RBA
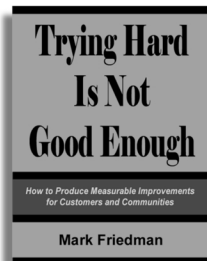
Results-Based Accountability™

The Fiscal Policy Studies Institute
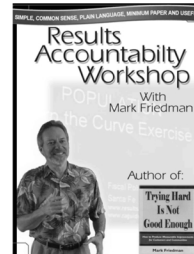
www.raguide.org   www.resultsaccountability.com

Trying Hard Is Not Good Enough

How to Produce Measurable Improvements for Customers and Communities

Mark Friedman

Results SCORECARD 3.0

resultsscorecard.com

Book & DVD Orders
amazon.com
resultsleadership.org

SIMPLE, COMMON SENSE, PLAIN LANGUAGE, MINIMUM PAPER AND USEFUL

Results Accountabilty Workshop

With Mark Friedman

POPU... the 'Curve Exercise'

Author of:

Trying Hard Is Not Good Enough

Mark Friedman

SIMPLE

COMMON SENSE

PLAIN LANGUAGE

MINIMUM PAPER

USEFUL

Results-Based Accountability
is made up of two parts:

Population Accountability
is about the well-being of

| WHOLE POPULATIONS |

for Communities – Cities – Counties – States - Nations

Performance Accountability
is about the well-being of

| CUSTOMER POPULATIONS |

for Programs – Agencies – Service Systems
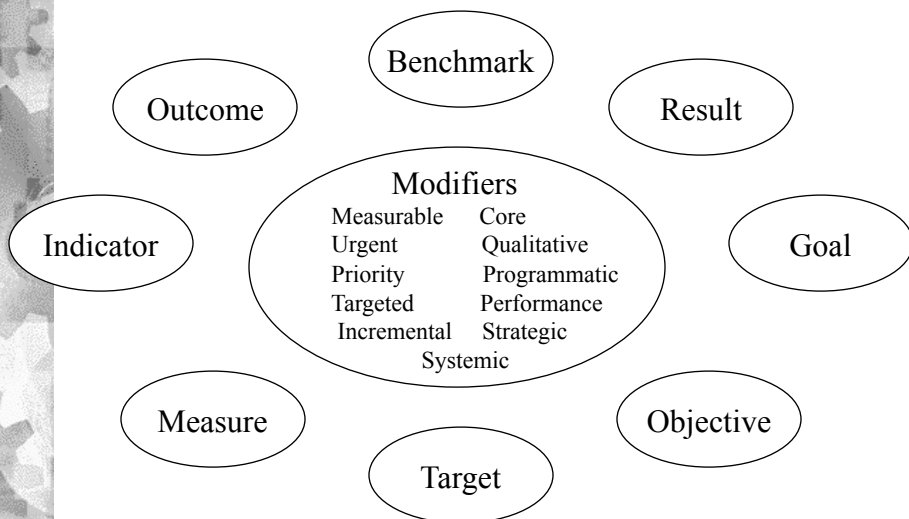
Results-Based Accountability
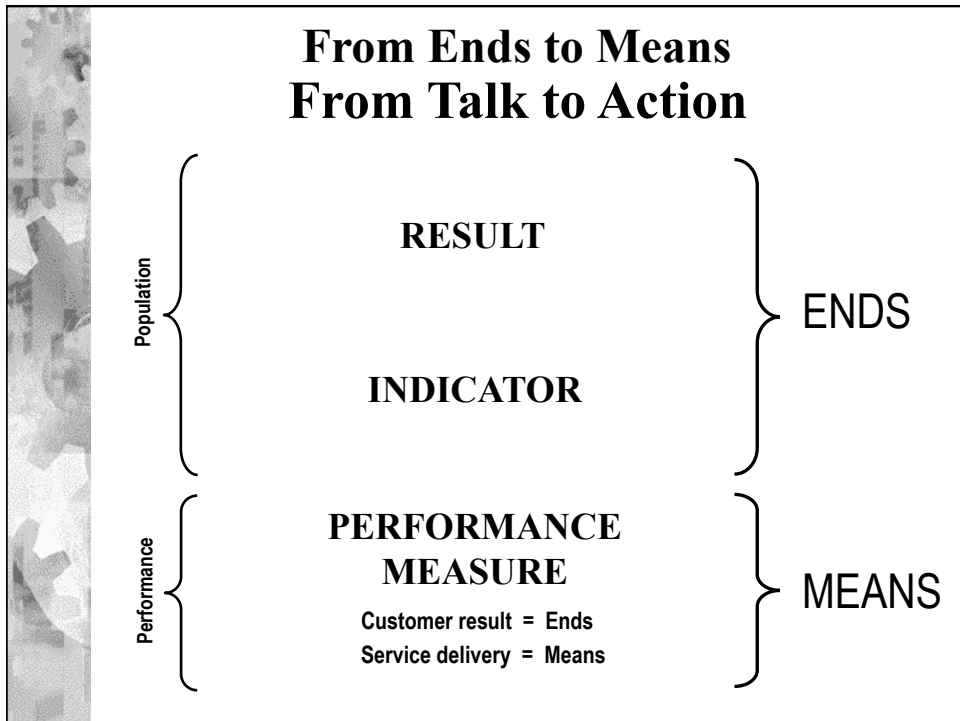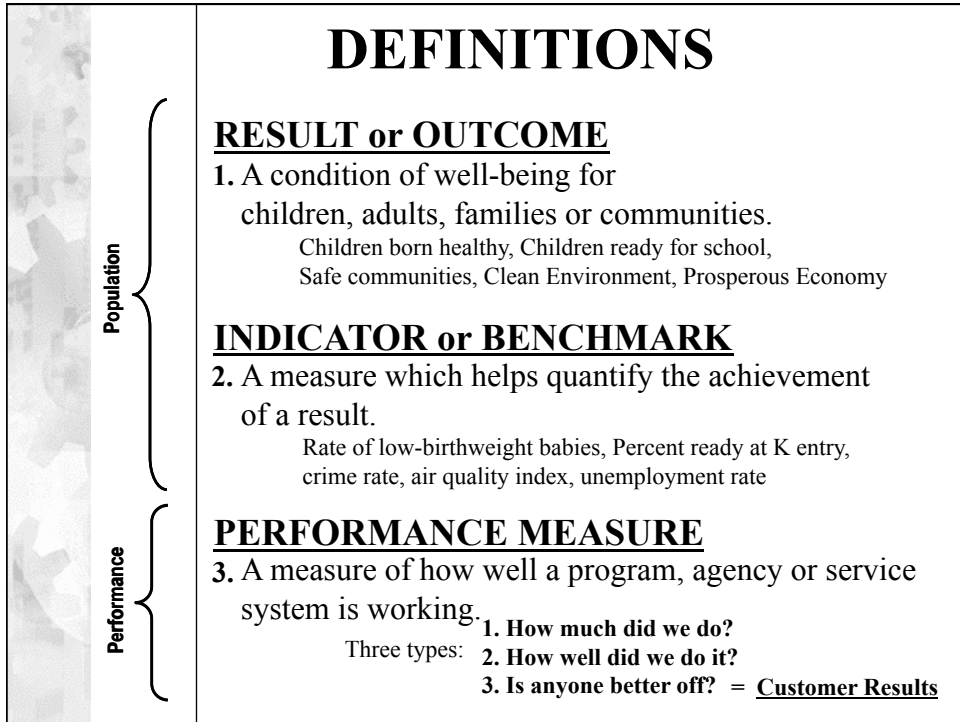
COMMON LANGUAGE

COMMON SENSE

COMMON GROUND

THE LANGUAGE TRAP
Too many terms. Too few definitions. Too little discipline

Benchmark

Outcome

Result

Indicator

Modifiers

Measurable	Core
Urgent	Qualitative
Priority	Programmatic
Targeted	Performance
Incremental	Strategic
	Systemic

Goal

Measure

Objective

Target

☆ Lewis Carroll Center for Language Disorders

Measurable urgent systemic indicators

DEFINITIONS

Population

RESULT or OUTCOME
1. A condition of well-being for

children, adults, families or communities.

Children born healthy, Children ready for school,
Safe communities, Clean Environment, Prosperous Economy

INDICATOR or BENCHMARK
2. A measure which helps quantify the achievement

of a result.

Rate of low-birthweight babies, Percent ready at K entry,
crime rate, air quality index, unemployment rate

Performance

PERFORMANCE MEASURE
3. A measure of how well a program, agency or service

system is working.

Three types:

1. How much did we do?

2. How well did we do it?

3. Is anyone better off? = **Customer Results**

From Ends to Means
From Talk to Action

Population

RESULT

INDICATOR

ENDS

Performance

**PERFORMANCE
MEASURE**

Customer result = Ends

Service delivery = Means

MEANS

IS IT A RESULT, INDICATOR OR PERFORMANCE MEASURE?

