



Strengthening STD Prevention and Control for Health Departments

Technical Assistance Note #17a | Data-driven reviews

From Strategy Area V: Analyze and Use Data for Program Improvement

- 17a. Conduct data-driven planning, analysis, monitoring, and evaluation for program improvement
- Routinely analyze, synthesize, and interpret surveillance, epidemiologic, program, and other data to strengthen the program's understanding of local STD epidemiology and program context. Evaluate progress, using scientific methods, program data, performance data, and cost data, and adjust program plans accordingly
 - Use findings from those analyses to identify the program's STD prevention and control priorities, populations, and geographic areas, to develop program plans and to allocate staffing and other resources accordingly

Why DSTDP included these strategies

Public health programs must be data-driven to the extent possible. In the area of STDs, like many others, the resources are too scarce, and the needs too great, to make decisions about program allocation based on old, low quality, or scant information. STD programs operate under greatly varying epidemiologic and programmatic contexts, so program-specific information is essential to decision-making. Program and epidemiologic contexts also can change rapidly. Therefore, STD managers must revisit their decisions about program allocation and priorities on a regular basis. STD program staff have a responsibility to institute regular, comprehensive reviews of pressing issues, using available data. The purpose is to identify whether, where, and how to change their program to be more effective and efficient. This strategy supports a culture of improvement, to which all STD programs and DSTDP should aspire.

Key definitions

A **data-driven review** is a meeting where leaders review program and performance data to understand the drivers of performance on high priority topics, share challenges and successes, and identify where action is needed. Leaders make evidence-based decisions using the program data and information reviewed at these meetings. These meetings are at the heart of data-driven planning and monitoring for program improvement.

To engage in data-driven reviews, the following needs to be in place: 1) programs have identified their strategic priorities, 2) there is authentic leadership support to engage in the process; and 3) programs have the capacity to gather and synthesize data related to those priorities. The U.S. Government Accountability Office (GAO) outlines several factors that make Data-driven Reviews successful:

Key leader attendance to facilitate problem solving and hold managers accountable

Capacity to collect accurate, useful, and timely data

Rigorous preparation and sustained follow-up on identified issues

Questions asked at a data-driven review meeting and throughout a data-driven planning process may include:

- **Performance Measure Status:** Where are we on this issue? Are we currently on track to meet our targets? If off track, is this currently of concern? Why or why not?
- **Data Needs and Gaps:** Do we currently have all of the information we need to truly understand progress? What additional information do we need to know to understand a measure's or program's status?
- **Driving Factors of the Measures:** Are data trends reflecting actual performance issues or measurement issues? What are the biggest factors/contributors to whether or not we will meet our goals? What are the risks?
- **Program Performance:** What are we doing to influence this measure? Do program data reflect the progress we see in this performance measure?
- **Solution Development:** What strategies have we employed to strengthen this measure's progress so far? Based on what the measures are telling us, what new actions/strategies can we use to help improve this measure's progress?

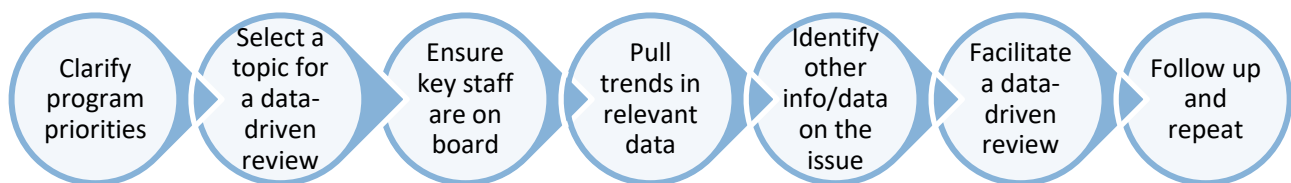
Data-driven reviews are opportunities to reflect on the forest, above the trees. Ideally, the review process should be repeated over time, on a regular schedule, with the key stakeholders returning to those high priority issues and asking those questions again, to both monitor and propel progress.

Topics for data-driven reviews can range widely but should be important and somewhat focused. They could be population-based (e.g., STDs in adolescents), geography-based (e.g., STDs in X County), STD-specific (e.g., congenital syphilis), or process-oriented (e.g., quality of STD surveillance data), among other options.

See below under Other Resources for ideas for running a Data-driven Review meeting, including whom to involve, how to prepare, how to facilitate the meeting, and how to follow up.

