

**The Evaluation Bridge or, if you can't  
calm the sea, you need to get over it**

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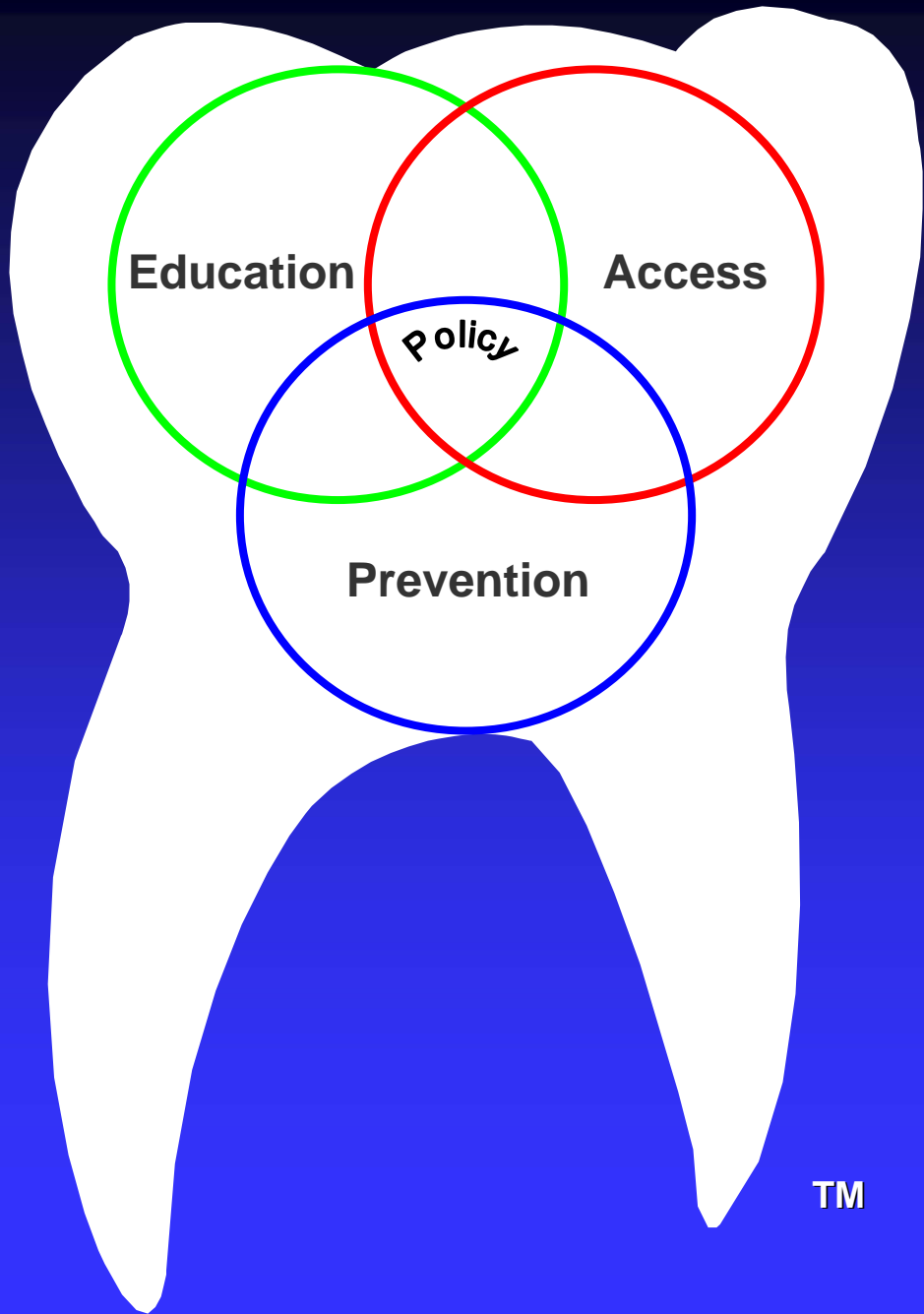
National Oral Health Conference

