Presenting data in health professions program evaluation: **Lessons learned**

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Guiding question

How do we effectively and efficiently present health professions program data to a variety of audiences?

Overview

- Background
- Lessons learned
- Considerations

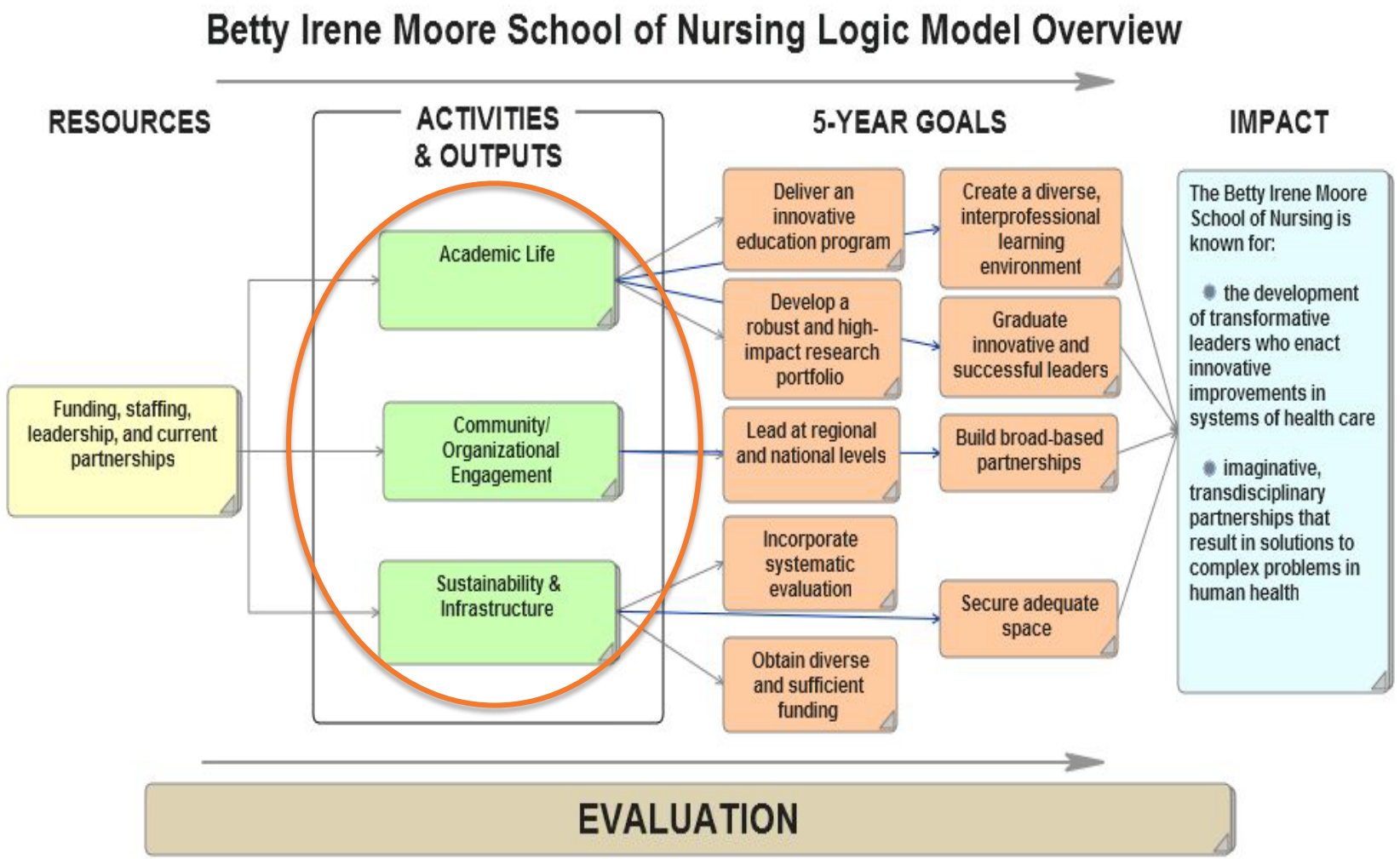
Background

- New school—evaluate from the beginning
- Collaborative relationship
- Arm's length— "critical friend"
- Not focused on curriculum or accreditation
- Reporting to private foundation

