

ATTACHMENT IV: Description of Program Evaluation Management System (PEMS)

Program Evaluation and Monitoring System (PEMS)

The Centers for Disease Control and Prevention (CDC) requires HIV prevention grantees to demonstrate that the programs they support and implement are capable of meeting their stated goals. Executive directors, program managers, and representatives from local and state funding agencies need data to monitor and assess program effects, support program improvement, identify technical assistance needs, and demonstrate prudent stewardship of funds. With the increased emphasis on accountability, program improvement, and the availability of evidence-based interventions, it is critical that a system be in place to monitor the implementation of scientifically sound approaches to prevention and their effectiveness in community settings.

To facilitate the monitoring of HIV prevention programs, the CDC developed the Program Evaluation and Monitoring System (PEMS). PEMS is a national data reporting system comprised of a standardized set of HIV prevention data variables, secure web-based software for data entry and management, and a range of data collection training and software implementation support services. Collection and reporting of the PEMS data set is required by health departments and community based organizations (CBOs) funded through CDC HIV prevention cooperative agreements. PEMS data variables include agency information, program plan information, client-level demographics, behavioral characteristics, and service utilization. Collection of these variables will allow for more detailed and comprehensive reporting of HIV prevention activities including community planning information, fiscal information, and data required for calculating the program performance indicators.

PEMS data will enable HIV prevention stakeholders at all levels to examine program fidelity and to monitor key program health service utilization and behavioral outcomes. In addition, PEMS will enable CDC to identify best practices and assist grantees in redesigning interventions to accomplish stated goals such as the reduction of high-risk behaviors in targeted populations. Finally, the PEMS data can be used to compliment other data collection systems such as behavioral surveillance, HIV/AIDS surveillance, and special studies projects to better monitor prevention efforts and the epidemic from the local and national perspective.