ACL FFY 2022 Evaluation Plan

This document summarizes the evaluations ACL plans to undertake to address its priority questions and to meet statutory requirements. ACL reserves the right to adjust this plan pending changes in agency priorities and funding availability.

Priority Question: What is the efficacy and effectiveness of ACL programs and initiatives? How does ACL prepare its staff to better support the aging and disability networks?

Background and Significance: Authorizing Legislation: Section 361 of the Older Americans Act (OAA) of 1965, as amended states that “SEC. 361. (a) The Assistant Secretary shall carry out a program for making grants to States under State plans approved under section 307 to provide evidence-based disease prevention and health promotion services and information at multipurpose senior centers, at congregate meal sites, through home delivered meals programs, or at other appropriate sites. In carrying out such program, the Assistant Secretary shall consult with the Directors of the Centers for Disease Control and Prevention and the National Institute on Aging. (b) The Assistant Secretary shall, to the extent possible, assure that services provided by other community organizations and agencies are used to carry out the provisions of this part.”

Programs, Policies, Regulations, or Operations to be Analyzed or Evaluated: The FY 2012 Congressional appropriations law included, for the first time, an evidence-based requirement related to Title III-D funds and specifying:

Evidence-based health promotion programs, as defined in the Older Americans Act (Title I section 102 (14)(D)) includes programs related to the prevention and mitigation of the effects of chronic disease (including osteoporosis, hypertension, obesity, diabetes, and cardiovascular disease), alcohol and substance abuse reduction, smoking cessation, weight loss and control, stress management, falls prevention, physical activity, and improved nutrition.

In response to the 2012 requirement, ACL developed an evidence-based definition to assist states in developing their own Title III-D guidance. Specifically, to be considered an evidence-based program, a program must:

- Have demonstrated through evaluation to be effective for improving the health and well-being or reducing disease, disability and/or injury among older adults;
- Be proven effective with older adult population, using Experimental or Quasi-Experimental Design;
- Have research results published in a peer-review journal;
- Be fully translated in one or more community site(s); and
- Include developed dissemination products that are available to the public.
**Stakeholders:** This work was informed by consultation with ACL stakeholders and requirements under the Older Americans Act. Stakeholders are ACL staff, grantees and subgrantees, older adults and their families and caregivers, and other members of the aging network.

**Data Sources:** Primary and secondary data from ACL-funded evidence-based programs around questions such as:

1. How do sites select appropriate evidence-based programs for their contexts (e.g., resources, populations)?
2. To what extent do staff overseeing and implementing the programs fully understand and comply with the implementation guidelines/instructions? For example,
   a. Are facilitators trained in accordance with the guidelines of the relevant evidence-based program(s)?
   b. Are program resources in line with the guidelines of the relevant evidence-based program(s)?
   c. Are programs being implemented with the intended populations?
   d. Is the amount of training and frequency sufficient?
   e. Is the content provided completely and properly per the guidelines of the relevant evidence-based program(s)?
3. While not recommended, what kinds of adaptations, if any, are grantees/subgrantees making to the evidence-based programs? And, why?
4. What can ACL do to support and encourage the proper use and implementation of evidence-based programs?

**Methods:** ACL expects to use secondary data to review and conduct primary data collection and analysis as part of this fidelity evaluation.

**Anticipated Challenges and Mitigation Strategies:** Potential challenges in conducting this work may be access to secondary data, and sampling from existing evidence-based programs funded under the Older Americans Act. To mitigate this, ACL's Office of Performance and Evaluation will work closely with program staff and the ACL funded resource center.

**Plan for Disseminating Results:** The final deliverable for this contract is a report documenting the information collected and providing clear, actionable recommendations for ensuring the effective use of evidence-based programming. Recommendations will address what ACL and its grantees and sub-grantees can do to improve the selection, implementation, and monitoring of evidence-based programming. The report will also include tool(s) for use by ACL and its OAA state grantees to assess fidelity after this contract ends. This report will be shared publicly on ACL’s website and information will be distributed to key stakeholders, including grantees. Further, this project will create job aids and other technical assistance materials, and briefings and webinars on the findings will also be presented for a variety of stakeholders, both internal and external to the agency.
**Priority Question:** What are the knowledge gaps between ACL, research, and stakeholders? How can ACL close the knowledge gaps? Sub-question: Which ACL evidence-informed services and programs are addressing social determinants of health (SDOH) or social needs and how they are doing this?