_____ 1. Safe Communities

_____ 2. Crime rate

_____ 3. Average police response time

_____ 4. Healthy People

_____ 5. Rate of diabetes

_____ 6. People have living wage jobs and income

_____ 7. % of people with living wage jobs and income

_____ 8. % of participants in job training who get living wage jobs

1.R 2.I 3.PM 4.R 5.I 6.R 7.I 8.PM

Results – Indicators – Performance Measures in
Amharic, Cambodian, Laotian, Somali, Spanish, Tigrigna, Vietnamese

Tool for Choosing a Common Language
Schematic

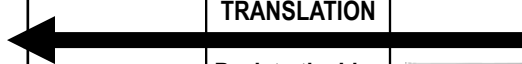| Ideas	Possible Labels		Choice
	Words	Modifiers	
1. A condition of well-being for children, adults, families and communities	Result Outcome Goal	Population Community-wide	1._____
2.			2._____
3.			3._____
4.			4._____
5.			5._____
6.			6._____

FPSI

Translation Guide/Rosetta Stone
Not the Language Police

Ideas	Group 1	Group 2	Group 3 etc.
1. A condition of well-being for children, adults, families & communities	RESULT	OUTCOME	GOAL
		TRANSLATION	
2.		Back to the Idea	
3. etc.			

POPULATION ACCOUNTABILITY

**for whole populations
or subpopulations
in a geographic area**

Community Outcomes
for Christchurch, NZ

1. A Safe City

2. A City of Inclusive and Diverse Communities

3. A City of People who Value and Protect the Natural Environment

4. A Well-Governed City

5. A Prosperous City

6. A Healthy City

7. A City for Recreation, Fun and Creativity

8. City of Lifelong Learning

9. An Attractive and Well-Designed City

Georgia Policy Council
for Children and Families

RESULTS

- Healthy Children

- Children Ready for School

- Children Succeeding in School

- Strong Families

- Self Sufficient Families

Every Child Matters – Children Act
Outcomes for Children and Young People

Being Healthy: enjoying good physical and mental health and living a healthy lifestyle.

Staying Safe: being protected from harm and neglect and growing up able to look after themselves.

Enjoying and Achieving: getting the most out of life and developing broad skills for adulthood.

Making a Positive Contribution: to the community and to society and not engaging in anti-social or offending behaviour.

Economic Well-being: overcoming socio-economic disadvantages to achieve their full potential in life.

Pregnant Women and Young Children Thrive

Heartening Indicators:

Troublesome Indicators:

#2: Pregnant Women and Young Children Thrive

Recommendations | Accomplishments in 2000 | Recommendations for 2001 | Action/Strategies 2001

- Early Prenatal Care
- Percent Children (ages 0-5) with Elevated Lead Levels
- Breastfeeding Among Healthy Babies Infants: Vermont, FY 1996-97
- Low Birthweight Infants
- Smoking During Pregnancy
- Asthma Hospitalization, Average Rates per 1000 Vermont Residents, 1989-98

The Story Behind the Curve

In all three areas of improving indicators, success can be attributed to a system wide approach to address prenatal care, lead levels and breast-feeding.

The Story Behind the Curve

Despite many factors that contribute to infant mortality and low birth weight, smoking cessation continues to be the prime areas for focus of prevention if we are to bend the curve on infant mortality and low birth weight.

OUTCOME:

People in Cardiff are healthy

POPULATION:

All people in Cardiff

Cardiff / Caerdydd

HEADLINE INDICATORS (Bellwethers)
- Overweight and Obese Data for Cardiff 2004-2008
- Life expectancy
- Adults who reported currently being treated for a mental illness
- % of people who reported having a limiting long-term illness
- % of babies born with low birth weight
- % People who smoke
- Hospital admissions attributable to alcohol – Interim measure

WHAT OTHER DATA DO WE NEED? (DATA DEVELOPMENT AGENDA)
- Levels of substance misuse
- Unscheduled admissions to hospital

HOW ARE WE DOING?

Life expectancy (Source: Health Statistics and Analysis Unit, Welsh Assembly Government)	Overweight and Obese Data for Cardiff 2004-2008 (Source: Welsh Health Survey)	Adults who reported currently being treated for a mental illness (Source: Welsh Health Survey)	Adults who reported having a limiting long-term illness (Source: Welsh Health Survey)	% of babies born with low birth weight (under 2500g)	% of People who Smoke	DDA - Hospital admissions attributable to alcohol – Interim Measure
						4-year rolling rate (2004-2008) for Cardiff from Public Health Wales: Males: 2024 per 100,000 Females: 1115 per 100,000

STORY BEHIND THE BASELINE

PARTNERS WHO CAN HELP US
- NHS
- Council – Adult Services, Children Services, Leisure & Play, Schools and Lifelong Learning
- Third sector
- Police
- Fire Service
- Neighbourhood management partners
- Private sector
- Communities First
- Food and drink industry
- Welsh Assembly Government
- Community Safety Partnership
- 101
- Social care providers

MEANS <u>not</u> ENDS
To Improving Results   In Themselves

1. COLLABORATION

2. SYSTEMS REFORM

3. SERVICE INTEGRATION

4. DEVOLUTION

5. FUNDING POOLS

Leaking Roof
(Results thinking in everyday life)

Experience

Measure

Inches of Water
BASELINE

<u>Not</u> OK

? Fixed

Turning the Curve

Story behind the baseline (causes)

Partners

What Works

Action Plan # 2
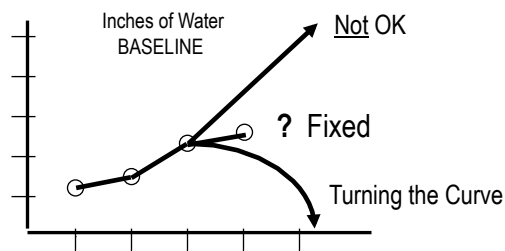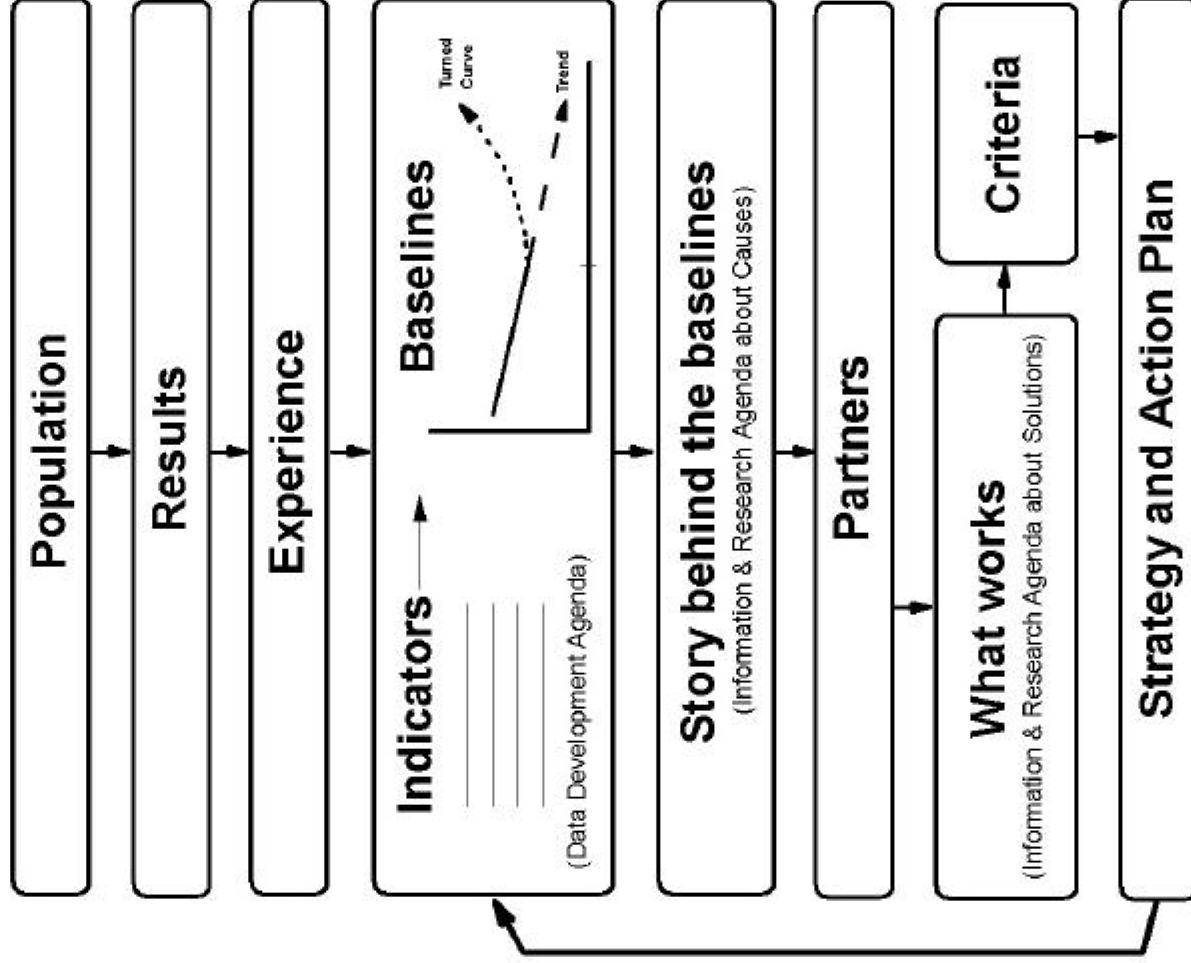
The 7 Population Accountability Questions