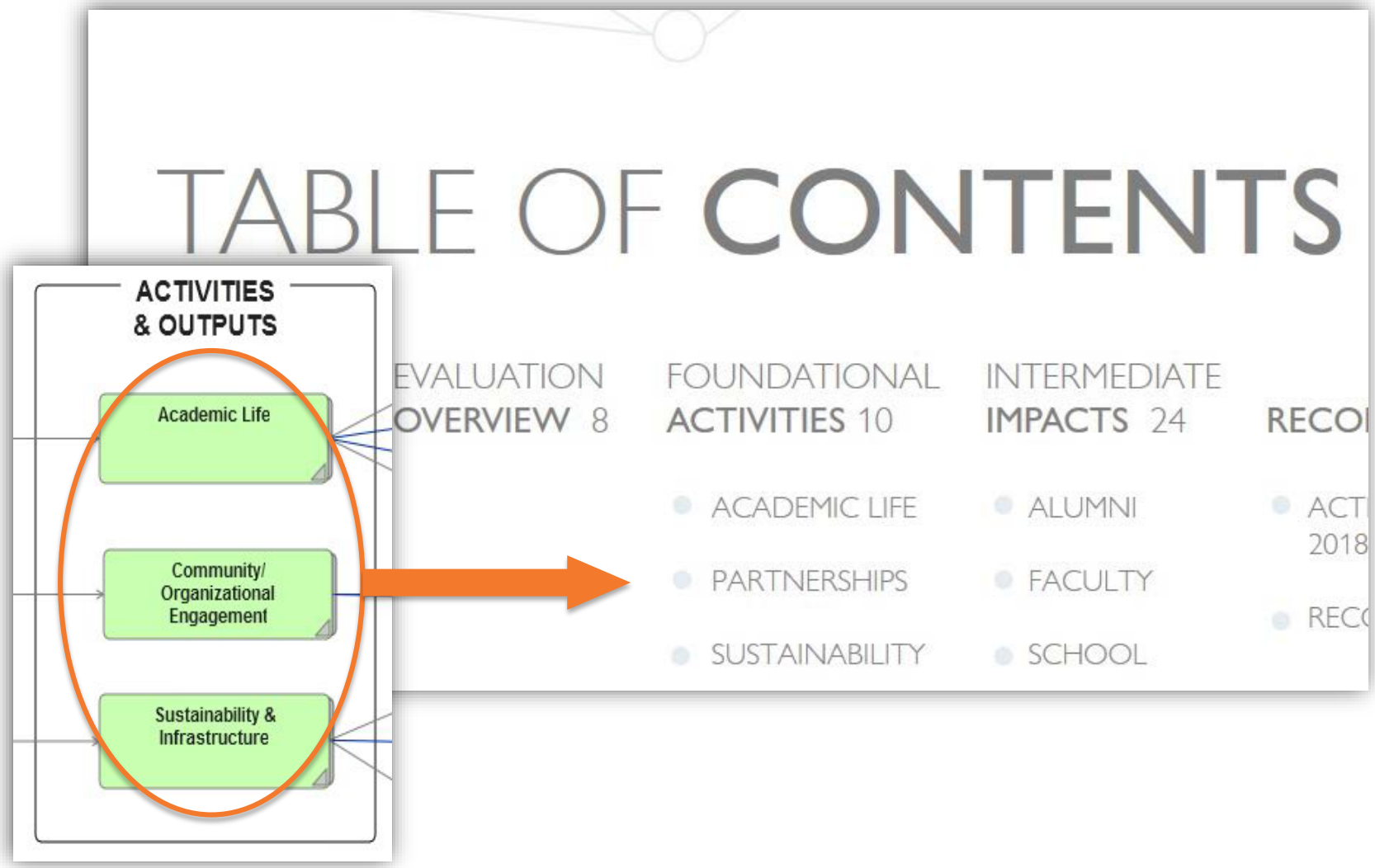
Lesson 1

Develop a “story” or framework for reporting

Lesson 1 develop a story



Lesson 1 develop a story

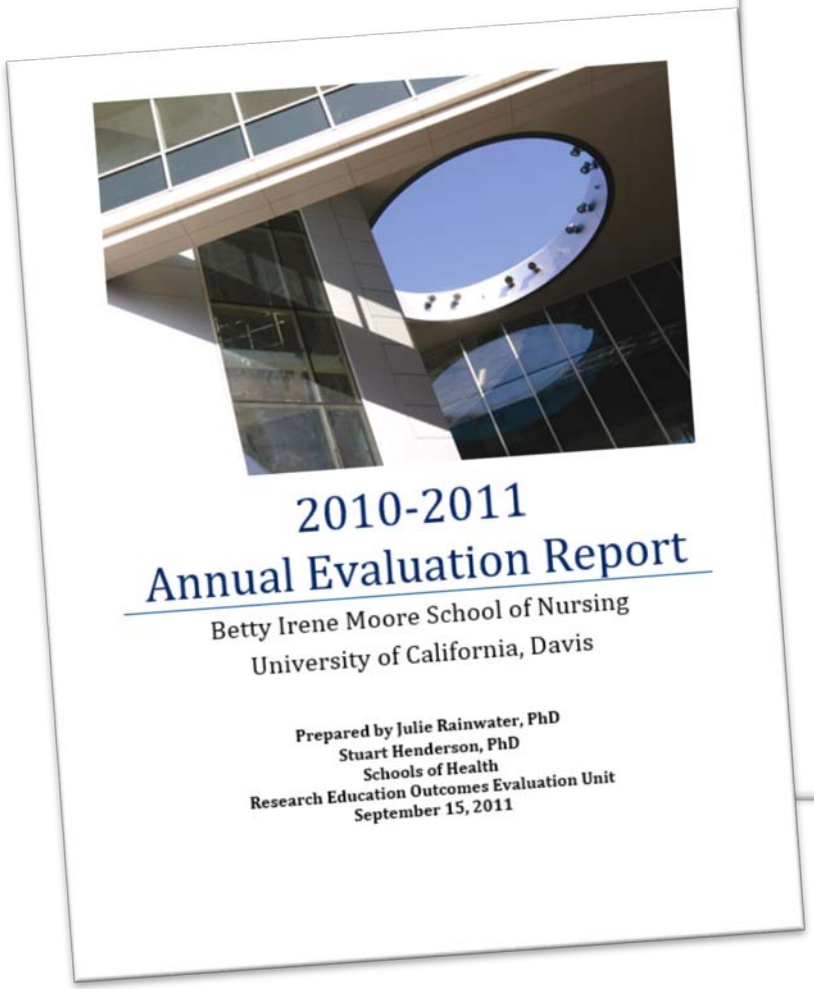


Lesson 2

Focus on usability

Lesson 2 usability

Then…



2010-2011

Annual Evaluation Report

Betty Irene Moore School of Nursing

University of California, Davis

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Schools of Health
Research Education Outcomes Evaluation Unit
September 15, 2011