**Background and Significance:** ACL wants a review of how the various OAA-funded programs are addressing SDOH (keeping in mind areas where aging and disability crosscut). The first step of this work will be theoretical, but the next piece of this work should choose a sample of the programs to understand where ACL is intersecting with the social determinants of health (SDOH) and the effect of ACL programming on the social determinants of health.

Questions of interest are related to how to best measure effects of ACL services and programs on SDOH, if dosage makes a difference, and other underlying factors that support ACL programs addressing SDOH in positive ways.

**Programs, Policies, Regulations, or Operations to be Analyzed:** This evaluation is focused on how services ACL funds under the Older Americans Act specifically address the social determinants of health and social needs, how we might measure the agency’s impact in these areas, and these issues might be addressed across the board through ACL’s programs and grants.

**Stakeholders:** The learning agenda development process informed this work. This work would initially be internal to ACL in terms of working with administrative data at the ACL level and working with ACL staff to understand programming aims. In an anticipated follow on, ACL would conduct a deeper evaluative dive into how the ACL-funded network is working to address SDOH and how this might best be measured.

**Data Sources:** The initial work will start with a 24 month base year contract to conduct a literature review on social determinants and social needs; review ACL materials related to grants crosscutting SDOH and social needs issues; and map out ACL programs intersecting these areas. The subject matter expert interviews will be used to help develop an approach for ACL to measure our impact on the SDOH and social needs over time.

**Methods:** Literature reviews, key informant interviews, focus groups.

**Anticipated Challenges and Mitigation Strategies:** Anticipated challenges are the complexity of mapping out the sheer number of grant programs given some of the agency silos. Other possible challenges might be where the program is addressing SDOH or social needs, but not collecting administrative data around these areas, making it harder to determine what impacts these grants may have on the areas of interest. ACL will mitigate these challenges through stakeholder involvement.

**Plan for Disseminating Results:** Dissemination of this work will be through the white paper making a recommended approach to ACL on how to better capture information in order to measure the agency’s effect on SDOH and social needs, as well as briefs, blog posts, and possible presentations. All reports will be made available on ACL’s website.
**Priority Question**: What is the efficacy and effectiveness of ACL programs and initiatives? What are states funded by ACL doing to enhance and promote aging and disability services and programs? What are the current avenues for collaboration and coordination between the aging and disability networks that ACL works with? How can ACL encourage better collaboration and coordination? What new research and information are being generated, by both ACL and in the field, on aging and disability? How is ACL implementing it, and how can ACL better implement it?

**Background and Significance**: The Older Americans Act (OAA) was passed in 1965 with the goal of supporting older Americans and helping them to live at home and in their communities independently and with dignity for as long as possible. The OAA supports many programs and services, which as congregate and home-delivered meals, in-home care, adult day care, caregiver support, elder abuse prevention, health and wellness programs, transportation, and information and referral. These services are provided through the national Aging Network, which is comprised of 56 State Units on Aging (SUA), 622 Area Agencies on Aging (AAA), and more than 260 Title VI Native American aging programs. Additionally, thousands of community organizations and volunteers support the aging network.

While the Aging Network is extensive, its processes and operations are not fully understood. Basing policy and justifying expenditures on evidence is increasingly a priority in the federal government. However, without a thorough understanding of the Aging Network, it is not feasible to accurately plan to measure the return on the investment of the funds distributed through the network. Yet, the increasing demands require rigorous and independent assessment of progress, efficiency and effectiveness to ensure the most productive use of government funds for the best consumer outcomes.