1. What are the quality of life conditions we want for the children, adults and families who live in our community?

2. What would these conditions look like if we could see them?

3. How can we measure these conditions?

4. How are we doing on the most important of these measures?

5. Who are the partners that have a role to play in doing better?

6. What works to do better, including no-cost and low-cost ideas?

7. What do we propose to do?

Population Accountability

Getting from Talk to Action

Population → Results → Experience →

Baselines

Indicators →

(Data Development Agenda)

Turned Curve

Trend

Story behind the baselines
(Information & Research Agenda about Causes)

→ Partners →

What works
(Information & Research Agenda about Solutions)

Criteria →

Strategy and Action Plan

Criteria for
Choosing Indicators
as Primary vs. Secondary Measures

Communication Power

Does the indicator communicate to a broad range of audiences?

Proxy Power

Does the indicator say something of central importance about the result?

Does the indicator bring along the data **HERD**?

Data Power

Quality data available on a timely basis.

Choosing Indicators
Worksheet

Outcome or Result_____Safe Community_____

Candidate Indicators	Communication Power	Proxy Power	Data Power
Measure 1	H M L	H M L	H M L
Measure 2			
Measure 3	H	H	H
Measure 4			
Measure 5	H	H	L
Measure 6			Data
Measure 7			Development
Measure 8			Agenda

Three Part Indicator List for each Result

Part 1: <u>Primary Indicators</u>

- 3 to 5 "Headline" Indicators
- What this result "means" to the community
- Meets the Public Square Test

Part 2: <u>Secondary Indicators</u>

- Everything else that's any good (Nothing is wasted.)
- Used later in the Story behind the Curve

Part 3: <u>Data Development Agenda</u>

- New data
- Data in need of repair (quality,timeliness etc.)

The Matter of Baselines

H

M **OK?**

L

Point to Point

Turning the Curve
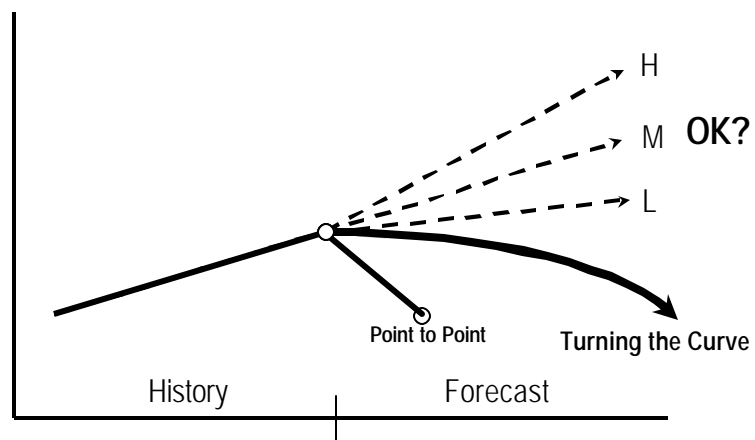
History   Forecast

Baselines have two parts: history and forecast

Teen Pregnancy Rates, 1990-1994
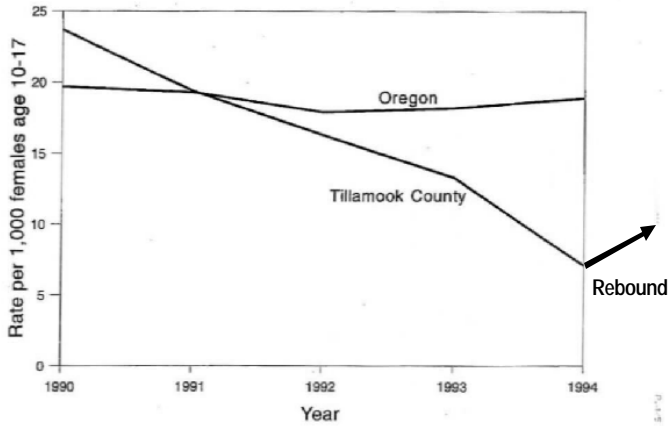
Source: Oregon Health Division, Center for Health Statistics

Newcastle, UK

	1998	1999	2000	2001	2002	2003	2004	2005	2006	2007
Ncle	14.5	14.5	16.8	14.5	17	15	11.9	10.6	9.5	9.3
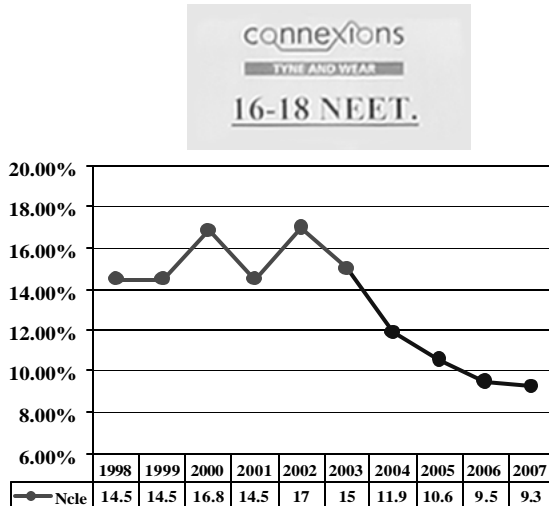
Revised 9 Nov 2007

Source: Connexions Tyne and Wear, UK

14

PERFORMANCE ACCOUNTABILITY

**for Programs/Services,
Agencies and Service Systems**

**"All performance measures

that have ever existed

for any program

in the history of the universe

involve answering two sets of

interlocking questions."**

Performance Measures

Quantity	Quality
How Much did we do? (#)	**How Well** did we do it? (%)

Performance Measures

Effort   How hard did we try?
Effect   Is anyone better off?

Performance Measures

	Quantity	Quality
Effort	**How much did we do?**	**How well did we do it?**
Effect	**Is anyone better off?** #	%

Education

	Quantity	Quality
Effort	How much did we do? **Number of students**	How well did we do it? **Student-teacher ratio**
Effect	Is anyone better off? **Number of high school graduates**	**Percent of high school graduates**

17

Pediatric Practice

	Quantity	Quality
Effort	How much did we do? **Number of children treated**	How well did we do it? **Percent of patients waiting less than 30 min in the waiting room**
Effect	Is anyone better off?	
	# children fully immunized (in the practice)	**% children fully immunized** (in the practice)

Drug/Alcohol Treatment Program

	Quantity	Quality
Effort	How much did we do? **Number of persons treated**	How well did we do it? **Percent of staff with training/ certification**
Effect	Is anyone better off?	
	Number of clients off of alcohol & drugs - at exit - 12 months after exit	**Percent of clients off of alcohol & drugs** - at exit - 12 months after exit

Fire Department

	Quantity	Quality
	How much did we do?	**How well did we do it?**
Effort	**Number of responses**	**Response Time**
	Is anyone better off?	
Effect	**# of fires kept to room of origin**	**% of fires kept to room of origin**

General Motors

	Quantity	Quality
	How much did we do?	**How well did we do it?**
Effort	**# of production hrs** **# tons of steel**	**Employees per vehicle produced**
	Is anyone better off?	
Effect	**# of cars sold** **$ Amount of Profit** **$ Car value after 2 years**	**% Market share** **Profit per share** **% Car value after 2 years**

Source: USA Today 9/28/98

Not All Performance Measures Are Created Equal

Quantity	Quality
How much did we do?	**How well did we do it?**
Least Important	Also **Very Important**
Is anyone better off?	
	Most Important

Effort / Effect

The Matter of Control

Quantity	Quality
How much did we do?	**How well did we do it?**
Most Control	
Is anyone better off?	
	Least Control