Introduction

The development and implementation of the Betty Irene Moore School of Nursing at UC Davis is informed by carefully planned and ongoing evaluation for each key aspect of the school. The evaluation is overseen by the Schools of Health Research Education Outcomes Evaluation (REOE) Unit, which has a supported infrastructure and uses a broad, integrated approach for the evaluation of research and education programs in the Schools of Health.

The evaluation provides school leadership, staff and students, National Advisory Council members, and Gordon and Betty Moore Foundation officials with measurable and actionable information about the Betty Irene Moore School of Nursing, including the implementation of programs and activities, student satisfaction with courses and the program, and program outcomes and impact. In the past year, the evaluation team has worked closely with the School to specify evaluation objectives, principal measures/indicators, and data sources.

This report reviews the first year of the evaluation, highlighting the evaluation approach, methods, and findings from the 2010-2011 evaluation.

Approach

To ensure a comprehensive evaluation, the evaluation includes assessment of both processes and outcomes. *Process evaluation* is concerned with the extent to which planned activities are successfully carried out, whereas *outcomes evaluation* examines whether the expected outcomes have been achieved. The first year evaluation focused on process evaluation metrics. Process analysis includes assessing implementation, curriculum, and activities and collecting direct feedback from students, faculty and others via focus groups, interviews, and surveys. The process data provides a foundation for future outcomes-level data.

Program Theory-Driven Evaluation

For the School of Nursing evaluation, we use program theory-driven evaluation science.[1] In this approach, the theory or logic that underlies a program guides the evaluation and is used to prioritize evaluation questions. Thus, an important first step of program theory-driven evaluation is to articulate the "cause and effect" theory that supports the program model. To make the program logic transparent, we diagramed it using the widely-adopted logic model.[2]

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[1] Donaldson, Stewart I. 2007. Program Theory-Driven Evaluation Science: Strategies and Applications. Taylor & Francis: New York.

[2] W.K. Kellogg Foundation *Logic Model Development Guide: Using Logic Models to Bring Together Planning Evaluation and Action*, January 2004, www.wkkf.org; U .S. Department of Health and Human Services Centers for Disease Control and Prevention. *Evaluation Working Group*. November 2004, www.cdc.gov/eval; University of Wisconsin-Cooperative Extension - *Enhancing Program Performance with Logic Models* (2002) http://www1.uwex.edu/ces/lmcourse/.

Lesson 2 usability

Then…

Table 2. Satisfaction ratings of 2010-2011 School of Nursing cou

Course	Overall satisfaction*	# of stu
NRS 201 - Health Status and Care Systems	4.6	
NRS 202 - Implementation Science	4.7	
NRS 203 - Leadership in Health Care	4.5	
NRS 204 - Quantitative Skills for Change	4.5	
NRS 205 - Research Design in Nursing and Health Care	4.7	
NRS 206 - Community Connections	4.8	
NRS 290 - Master's Seminar	4.9	
NRS 291 - Doctoral Seminar	4.6	
NRS 299 - Nursing Science and Health-Care Leadership	5.0	

*Overall satisfaction rated on a 5-point scale, with 1="not very satisfied" to 5="ver

Table 3: Student satisfaction with their overall experience in first year of program

Response	Master's	PhD
Very dissatisfied	0% (0)	0% (0)
Somewhat dissatisfied	0% (0)	0% (0)
Neither satisfied or dissatisfied	0% (0)	0% (0)
Somewhat satisfied	0%	0%
		0%

Table 4: Student rating of how the program has met their expectations

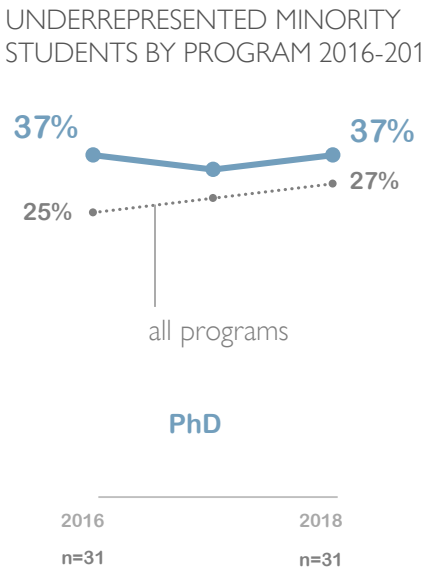
Response	Master's	PhD
Far below my expectations	0% (0)	0% (0)
Somewhat below my expectations	0% (0)	0% (0)
Equal to my expectations	0% (2)	0% (0)
Somewhat above my expectations	0% (7)	0% (2)
Far above my expectations	100% (13)	100% (6)