**Programs, Policies, Regulations, or Operations to be Analyzed**: Through program evaluation contracts of Older Americans Act (OAA) programs, ACL seeks increased understanding of how these programs are structured at the State and local levels and their progress towards their goals and mission. The information will also aid in program refinement and continuous improvement. The more productive ACL’s programs, the greater the number of older adults will have access to a higher quality of life.

**Stakeholders**: This work was informed by the needs of aging network stakeholders to demonstrate the networks’ value to older adults, funders, and policy makers. The purpose of this evaluation is to contract for a comprehensive process evaluation of the Aging Network engaging all levels (Federal, state, and local) to answer the following questions:

1. How is the Aging Network structured and how does it operate at the local, state, and federal levels including who the program serves, how it is staffed, and what data are collected about activities and outcomes?

2. How does the Aging Network use resources to measure and improve the quality of services available/provided? What is the role of the Network in identifying and responding to emerging needs?
3. How do the various levels of the Aging Network work together, with whom do they partner, and how do they work with those programs? For example, do they partner only with organizations considered to be part of the Aging Network, or outside organizations as well?

4. How does the Aging Network measure successful practices and areas for improvement?

**Data Sources:** Data collection should include gathering information from:

1. Federal staff and national associations about their understanding of and role in the Aging Network, interaction with other parts of the Aging Network, inter-organizational relationships, and use/collection of program data.

2. State Units on Aging about their understanding of and role in the Aging Network, interaction with other parts of the Aging Network, inter-organizational relationships, state mandates, main activities, funding sources, feedback to and monitoring of local programs, and use/collection of program data. It should also include a discussion of unique features of local programs/structures, specifically interactions with AAAs and Native American aging programs as well as federal entities.

3. Area Agencies on Aging about their understanding of and role in the Aging Network, interaction with other parts of the Aging Network, inter-organizational relationships, state mandates, main activities, funding sources, feedback to and monitoring of local programs, and use/collection of program data. It should also include a discussion of unique features of local programs/structures, specifically interactions with SUAs, Native American aging programs, and federal entities.

4. Native American aging programs about their understanding of and role in the Aging Network, interaction with other parts of the Aging Network, inter-organizational relationships, Tribal mandates, main activities, funding sources, feedback to and monitoring of local programs, and use/collection of program data. It should also include a discussion of unique features of local programs, specifically interactions with SUAs, AAAs, and federal entities.

5. Other entities identified through the literature review and the other data collection efforts as important parts of the Aging Network.

**Methods:** Data collection methods may include literature reviews, questionnaires, stakeholder interviews, site visits, and/or focus groups.

**Anticipated Challenges and Mitigation Strategies:** Possible challenges in this work will be around scope of the evaluation and choosing a purposeful sample as the aging network is vast. Other challenges may lie with access to and availability of administrative data that
allow ACL to determine measures for examining return on investment. The information collected through this contract is intended to lay a foundation for a possible future outcome evaluation and/or cost study. ACL will mitigate these challenges through contracting with an outside organization with a proven track record with similar work.

**Plan for Disseminating Results:** Findings from the Return on Investment study will be published on ACL’s website and information may be shared with key stakeholders in the form of public presentations. In particular, ACL is looking to produce a suite of highly visual products to be shared widely with stakeholders to better illustrate the composition of the aging network and how it works.
**Priority Question**: To what extent are NIDILRR’s grantees generating new knowledge and products (outputs and short-term outcomes)?

**Background and Significance**: This question is directly related to the first part of NIDILRR’s core mission—the generation of new knowledge and products. This mission-critical function is integrated into our agency logic model, operations, and systems. All of our agency components work together to support the fulfillment of this mission-critical function.

**Programs, Policies, Regulations, or Operations to be Analyzed or Evaluated**: The proposed analysis or evaluation will focus on grantees who have been funded by one of our program mechanisms. NIDILRR-funded programs are authorized to operate under 45 CFR Part 1330.

**Stakeholders**: NIDILRR management and NIDILRR Project Officers employ a variety of methods (e.g., teleconferences, email, webinars via WebEx, etc.) to communicate with researchers and members of other stakeholder groups within our NIDILRR grantee community. Our stakeholders have consistently re-affirmed the importance of generating new knowledge that is relevant to the problems and challenges that people with disabilities face.