Effort / Effect

PARTNERSHIPS

20
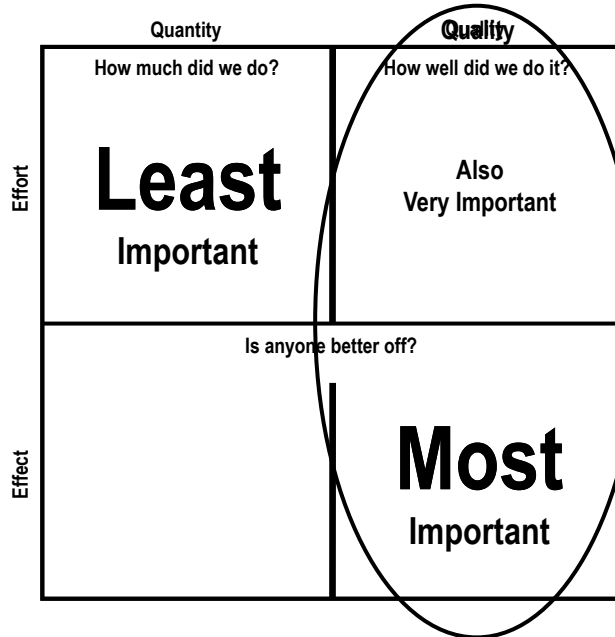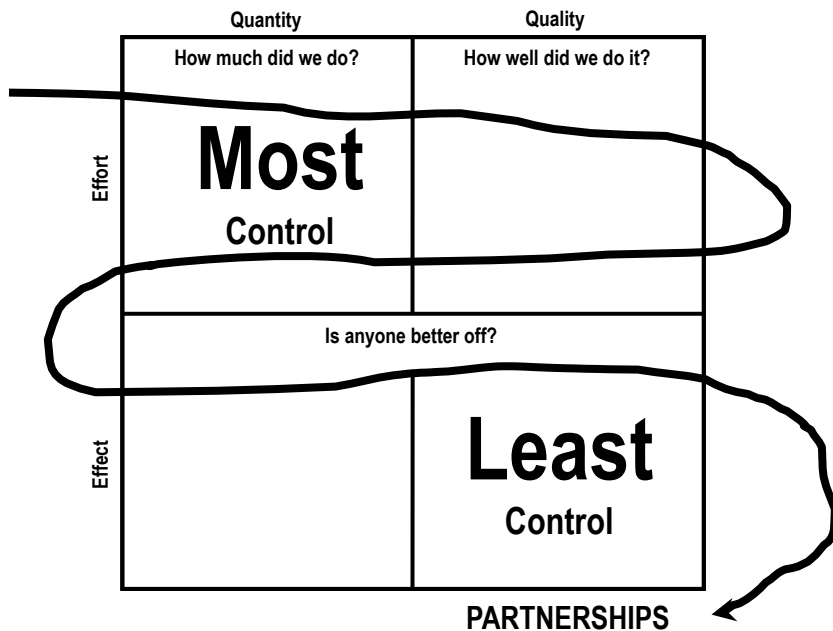
RBA Categories Account for All Performance Measures
(in the history of the universe)

Total Quality Mgmt (TQM)

Cost

Quantity | Quality

Process Input

Effort

Efficiency, Admin overhead, Unit cost
Staffing ratios, Staff turnover
Staff morale, Access, Waiting time,
Waiting lists, Worker safety

Product Output Impact

Effect

Customer Satisfaction
(quality service delivery & customer benefit)

Cost / Benefit ratio
Return on investment

Client results or client outcomes

*
1. Did we treat you well?

2. Did we help you with your problems?

Benefit value

Effectiveness
Value added
Productivity

* World's simplest complete customer satisfaction survey

The Dual Purpose
of Performance Measurement

1. The **first purpose** of performance measurement is to **IMPROVE PERFORMANCE.**

2. **Show the program is working** and **tell the story** to funders and other stakeholders

Comparing Performance

1. To Ourselves First

Can we do better than our own history?

Reward?

Punish?

2. To Others

When it is a fair apples/apples comparison.

3. To Standards

When we know what good performance is.
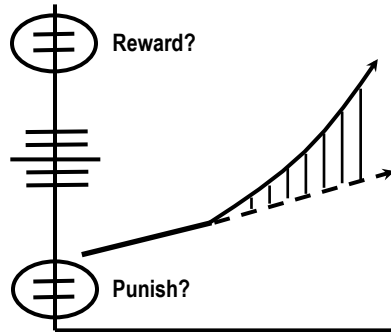
Advanced Baseline Display

Create targets only when they are: FAIR & USEFUL

Aspiration NOT Punishment

Goal (line)

Target or Standard

Avoid publicly declaring targets by year if possible.

Your Baseline

Instead: Count anything better than baseline as progress.

Comparison Baseline
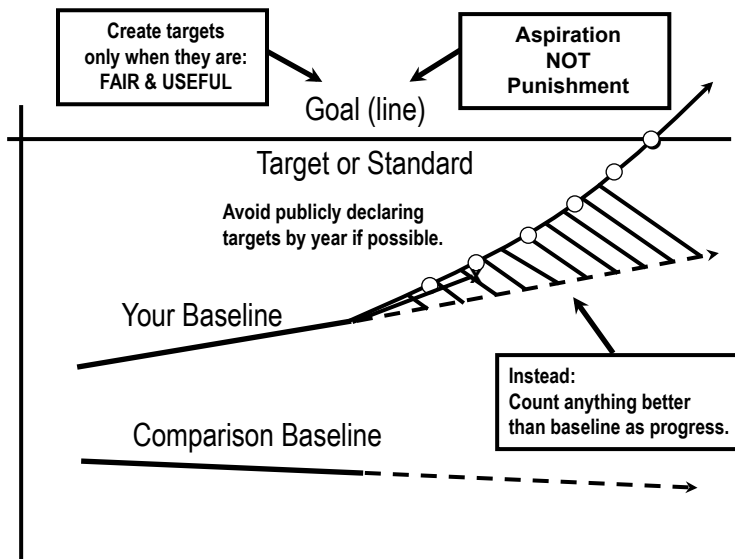
Choosing Headline Measures and the Data Development Agenda

	Quantity	Quality
	How much did we do?	**How well did we do it?**
Effort	# Measure 1 --------------------- # Measure 2 --------------------- # Measure 3 --------------------- # Measure 4 --------------------- # Measure 5 --------------------- # Measure 6 --------------------- # Measure 7 ---------------------	% Measure 8 --------------------- → **#3 DDA** % Measure 9 --------------------- % Measure 10 --------------------- % Measure 11 --------------------- % Measure 12 --------------------- → **#2 Headline** % Measure 13 --------------------- % Measure 14 ---------------------

Is anyone better off?

| **Effect** | # Measure 15 ---------------------
 # Measure 16 ---------------------
 # Measure 17 ---------------------
 # Measure 18 ---------------------
 # Measure 19 ---------------------
 # Measure 20 ---------------------
 # Measure 21 --------------------- | % Measure 15 --------------------- → **#2 DDA**
 % Measure 16 ---------------------
 % Measure 17 --------------------- → **#3 Headline**
 % Measure 18 ---------------------
 % Measure 19 --------------------- → **#1 Headline**
 % Measure 20 ---------------------
 % Measure 21 --------------------- → **#1 DDA** |

Select 3 to 5 Performance Measures
at each level of the organization

20 – 60 – 20 Rule

3 - 5

3 - 5   3 - 5   3 - 5

3 - 5

3 - 5   3 - 5   3 - 5

3 – 5 most important or composites
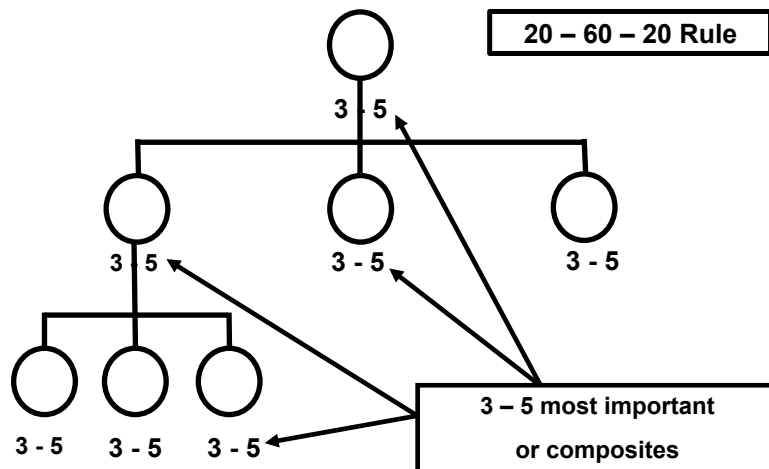
Separating the Wheat from the Chaff

Types of Measures Found in Each Quadrant

How much did we do?	**How well did we do it?**
# Customers served (by customer characteristic) **# Activities** (by type of activity)	**% Common measures** Workload ratio, staff turnover rate, staff morale, percent of staff fully trained, worker safety, unit cost, customer satisfaction: *Did we treat you well?* **% Activity-specific measures** Percent of actions timely and correct, percent customers completing activity, percent of actions meeting standards

Is anyone better off?