Lesson 2 usability

Now…

Lesson 2 usability

Now…



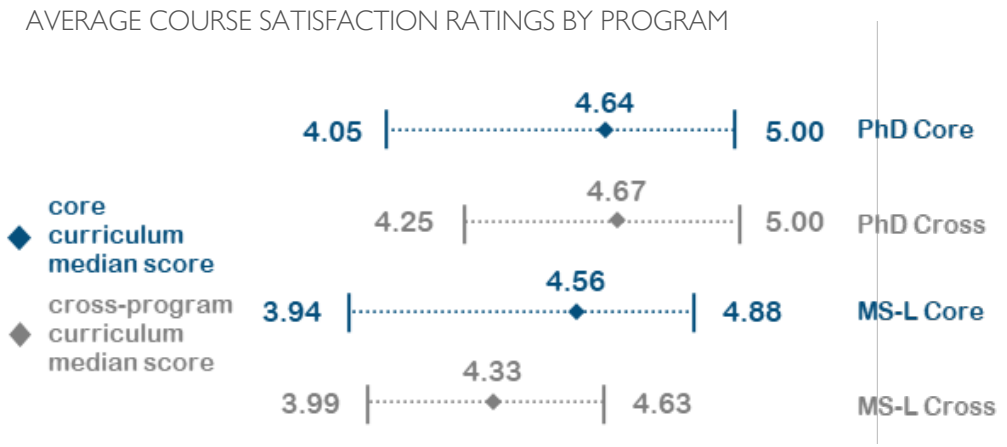
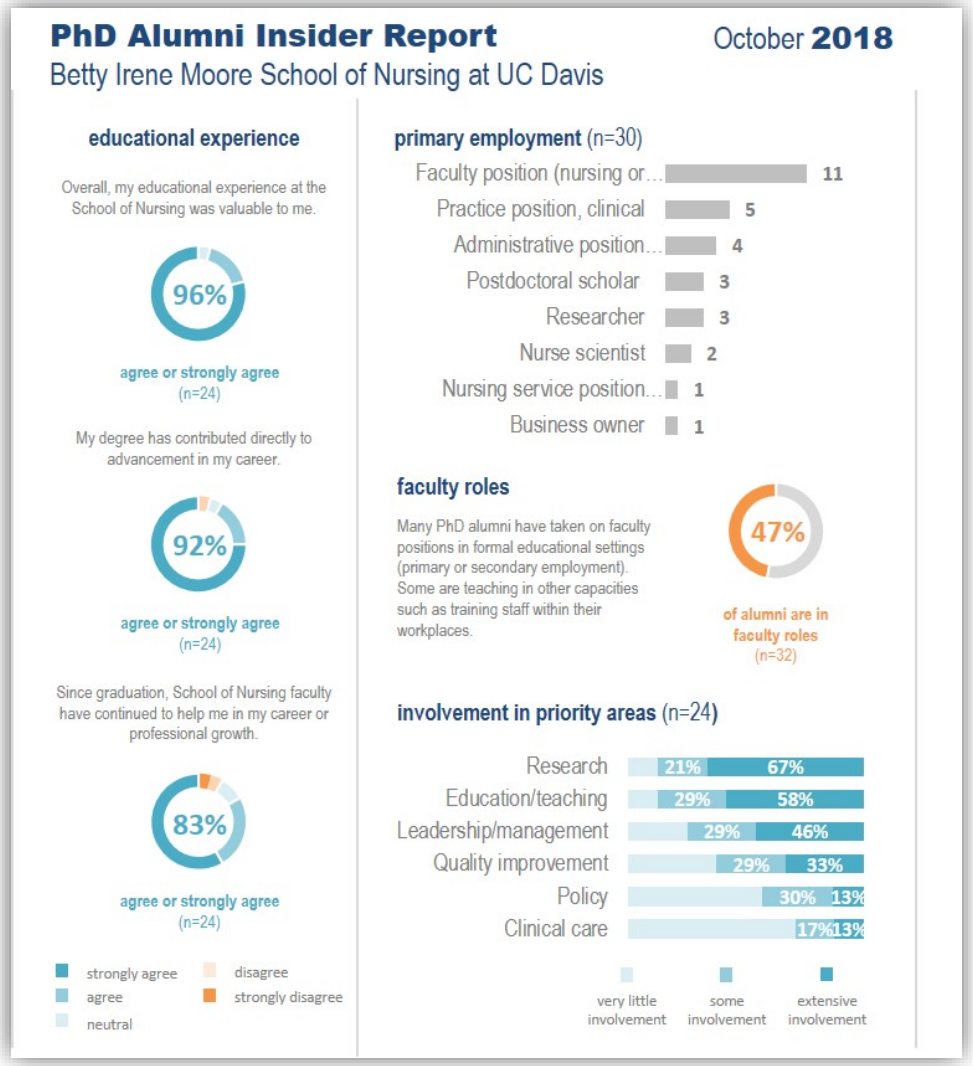


Figure 2. Average course satisfaction ratings by program. Range and median of 2018-2019 course satisfaction ratings on a 5-point scale (1=very dissatisfied; 5=very satisfied).

Lesson 2 usability



PhD Alumni Insider Report October **2018**

Betty Irene Moore School of Nursing at UC Davis

educational experience

Overall, my educational experience at the School of Nursing was valuable to me.