Considerations for implementation

Here is one way to think about the steps to data-driven reviews and planning:



Clarify program priorities and select one for a data-driven review

- Start with the program's priorities. If those are unclear, then the program may need to embark on a strategic planning process to identify those.
- Decide which priority issue to focus on for a data-driven review. Some criteria for selection may include: Which of those priorities is most pressing? Where does the program staff have the most concerns? What is changing rapidly?

Ensure key staff are on board

- Leadership and staff support is essential. Ensure they understand the expectations for participation and follow-up, how this is different from general program reviews or strategic planning.
- Ongoing education and support for a culture of improvement should help create work place conditions that make data driven reviews easier to “sell” to staff
- It is key that STD program leadership and relevant staff leads/subject matter experts allocate sustained time for this kind of review. It can be easy to postpone such reviews due to the demands of day-to-day work

Pull trends in relevant epidemiologic and performance data

- Which of the program’s current performance measures speak to the selected priority issue? CDC program outcome or performance measures may be useful for internal program monitoring, but programs should not rely exclusively on those for deciding what to track
- Hone in on the most relevant and strongest indicators to use to do the review. Strong indicators are those that can be interpreted easily, generated regularly, and relate to core aspects of the program or issue
- Limit the number of key indicators for the review process, so the work is more manageable. Having too much data or too many indicators can hinder progress and lead to data-driven review processes focusing only on wading through data, as opposed to analysis and decision-making

Identify other data and information relevant to that issue

- What other information is important to have on hand, for context or additional perspectives? Consider data and information that resides *outside* the STD program, such as those from HIV programs, health care providers, insurers, relevant programs like Title X, and behavioral surveillance surveys like Youth Risk Behavior Survey
- It is good to be proactive about this. A staff person could be assigned to routinely scan potential sources of complementary information or reports to ensure the STD program has access to new reports as soon as they become available
- To the extent possible, STD programs should also start to better integrate costs into their program reviews and evaluation work. Budgets and expenditure data should be considered relevant datasets to use in data-driven reviews.

Carefully facilitate a data-driven review

- Analyzing and synthesizing indicators and other data on the priority issue is demanding, requiring hard decisions about what is most important to present and discuss at the meeting
- Use good facilitation and meeting planning skills to help run productive, structured meetings to discuss data and their implications for the program. Selecting the right facilitator is critical to success.
- Consider using prioritization criteria and decision tools at relevant meetings, to help identify priorities or action items in a systematic and transparent way; general group discussion alone is unlikely to yield clear decisions

Follow up with accountability and repeat

- Ensure follow-up steps identified at such reviews are realistic, concrete, and given high priority. Most, if not all, follow-up steps should be actions that can be taken and reported back within weeks of a review meeting, so that progress is evident and momentum is sustained
- One-off reviews of important issues can help galvanize work around those issues, but ideally, these reviews would be repeated on the same issues, to assess progress



Evaluation and Epidemiologic Analysis are also essential tools for data-driven planning and implementation. Those respective strategies and TA Notes (#16 and the Targeted Evaluation Plan or TEP guidance) should be reviewed alongside this one, and all fall under the same Strategy Area. The findings from epidemiologic analysis and evaluation projects could be used in data-driven reviews, just as new analyses and projects could be initiated as a *result* of data-driven reviews.

Other resources

- Data-driven decision in federal government (concepts apply at various levels of decision making):
 - Government Accountability Office: https://www.gao.gov/key_issues/data-driven_decision_making/issue_summary
 - Urban Institute: <https://www.urban.org/research/publication/guide-data-driven-performance-reviews>
- Meeting facilitation tools:
 - Community Tool Box: <https://ctb.ku.edu/en/table-of-contents/leadership/group-facilitation/main>
 - Seeds for Change <https://www.seedsforchange.org.uk/facilitationmeeting>
- STD Program Evaluation Trainings and Tools: <http://www.ncsddc.org/std-pett>

For more information or feedback on this document, contact your DSTDP Prevention Specialist or email STD_PCHD@cdc.gov. CDC's Division of STD Prevention, Program Development and Quality Improvement Branch, developed this document for recipients of PS19-1901 STD PCHD to provide additional clarification of strategies outlined in that NOFO and to support program implementation. The content here does not represent additional NOFO requirements nor official CDC recommendations. Issue date: April 2019