#

#

<table>
<tr><td>Point in time vs.
Two point comparison
measures</td></tr>
</table>

#

#

% Skills / Knowledge
(e.g. parenting skills)

% Attitude / Opinion
including customer satisfaction:
Did we help you with your problems?

% Behavior
(e.g. school attendance)

% Circumstance
(e.g. working, in stable housing)

The 7 Performance Accountability Questions

1. Who are our customers?

2. How can we measure if our customers are better off?

3. How can we measure if we are delivering services well ?

4. How are we doing on the most important of these measures?

5. Who are the partners that have a role to play in doing better?

6. What works to do better, including no-cost and low-cost ideas?

7. What do we propose to do?

Performance Accountability

Getting from Talk to Action

Customers

Performance Measures → Baselines

How much did we do?
How well did we do it?
Is anyone better off?

(Data Development Agenda)

Turned Curve
Trend

Story behind the baselines
(Information & Research Agenda about Causes)

Partners

What works
(Information & Research Agenda about Solutions)

Criteria

Strategy and Action Plan

North Lincolnshire
Public Sector Homes
Percent Empty 1999 - 2005

Montgomery County, Ohio
K-12 Attendance Per Year
with 2-year moving average

THE WELSH EPILEPSY UNIT

Service Description: The Welsh Epilepsy Unit is a tertiary referral centre for specialist epilepsy services in South Wales. The immediate catchment population covered is 700,000 but many referrals are also taken from elsewhere in Wales. The Unit offers a multidisciplinary approach to epilepsy care and offers a very broad range of services to people with epilepsy, their families and carers.

DEFINED SERVICE USERS: Patients with a first suspected seizure or unexplained blackout

HEADLINE PERFORMANCE MEASURES

1. % seen by a specialist within 2 weeks (NICE guideline)
2. No. admissions to hospital for a seizure
3. Average waiting time to see a specialist
4. % did not attend (DNA) first seizure clinic

DATA DEVELOPMENT AGENDA

1. Seizure frequency
2. Death rate
3. % prescribed incorrect medication
4. % who report they feel satisfied or better off

HOW ARE WE DOING?

% Seen by a Specialist within 2 weeks

No. Admissions for a Seizure

Average Waiting Time to See a Specialist

DNA Rate
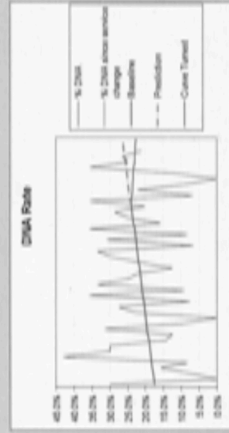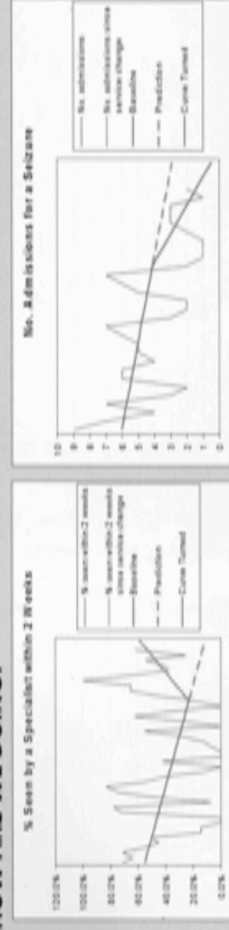
STORY BEHIND THE BASELINE

Limited clinic capacity with unpredictable demand

Small team – unable to cover absence to prevent clinic cancellation

Low frequency of clinics causing delay if appointment not suitable for the patient

Clinic booked by Epilepsy Unit admin staff – if admin staff on leave the clinic slots are not filled

Consultant triage's fax referrals – delay if unavailable

Patient anxiety and concern re implications of a diagnosis e.g. driving

Stigma attached to Epilepsy

Patients put off by unit name – diagnosis seems pre-determined

Nurses unable to refer for EEG leading to delay in diagnostics and confirmed diagnosis

New nurse led emergency unit assessment service for first seizure patients has improved performance measures but out of hours service reverts to old pathway

Primary Care does not have fast track access for first seizure clinics

Primary Care are not made aware if a patient DNA's so can't follow up

PARTNERS WHO CAN HELP US

Emergency Unit, Radiology, Neurophysiology, Medical Records, A&C staff, Consultants, Specialist Nurses, Ambulance Trust, Cardiology, Psychology, Care of the Elderly, Neurosurgery, Prison, Voluntary Sector, Practice Nurses, GP's, Family members/witnesses, Drug & Alcohol Services, Occupational Health, Referral Management Centre, Obstetrics, Management, Communications Department, Patients

WHAT ARE WE GOING TO DO TO IMPROVE PERFORMANCE?

1. Change the name of the "Epilepsy Unit" to the "Alan Richens Unit"
2. Develop nurse led first seizure clinics to cover when Consultants unavailable
3. Develop dedicated fast track clinic for Primary Care referrals
4. Enable specialist nurse referral for EEG
5. Develop process to inform Primary Care of DNA

Next Generation Contracting
Contract Provisions

Provision 1. Specify the 3 to 5 most important performance measures (from *the How well did we do it?* and *Is anyone better off?* categories).

Provision 2. Specify that the contractor will use a continuous improvement process (the RBA 7 Questions).

Provision 3. Specify how the funder and contractor will work in partnership to maximize LR customer results (quarterly meetings using the 7 questions as the agenda).

Provision 4. Specify that the funder will work with the funding community to simplify and standardize contracting and performance reporting.

Next Generation Contracting
Contract Provisions

Provision 5: : Clear articulation of role in population/community well-being using the language of contribution not attribution.

Provision 6: 10% for quality management and administration.

Provision 7: Multi-year funding using 3 year rolling contracts

Provision 8: Use of targets that are fair and useful.

Provision 9: Fund flexibility and virtual funding pool: transfer of up to 10% across line items and program lines.

Provision 10: Request for Results: Getting past the sometimes negative effects of competitive RFP contracting or tendering.

HOW
Population &
Performance
Accountability
FIT TOGETHER

THE LINKAGE Between POPULATION and PERFORMANCE

POPULATION ACCOUNTABILITY

POPULATION
RESULTS

Healthy Births
Rate of low birth-weight babies
Children Ready for School
Percent fully ready per K-entry assessment
Self-sufficient Families
Percent of parents earning a living wage

**Contribution
relationship**

PERFORMANCE ACCOUNTABILITY
Job Training Program

# persons receiving training	Unit cost per person trained
# who get living wage jobs	% who get living wage jobs

CUSTOMER
RESULTS

**Alignment
of measures**

**Appropriate
responsibility**

An Advanced View
of the Relationship Between
Indicators and Performance Measures

RBB201

Total Population

Service System
Client Population

Agency
Client Population

Program
Client Population

As the system client population approaches the total population,

Then Performance measures, which address client well-being may begin to play a double role as both service system performance measures and total population indicators.
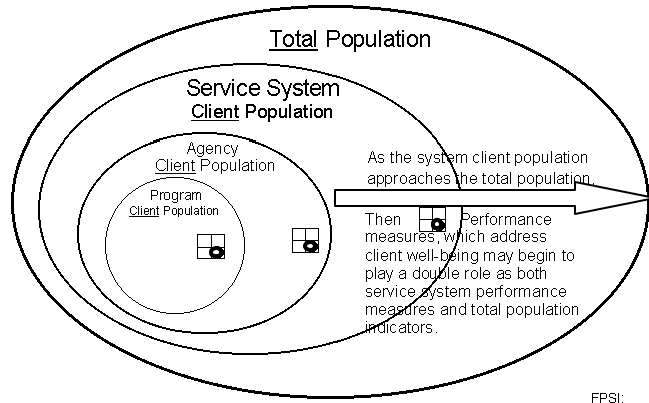
FPSI:
2/15/98

Every time you present your program,

Use a two-part approach.

Population Accountability

Result: to which you contribute to most directly.

Indicators:

Story:

Partners:

What would it take?:

Your Role: as part of a larger strategy.

Shortcut

Performance Accountability

Program:

Performance measures:

Story:

Partners:

Action plan to get better:

Different Kinds of Progress

1. Data

    a. Population indicators Actual turned curves:
        movement for the better away from the baseline.

    b. Program performance measures:
        customer progress and better service:

            How much did we do?
            How well did we do it?
            Is anyone better off?