96%

agree or strongly agree (n=24)

My degree has contributed directly to advancement in my career.

92%

agree or strongly agree (n=24)

Since graduation, School of Nursing faculty have continued to help me in my career or professional growth.

83%

agree or strongly agree (n=24)

strongly agree, agree, neutral, disagree, strongly disagree

primary employment (n=30)

Faculty position (nursing or…	11
Practice position, clinical	5
Administrative position…	4
Postdoctoral scholar	3
Researcher	3
Nurse scientist	2
Nursing service position…	1
Business owner	1

faculty roles

Many PhD alumni have taken on faculty positions in formal educational settings (primary or secondary employment). Some are teaching in other capacities such as training staff within their workplaces.

47%

of alumni are in faculty roles (n=32)

involvement in priority areas (n=24)

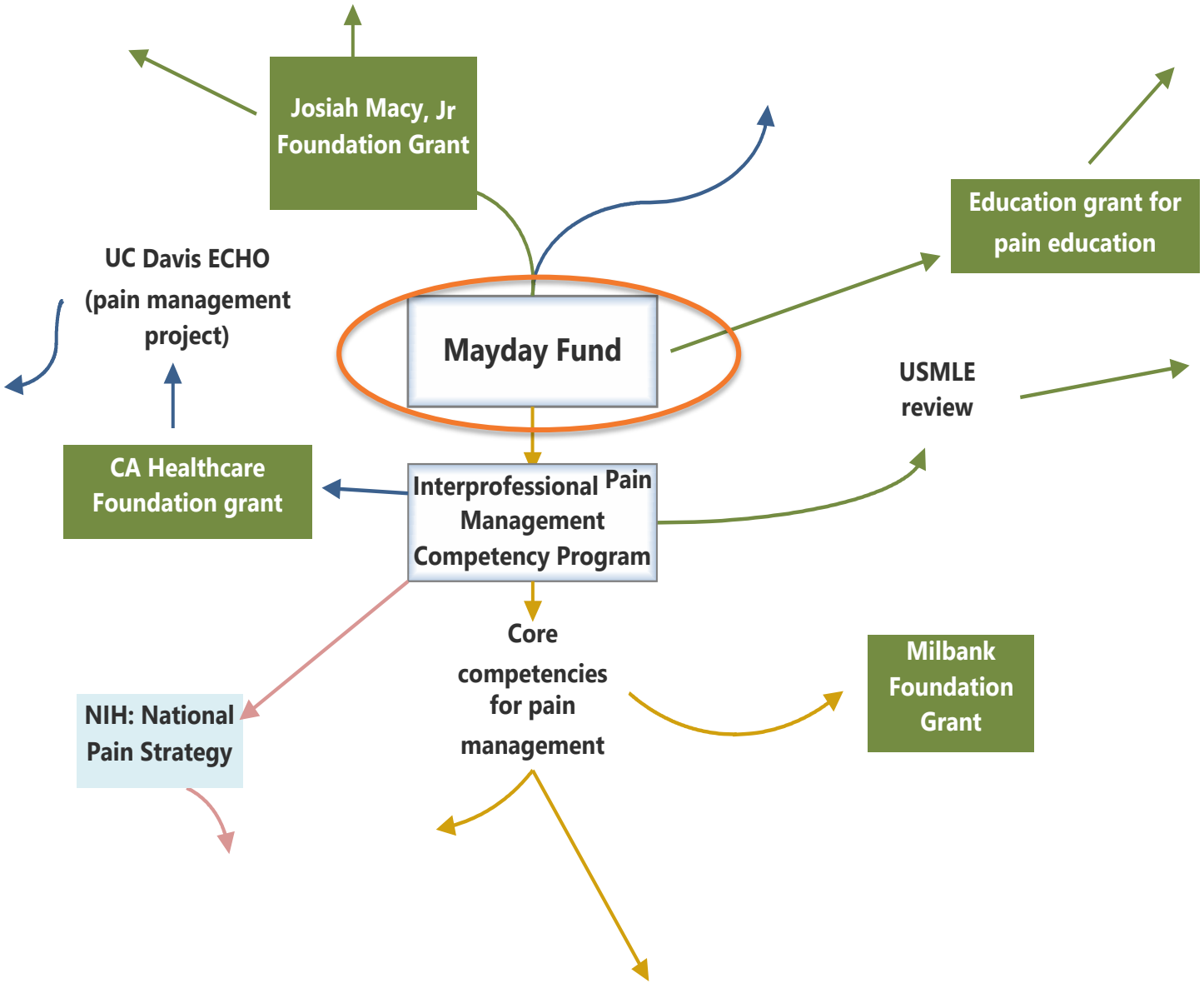
	very little involvement	some involvement	extensive involvement
Research	21%		67%
Education/teaching	29%		58%
Leadership/management		29%	46%
Quality improvement		29%	33%
Policy		30%	13%
Clinical care		17%	13%

