**  |  |  |  | **Mark one:****\_ Data exist****\_ Data need to be collected (new data)****Baseline data:****\_\_ Known****\_\_ Unknown/TBD****If data are new, how collected:****Frequency of data collection:** |  |
| **3.**  |  |  |  |  |  |
| **4.**  |  |  |  |  | **(add additional rows as needed)** |
| **Notes:** Any additional descriptions that would be helpful to understand the planned evaluation of this activity. Also, include the rationale for selecting indicators if different from the ones provided by CDC. |

**Note: Copy and paste additional tables if more than 2 activities are being evaluated/tracked per strategy.**

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| **PROJECT YEAR ONE and TWO**  |
| **Strategy : Rapid Response Project**Note: As your state’s topic for the RRP will be reviewed starting in January, you can work with your Evaluation Officer to develop this section. |
| **Activity 1:** |

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| **Describe the specific activity being evaluated. The description should be 300 words or less.** |

| **Evaluation Question** | **Outcome** | **Indicator** | **Data Source** | **Data Collection Methods** | **Timeline (Quarter/Year)** |
| --- | --- | --- | --- | --- | --- |
| **1.**  |  |  |  | **Mark one:****\_ Data exist****\_ Data need to be collected (new data)****Baseline data:****\_\_ Known****\_\_ Unknown/TBD****If data are new, how collected:****Frequency of data collection:** | **Data Collection:****Data Analysis:****Write-up/Reporting:****Dissemination:** |
| **2.**  |  |  |  | **Mark one:****\_ Data exist****\_ Data need to be collected (new data)****Baseline data:****\_\_ Known****\_\_ Unknown/TBD****If data are new, how collected:****Frequency of data collection:** |  |
| **3.**  |  |  |  |  |  |
| **4.**  |  |  |  |  | **(add additional rows as needed)** |
| **Notes:** Any additional descriptions that would be helpful to understand the planned evaluation of this activity. Also, include the rationale for selecting indicators if different from the ones provided by CDC. |

**Note: Copy and paste additional tables if more than 1 activity is being evaluated/tracked per strategy.**

Project Years One and Two

Logic Model: Please include a logic model for years 1 and 2. Please note that this logic model is specific to your selected activities and the outcomes you are tracking.

Project Years Three and Four

**Evaluation Plan Narrative: Description of Key Tasks in Years 3-4 (5 pages or less).**

1. Include key evaluation tasks annually for years 3 and 4.
2. List any key evaluation products created as a result of the evaluation.

**Year 3**

**Key Tasks:**

**Evaluation products created:**

**Year 4**

**Key Tasks:**

**Evaluation products created:**