2. Accomplishments: Positive activities, not included above.

3. Stories behind the statistics that show how individuals are
    better off.

Board of Directors Meeting
AGENDA

1. **New data**

2. **New story behind the curves**

3. **New partners**

4. **New information on what works.**

5. **New information on financing**

6. **Changes to action plan and budget**

7. **Adjourn**
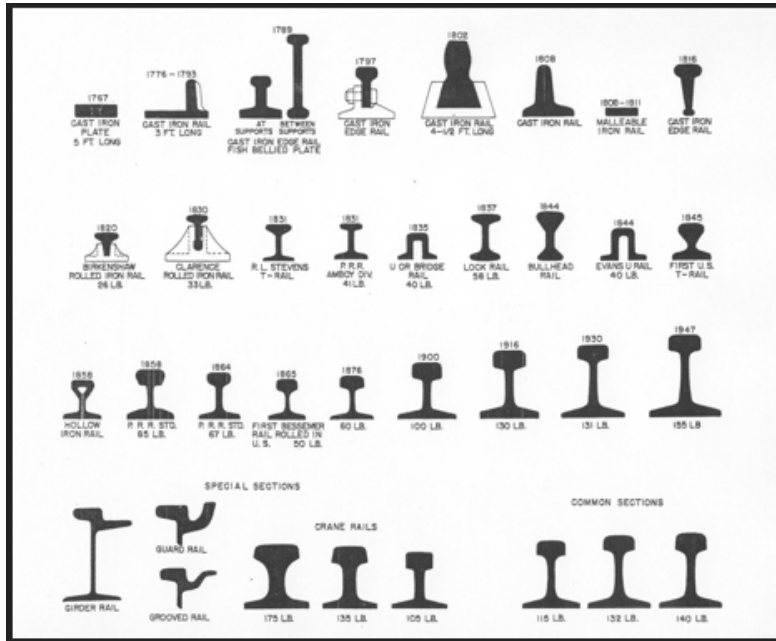
RBA in a Nutshell
2 – 3 - 7

2 - **kinds of accountability plus language discipline**
> Population accountability —— Results & Indicators
> Performance accountability —— Performance measures

3 - **kinds of performance measures.**
> How much did we do?
> How well did we do it?
> Is anyone better off?

7 - **questions from ends to means in less than an hour.** Baselines & Turning the Curve

EXERCISES

Creating a Working Baseline from Group Knowledge

Indicator or Performance Measure

65%

Backcasting

Forecasting

Not OK?

Now
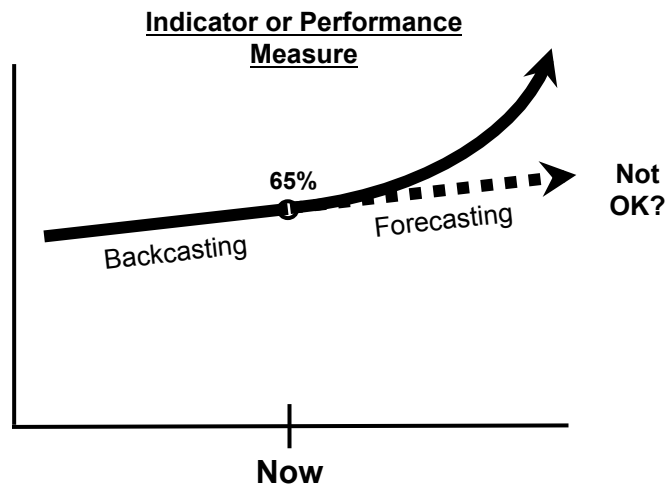
Turn the Curve Exercise: Population Well-being

5 min: <u>Starting Points</u>
- timekeeper and reporter
- geographic area
- two hats (yours plus partner's)

10 min: <u>Baseline</u>
- pick a result and a curve to turn
- forecast (to **2016**) – OK or not OK?

15 min: <u>Story behind the baseline</u>
- causes/forces at work
- information & research agenda part 1 - causes

15 min: <u>What works? (What would it take?)</u> ◄
- what could work to do better?
- each partners contribution
- no-cost / low-cost ideas
- information & research agenda part 2 – what works

Two pointers to action

10 min: <u>Report</u> **convert notes to one page**

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4. --------- Off the Wall

<u>ONE PAGE Turn the Curve Report: Population</u>

<u>Result</u>: _____

<u>Indicator</u>
<u>Baseline</u>
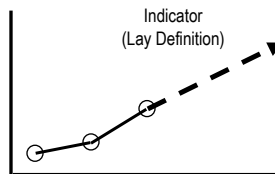
Indicator
(Lay Definition)

<u>Story behind the baseline</u>

-------------------------- (List as many as needed)

<u>Partners</u>

-------------------------- (List as many as needed)

<u>Three Best Ideas – What Works</u>

1. --------------------------
2. --------------------------
3. ---------No-cost / low-cost
4. --------- **Off the Wall**

Sharp
Edges

Turn the Curve Exercise: Program Performance

5 min: <u>Starting Points</u>
- timekeeper and reporter
- identify a program to work on
- two hats (yours plus partner's)

10 min: <u>Performance measure baseline</u>
- choose 1 measure to work on – from the lower right quadrant
- forecast (to **2016**) – OK or not OK?

15 min: <u>Story behind the baseline</u>
- causes/forces at work
- information & research agenda part 1 - causes

Two pointers to action

15 min: <u>What works? (What would it take?)</u>
- what could work to do better?
- each partners contribution
- no-cost / low-cost ideas
- information & research agenda part 2 – what works

10 min: <u>Report</u> **convert notes to one page**

---

4. --------- Off the Wall

ONE PAGE Turn the Curve Report: Performance

<u>Program</u>: _____

<u>Performance Measure Baseline</u>
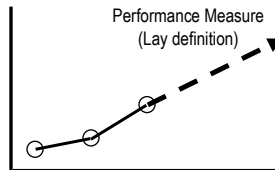
Performance Measure
(Lay definition)

<u>Story behind the baseline</u>
- --------------------------
- -------------------------- (List as many as needed)

<u>Partners</u>
- --------------------------
- -------------------------- (List as many as needed)

<u>Three Best Ideas – What Works</u>
1. --------------------------
2. -------------------------
3. --------No-cost / low-cost
4. --------- Off the Wall

Sharp Edges

35

Slide 1

20 Minute Exercise

		Performance Accountability
		For Programs, Agencies and Service Systems
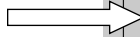
2 customers → 1. Who are our customers?
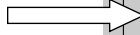
1 measure → 2. How can we measure if our customers are better off?
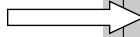
1 measure → 3. How can we measure if we are delivering service well?

Discuss how we're doing → 4. How are we doing on the most important of these measures?
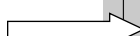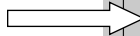
2 partners → 5. Who are the partners with a role to play in doing better?

2 what works ideas (1 nc/lc) → 6. What works, what could work, to do better?

Discuss how to implement → 7. What do we propose to do?
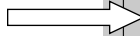
FPSI

- 52 -

40

Slide 2

Alternative to Traditional Evaluation Methods:
DEMONSTRATING the CONTRIBUTION
of complex change efforts… requires 3 elements:

A Curve to Turn

Bonus: a background trend stayed the same or got worse.

② …and it had a timely relationship to….

③ …. a turn in the curve.

① We tried a bunch of stuff that had a credible chance of making a difference …

© FPSI

36
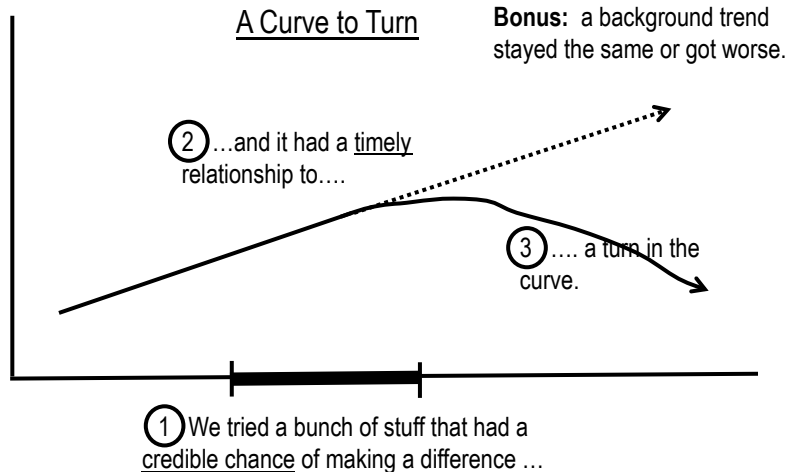
RESULTS BASED BUDGETING

Do we need it?

POPULATION ACCOUNTABILITY

Is it working?

PERFORMANCE ACCOUNTABILITY

What's Next?

A Basic Action Plan for Results Based Accountability

TRACK 1: POPULATION ACCOUNTABILITY

- Establish population results
- Establish indicators, baselines and charts on the wall
- Create an indicators report card
- Set tables (action groups) to turn curves

TRACK 2: PERFORMANCE ACCOUNTABILITY

- Performance measures, and charts on the wall for programs, agencies and service systems
- Use 7 Questions supervisor by supervisor and program by program in management, budgeting and strategic planning

Wyoming Strategic Planning Design - Part I

(To be completed by the Governors Planning Deptartment)I

Quality of Life Result:

E.g. A Clean Environment, A Prosperous Economy, Strong Stable Families, Children Ready for and Succeeding in School, etc.