data placemats

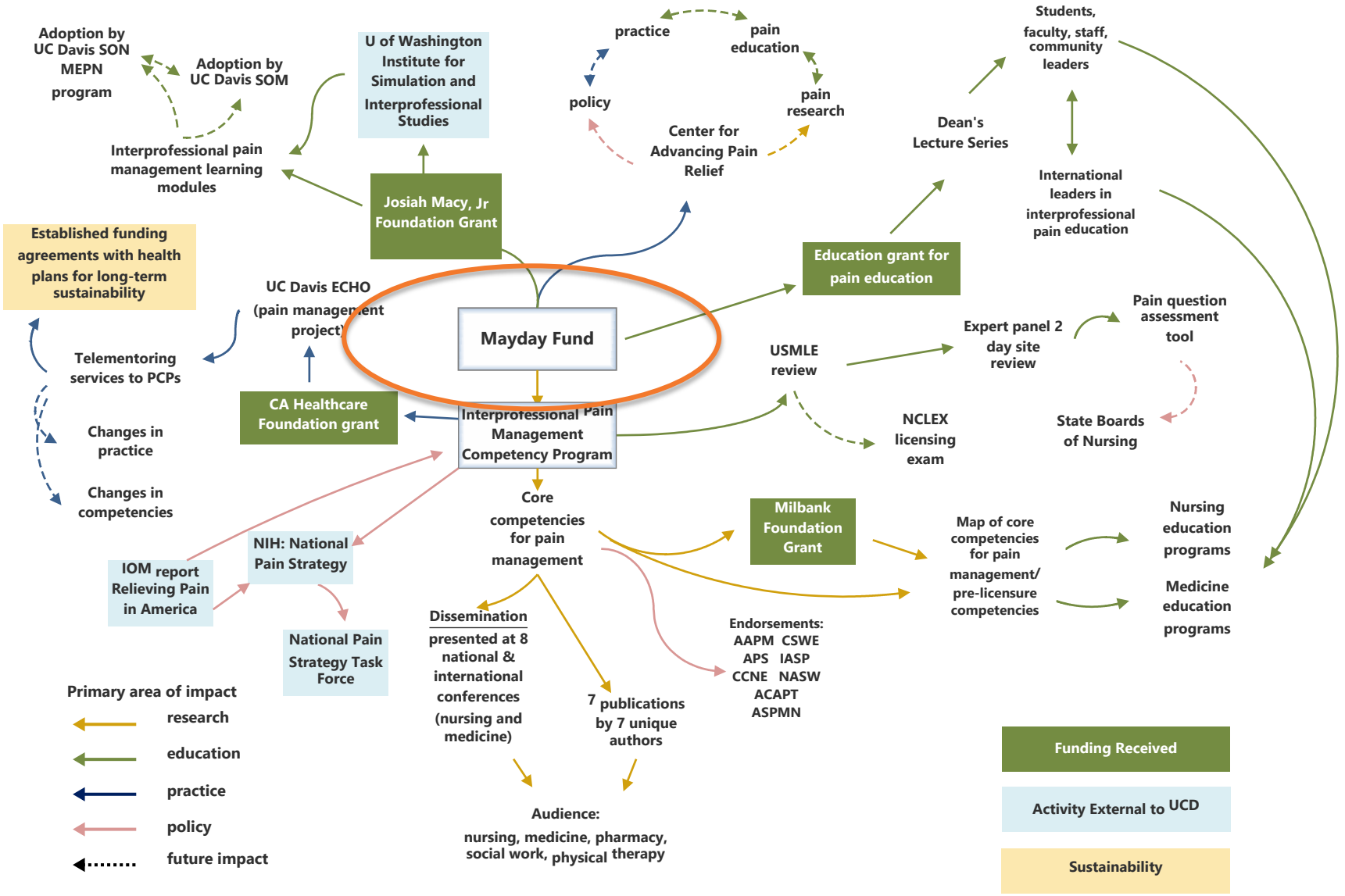
Lesson 3

Risk being innovative

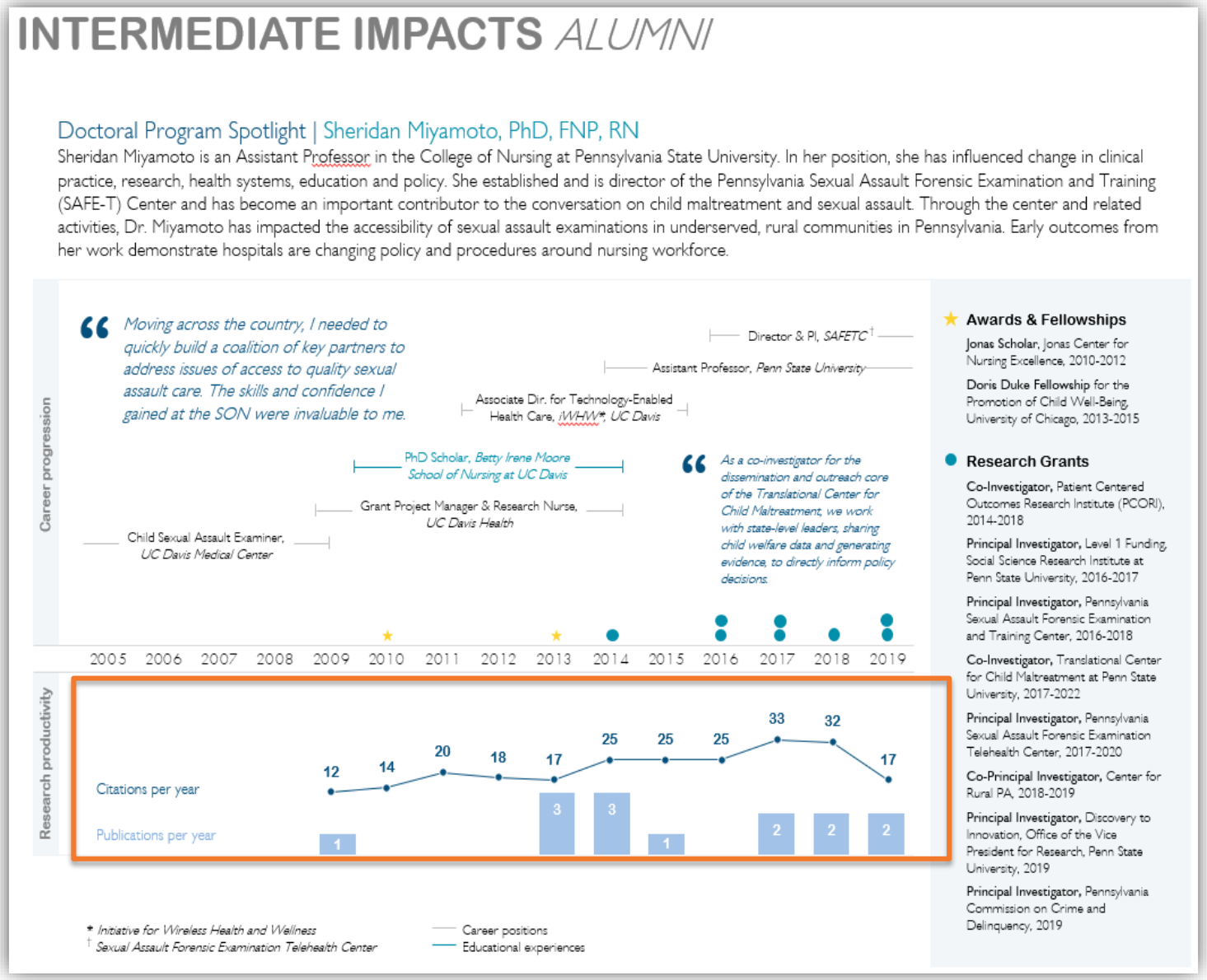
Lesson 3 innovate



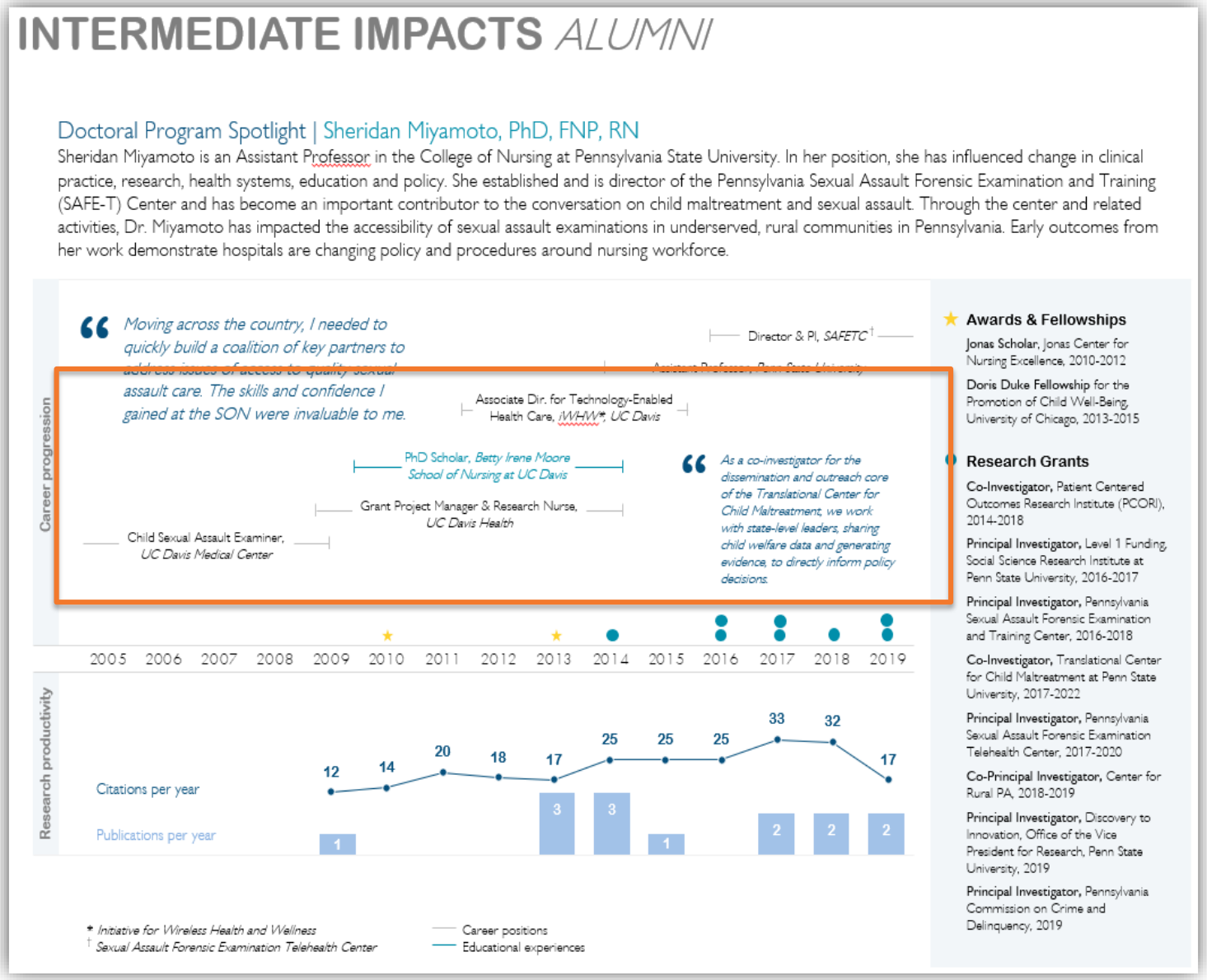
Lesson 3 innovate



Lesson 3 innovate



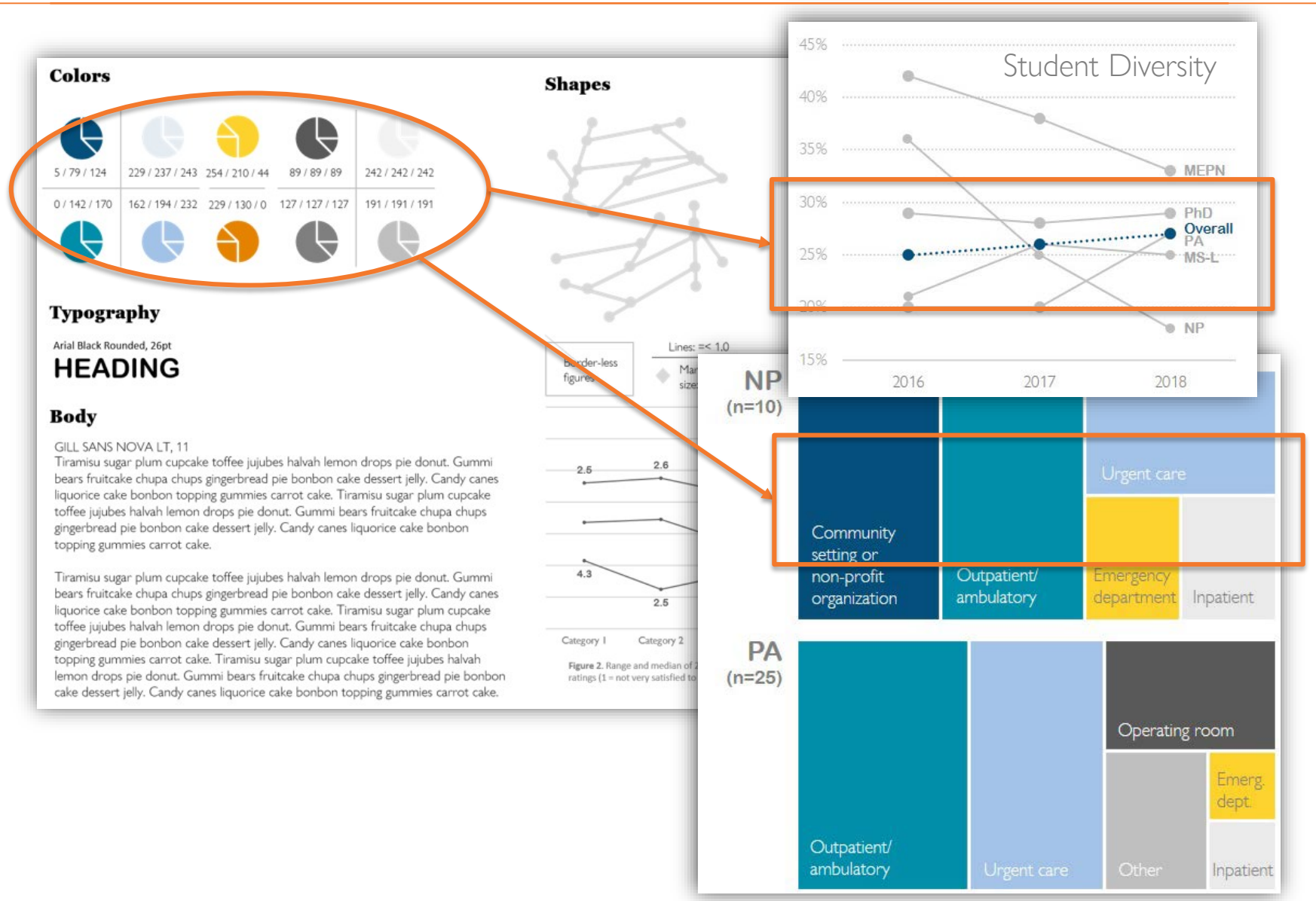
Lesson 3 innovate



Lesson 4

Be intentional about design choices

Lesson 4 design intentionally



Considerations

Turn to the health professions program and others for feedback

Develop a report that can be used in multiple venues with multiple audiences, including funders, advisory boards, faculty

Not all innovations or ideas will stick

References

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Ripple Effect Mapping:

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Report Design:

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Data Placemats:

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Thank you!

UC DAVIS HEALTH

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