**Data Sources**: The data sources for addressing this question are: (1) NIDILRR's online Annual Reporting System (APR); and (2) citation analyses of grantee-produced publications.

**Methods**: For the APR data source, methods include but are not limited to: (1) data mining and data extraction techniques, i.e., select queries, conditional queries, parameter queries; use of regular expressions, etc.; (2) data analysis techniques that are appropriate to the type of data being examined, i.e., descriptive and inferential statistics; content analysis; and (3) data visualization, i.e., infographics, graphs, etc. For the citation analyses, the results are analyzed using various bibliometric methods which include but are not limited to counts of citations; frequency distributions of citations and calculation of the journal impact factor.

**Anticipated Challenges and Mitigation Strategies**: To mitigate challenges of missing data or incomplete data, through the online data submission system NIDILRR Project Officers have the ability to send comments to grantees about the data they have entered in response to particular questions. Grantees and can make the requested changes within the system. NIDILRR also runs various quality checks on the data that are already in the system. These checks identify and remediate missing data, duplicate records, and broken hyperlinks.

**Plan for Disseminating Results**: Possible uses of the results include but are not limited to: informing and improving agency policy formulation and decision-making; informing and improving the quality of agency Funding Opportunity Announcements; informing and improving the design and delivery of agency service-delivery programs; and informing and
improving the ability of persons with disabilities and their families to make better self-directed choices and decisions.
**Priority Question**: To what extent are NIDILRR-generated knowledge and products being used to shape policy and practices that are important in the lives of people with disabilities?

**Background and Significance**: This question is directly related to the second part of NIDILRR’s core mission—the promotion of the use and adoption of the new knowledge and products. This mission-critical function is integrated into our agency logic model, operations, and systems. All of our agency components work together to support the fulfillment of this mission-critical function. Without evidence of use and adoption of new knowledge and products, changes in policy and practice that will benefit the lives of persons with disabilities cannot happen.

**Programs, Policies, Regulations, or Operations to be Analyzed or Evaluated**: The proposed analysis or evaluation will focus on grantees who have been funded by one of our program mechanisms. NDILRR-funded programs are authorized to operate under 45 CFR Part 1330.

**Stakeholders**: NIDILRR management and NIDILRR Project Officers employ a variety of methods (e.g., teleconferences, email, webinars via WebEx, etc.) to communicate with researchers and members of other stakeholder groups within our NIDILRR grantee community. Our stakeholders have consistently re-affirmed the importance of promoting the use and adoption of new disability knowledge and products. It is only through the processes of use and adoption of these outputs that changes in policy and practice can occur.

**Data Sources**: The data source for this question is the use and adoption module of NIDILRR’s online Annual Reporting System (APR) that our grantees complete. This module contains questions that track the use and adoption of new knowledge and products by our various stakeholder groups.

**Methods**: For the use and adoption module of the APR data source, methods employed include but are not limited to: (1) data mining and data extraction techniques, i.e., select queries, conditional queries, parameter queries; use of regular expressions, etc.; (2) data analysis techniques that are appropriate to the type of data being examined, i.e., descriptive and inferential statistics; content analysis, etc.; and (3) data visualization, i.e., infographics, graphs, etc.

**Anticipated Challenges and Mitigation Strategies**: To mitigate challenges of missing data or incomplete data, through the online data submission system NIDILRR ProjectOfficers have the ability to send comments to grantees about the data they have entered in response to particular questions. Grantees can make the requested changes within the system. NIDILRR also runs various quality checks on the data that are already in the system. These checks identify and remediate missing data, duplicate records, and broken hyperlinks.
Plan for Disseminating Results: Possible uses of the results include but are not limited to: informing and improving agency policy formulation and decision-making; informing and improving the quality of agency Funding Opportunity Announcements; informing and improving the design and delivery of agency service-delivery programs; and informing and improving the ability of persons with disabilities and their families to make better self-directed choices and decisions.