Why is this important?

Briefly explain, so a taxpayer could understand, why this quality of life condition is important to the people of Wyoming.

How are we doing?

Show the 3 to 5 most important indicators in the form of baselines with at least 3 years of actual history. Optional: provide a 2 year forecast at current effort level.

The story behind the baselines:

Explain, so a taxpayer could understand, the causes behind the indicator baselines above. Use additional data as necessary to tell this story.

What it will take to do better and the role of state government:

Include no-cost and low-cost ideas and the role of the state's partners.

Appendix A: Data development Agenda: List priorities for new or better indicator data

Wyoming Strategic Planning Design - Part II
Same format for Departments, Divisions and Programs

Department/Division/Program:

Contribution to Wyoming Quality of Life:

Briefly explain, so a taxpayer could understand, how your (Dept/Div/Prog), in conjunction with other public and private partners, contributes to the quality of life of the people of Wyoming.

Basic Facts:

Show total number of staff and size of budget in total and general funds.
List the 5 most important programs or functions and show annual number served,

---

Performance:

Show the 3 to 5 most important performance measures in the form of baselines with at least 3 years of actual history. Optional: provide a 2 year forecast of performance at current effort level.

Performance measures must be those that best answer the questions:
- How well are we delivering service?
- Are our customers better off? (CUSTOMER RESULTS)

Story behind (last 3 years of) performance:

Briefly explain, so a taxpayer could understand, the causes behind your performance for the last few years, including an explaination of the picture of performance shown in the baselines above. Reference your accomplishments where they have contributed. Use additional performance data as necessary to tell this story. Best formatting is short paragraphs with first sentence underlined.

What do you propose to do to improve performance in the next 2 yrs?

Include no-cost and low-cost ideas and the contribution of partners. Best formatting is short paragraphs with action item underlined.

Appendix A: Data development Agenda: List priorities for new or better data on performance

Appendix B: Link to Budget: Provide detail on priorities identified above which show in the current or proposed budget.

A 5-step method for identifying performance measures for any program in 45 minutes

The following five step scripted process is the best way to select the most important performance measures and identify a Data Development Agenda for any program or service. With practice, this process can be completed in about 45 minutes. Participants should each have a copy of the performance measurement summary on page 28.

Step 1. How much did we do? Draw the four quadrants on a piece of flip chart paper. Start in the upper left quadrant. Write down the measure "number of customers served." Ask if there are better, more specific ways to count customers or important subcategories of customers and list them, such as the number of children with disabilities served.

Next, ask what activities are performed. Convert each activity into a measure. The activity of "training people" becomes number of people trained. Paving roads becomes number of miles of road paved. When you're finished, ask if there are any major activities that are not listed. Don't try to get every last detail, just the most important categories of customers and activities.

Step 2. How well did we do it? Ask people to review the common measures listed in the upper right quadrant of the performance measurement summary. Write each one that applies in the upper right quadrant of the flipchart paper.

Next take each activity listed in the upper left quadrant and ask what measures tell how well that particular activity was performed. If you get blank looks, ask if timeliness or accuracy matters. Convert each answer into a measure and be specific. The timeliness of case reviews becomes percent of case reviews completed on time. If you are not sure whether a measure goes in the upper right or lower right quadrant, put it where you think best and move on. All the measures in both quadrants will be considered equally in Steps 4 and 5.

Step 3. Is anyone better off? Ask "If your program works really well, in what ways are your customers' lives better? How could we observe this? How could we measure it?" Create pairs of measures (number and percentage) for each answer. For example, the number of clients who get jobs goes in the lower left quadrant. And the percent of clients who get jobs goes in the lower right quadrant. It saves time, when entering these measures, to write them only once in the lower right quadrant, and place # signs in the lower left quadrant across from each measure.

Identifying whether anyone is better off is the most interesting and challenging part of this process. Dig deep into the different ways in which service benefits show up in the lives of the people served. Explore each of the four categories of better-offness: Skills / Knowledge, Attitude / Opinion, Behavior, and Circumstance. If people get stuck, try the reverse question: "If your service was terrible, how would it show up in the lives of your customers?"

Look first for data that is already collected. Then be creative about things that could be counted and how the data could be generated. It is not always necessary to have data for all of your customers. Data based on samples can be used. Pre and post testing can be used to show improvement over time in skills, knowledge, attitude and opinion. When no other data is available, ask clients to self-report about improvements or benefits.

Keep in mind that all data have two incarnations: a lay definition and a technical definition. The lay definition is something that everyone can understand. The technical definition gives the exact way in which the measure is constructed. For example, "high school graduation rate" is a lay definition with many possible technical definitions. The easiest technical definition is the number who graduate on June 15th as a percentage of enrollment on June 1st. This will always be close to 100%. A tougher technical definition would compare graduation numbers to enrollment on September 30 of the previous year. A still tougher definition would compare graduation to the enrollment of 9th graders four years earlier. Each technical definition constitutes a <u>separate measure</u>.

When you complete step 3, you will have filled in the four quadrants with as many entries as possible. In steps 4 and 5, we use a shortcut method to assess the communication, proxy and data power of each measure and winnow these down to the most important measures.

Step 4. Headline measures: Review the list of upper right and lower right quadrant measures and identify those for which there is good data. By good data we mean that timely and reliable data for the measure is available <u>today</u> or could be produced with little effort. Put a circle next to each one of these measures. Next, ask "If you had to talk about the performance of your program in a public setting, such as a public hearing or conference, and you could only use one of the measures with a circle, which one would you choose?" Put a "#1" by the answer. Then ask "If you could have a second measure... and a third?" You should identify no more than 3 to 5 measures. These should be a mix of upper right and lower right measures. These choices represent a working list of headline measures for the program.

Step 5. Data Development Agenda: Ask, "If you could buy one of the measures for which you don't have data, which one would it be?" The word "buy" is used because data is expensive both in terms of money and worker time. With a different colored marker, write DDA #1 next to the chosen measure. "If you could buy a second measure... and a third?" List no more than 3 to 5 measures. These measures are the program's Data Development Agenda *in priority order*.

This process leads to a three part list of performance measures:

> **Headline measures**: Those 3 to 5 most important measures for which you have good data, the measures you would use to present your program's performance in a public setting.

> **Secondary measures**: All other measures for which you now have good data. These measures will be used to help manage the program, and will often figure in the story behind the baselines.

Data Development Agenda: A prioritized list of measures where you need new or better data. You will later need to make a judgment about how far down this list you can afford to go.

TOOL FOR CHOOSING A COMMON LANGUAGE

Ideas	Possible Labels (and modifiers)	Choice
A. THE BASICS		
1. A system or process for holding people in a geographic area responsible for the well-being of the total population or a defined subpopulation.	Population Accountability	
2. A system or process for holding managers and workers responsible for the performance of their programs, agencies and service systems.	Performance Accountability	
3. A condition of well-being for children, adults, families and communities.	Result, Outcome, Goal (Population, Community-wide)	
4. A measure that helps quantify the achievement of a population result.	Indicator, Benchmark (Population, Community-wide)	
5. A measure of how well a program, agency or service system is working.	Performance measure, Performance indicator	
6. A measure of the quantity of effort (how much service was delivered).	How much did we do? Inputs, Outputs	
7. A measure of the quality of effort (how well the service functions were performed).	How well did we do it? Efficiency measure, Process measure	
8. A measure of the quantity and quality of effect on customers' lives. (Note: for infrastructure, e.g. bridges, effect on condition of infrastructure.)	Is anyone better off? Is anything improved?, Customer result or outcome, Effectiveness measure	
9. A visual display of the history and forecast(s) for a measure.	Baseline, Trendline	
10. Doing better than the forecast part of the baseline.	Turning the curve, Beating the baseline	
B. OTHER IMPORTANT IDEAS		
1. A picture of a desired future that is hard but possible to attain.	Vision, Desired future	
2. The purpose of an organization.	Mission, Purpose	
3. A person (organization or entity) who directly benefits from service delivery. (generic category)	Customer, Client, Consumer, Beneficiary, Service user	
4. A person (or organization) with a significant interest in the performance of a program, agency or service system or population quality of life effort.	Stakeholder, Constituent	
5. A person (or organization) with a role to play in achieving desired ends.	Partner (Current/Potential, Active/Inactive)	
6. An analysis of causes and conditions that helps explain why a baseline looks the way it does.	Story behind the baseline	
7. Possible actions that could have a positive effect on a population indicator or performance measure.	What works, Options	
8. A coherent set of actions that has a reasoned chance of producing a desired effect.	Strategy	
9. A description of proposed actions.	Action Plan, Strategic plan	
10. The components of an action or strategic plan.	Goals & Objectives, Planned actions	
11. A description of why we think an action or set of actions will work.	Theory of change (Logic model)	
12. A prioritized list of where we need new or better data.	Data Development Agenda	
13. A prioritized list of where we need new information/research about causes and solutions.	Information & Research Agenda	
14. A desired future level of achievement for a population indicator or performance measure.	Target, Goal, Standard, Benchmark	
15. A study or analysis of how well a program is working or has worked.	Program evaluation, Performance evaluation	

(Other modifiers: measurable, urgent, priority, targeted, incremental, systemic, core, quantitative, qualitative, intermediate, ultimate short-term, mid-term, long-term, internal, external, infernal, eternal, allegorical, extraterrestrial) **FPSI Draft revised Nov 2013**
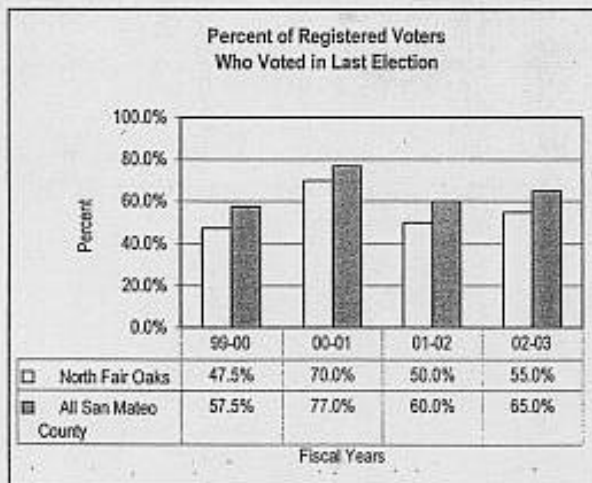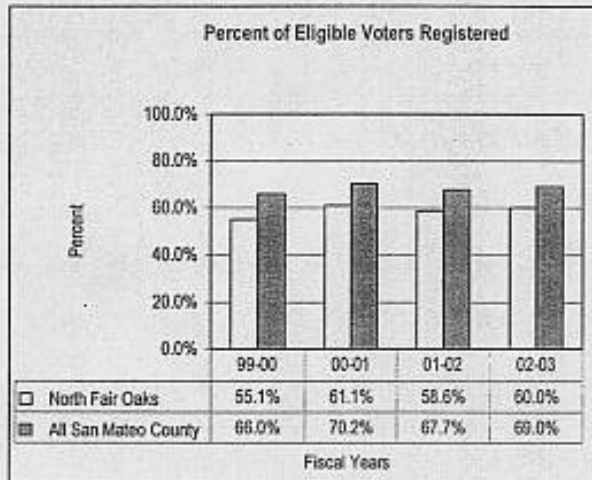
Elections Program (1330P)

Program Outcome Statement

The Elections Division promotes civic involvement in the election process by registering eligible voters and conducting honest and accurate elections on behalf of the citizens of San Mateo County.

Headline Measures

Percent of Eligible Voters Registered

Fiscal Years	99-00	00-01	01-02	02-03
North Fair Oaks	55.1%	61.1%	58.6%	60.0%
All San Mateo County	66.0%	70.2%	67.7%	69.0%

Percent of Registered Voters Who Voted in Last Election

Fiscal Years	99-00	00-01	01-02	02-03
North Fair Oaks	47.5%	70.0%	50.0%	55.0%
All San Mateo County	57.5%	77.0%	60.0%	65.0%

Story Behind Baseline Performance

During FY1999-2000, Elections staff conducted the following purges of the voter file: SB 1313 purge (which requires the review and cleanup of voter files to ensure all information is current), targeting voters who had not voted in four years, and also Change of Address purge using post office data. More than 30,000 voters were removed from active voter file as a result of these efforts. There was a larger increase in voter registrations in February 2000, in anticipation of the March 2000 Presidential Primary Election. In addition, there was an increase in voter turnout during the November 2000 Presidential General Election. As anticipated, more people register and vote during a Presidential Primary and General Election. Voter registration and turnout is anticipated to drop off in FY 2001-02. However, voter registration and turnout will increase slightly in FY 2002-03 due to the November Gubernatorial Election.

There will be ongoing voter registration occurring via Department of Motor Vehicles registrations, political party activity in the County and via the 210 affidavit sites, including four in the North Fair Oaks Area, administered by the League of Women Voters.

What Will Be Done to Improve Performance in the Next Two Years

The Elections Office will meet performance targets by doing the following:

Continue Community Outreach and Education to Increase Voter Registration and Turnout
- Partner with League of Women Voters, community organizations, county agencies, political parties and other resources
- Develop a plan to coordinate the voter registration activities of the political organizations
- Partner with "Frontiers in Leadership" to engage in voter registration and voter turnout efforts
- Attend festivals and major community events to register people
- Conduct voter registration and voting classes in the community at key locations, including the community center and local schools

Performance Measures Summary Table

Performance Measures	FY 98-99 Actual	FY 99-2000 Actual	FY 2000-01 Estimate	FY 2001-02 Target	FY 2002-03 Target
What/How Much We Do					
Number of new voters registered:					
- North Fair Oaks	402	443	600	400	450
- All San Mateo County	22,404	24,482	25,000	20,000	25,000
How Well We Do It					
Percent of eligible voters registered to vote:					
- North Fair Oaks	57.5%	55.1%	61.1%	58.6%	60.0%
- All San Mateo County	70.1%	66.0%	70.2%	67.7%	69.0%
Is Anyone Better Off?					
Number of registered voters who voted in last election:					
- North Fair Oaks	1,723	2,198	3,539	2,640	2,772
- All San Mateo County	150,967	181,190	261,297	207,268	217,631
Percent of registered voters who voted in last election:					
- North Fair Oaks	36.3%	47.5%	70.0%	50.0%	55.0%
- All San Mateo County	44.8%	57.5%	77.0%	60.0%	65.0%

Source: County of San Mateo: Recommended Budget FY 2001-2002 FY 2002-2003

RBA Implementation Self Assessment
for Government and Nonprofit Organizations

1. Language Discipline (10)

    a. Has your group or organization adopted a common language using the Tool for Choosing a Common Language or some other method? Does this common language allow you to clearly distinguish population and performance accountability? (7)

    b. Can you crosswalk your language usage to that of your funders and other partners? (3)

2. Population Accountability (30)

    a. Has your organization identified one or more population level results or conditions of well-being stated in plain language to which your work contributes? (5)

    b. Have you identified the 3 to 5 most important indicators for each of these results? (5)

    c. Have you created a baseline with history and a forecast for each of these measures? (5)

    d. Have you analyzed the story behind these baselines? (5)

    e. Do you have a written analysis of what it would take to turn these conditions around at the national, state, county, city or community level? (5)

    f. Have you articulated the role your organization plays in such a strategy? (5)

3. Performance Accountability (45)

    a. Has your organization established the 3 to 5 most important performance measures for what you do, using the performance accountability categories *How much did we do? How well did we do it? Is anyone better off?* (5)

    b. Have you created a baseline with history and a forecast for each of these measures? (5)

    c. Do you track these measures on a daily, weekly, monthly or quarterly basis? (10)

    d. Do you periodically review how you are doing on these measures and develop action plans to do better using the performance accountability 7 questions? (10)

    e. Have you adapted your management, budget, strategic planning, grant application, and progress reporting forms and formats to reflect systematic thinking about your contribution to population conditions and your organization's performance? (5)

    f. Are the population and performance baseline curves you are trying to turn displayed prominently as one or more charts on the wall? (5)

    g. Have you identified an in-house expert to train and coach other staff in this work? (5)

4. Bottom line Quality of Service (15)

    a. Considering case mix difficulty, are you doing well or poorly on the most important *Is Anyone Better off?* measures compared to others? (Others = comparable providers, industry benchmarks, or reasonable targets or standards) (5)

    b. How are you doing on the most important *How well did we do it?* measures compared to others? (Others = comparable providers, industry benchmarks, or reasonable targets or standards) (5)

    c. Have you turned any curves? (5)

5. Bonuses and Penalties (-20 to +10)

    a. Research and Evaluation Bonus: Do you have (recent i.e. less than 3 to 5 yrs. old) research or evaluation evidence that shows your services cause improvement in customers' lives as shown by *Is Anyone Better off?* measures? Yes = plus 10 No = 0

    b. Skimming Penalty: Is there any evidence that you are skimming easy customers in order to increase success rates on *Is Anyone Better off?* measures? Yes = minus 10 No = 0

    c. Unit Cost Penalty: Given the intensity of your services are your unit costs per customer in line with other providers in the field? Yes = 0 No = minus 10