**Little Rock, Arkansas – May 1, 2006**

# Arkansas Oral Health Coalition, Inc.

**Smiles: AR, U.S.**

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# Members of the Arkansas Oral Health Coalition

Arkansas Academy of General Dentistry  
Arkansas Advocates for Children and Families  
Arkansas Cancer Research Center  
Arkansas Center for Health Improvement  
Arkansas Commission on Child Abuse, Rape and Domestic Violence  
Arkansas Dental Assistants' Association  
Arkansas Department of Education, Office of Comprehensive Health Education  
Arkansas Department of Health and Human Services, Office of Oral Health  
Arkansas Department of Health and Human Services, Office of Rural Health and Primary Care  
Arkansas Department of Health and Human Services  
Arkansas Department of Health and Human Services, Division of Medical Services  
Arkansas Department of Higher Education  
Arkansas Foundation for Medical Care  
Arkansas Head Start Association  
Arkansas Health Care Access Foundation  
Arkansas School Nurses Association  
Arkansas State Board of Dental Examiners  
Arkansas State Dental Association  
Arkansas State Dental Hygiene Association  
Arkansas Minority Health Commission  
Community Dental Clinic (Ft. Smith)  
Community Health Centers of Arkansas, Inc.  
Conway Interfaith Clinic  
Delta Dental Plan of Arkansas  
Donald W. Reynolds Center on Aging  
Healthy Connections, Inc.  
Interfaith Clinic of El Dorado  
Partners for Inclusive Communities  
Pulaski Technical College Dental Assisting Department  
UALR Share America  
UAMS College of Public Health  
UAMS Dental Hygiene Department  
UAMS Regional Programs (AHECs)

# Where We Began



# Why Do Evaluation?

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# Why Do Evaluation?

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**Prove that \$\$  
improve oral  
health, to ...**

**Get \$\$**

**Prove wise  
use of \$\$**

**Prove value to  
legislators (and CDC)**



**Prove \$\$ are used  
to do the right  
thing**

**Target \$\$ for  
maximum benefit**

**Prove \$\$ are  
used to do  
things right**

**Prove \$\$ are used to  
make a difference**

# Why Do Evaluation?

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Government is

**BIG**

Policy is

**BIG**



# Why Do Evaluation?

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**Oral Health is ...**

small

AR DHHS = \$ 3.1 billion; Oral Health = \$700K - - - 0.02%

# Why Do Evaluation?

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*Visibility!*



# Evaluations

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- **Partnership tool**
- **Paper**
- **Informal**

# Partnership Tool – online evaluation

(n=35)

[www.partnershiptool.com](http://www.partnershiptool.com)

84% response rate!

PARTNERSHIP  
SELF-ASSESSMENT   
 TOOL

# Partnership Tool - Results

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**“Synergy Score”** – a higher score means the Coalition is able to:

**1. find new and better ways of thinking about problems and solutions**

- a. able to break new ground, challenge the “accepted wisdom,” and discover innovative solutions to problems
- b. see the “big picture”
- c. understand their local environment

# Partnership Tool - Results

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**“Synergy Score”** – a higher score means the Coalition is able to:

**2. take actions that go beyond what any participant could do alone**

- a. carry out comprehensive interventions that connect multiple services, programs, policies, and sectors
- b. coordinate services in the community

# Partnership Tool - Results

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“Synergy Score” – a higher score means the Coalition is able to:

- 3. Strengthen its relationship with the community**
  - a. incorporate the knowledge, concerns, and priorities of community stakeholders
  - b. include community most affected by its work
  - c. focus on problems important to community
  - d. build on community assets
  - e. communicate the partnership’s actions
  - f. obtain support in the community

# Partnership Tool - Results

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1.0–2.9 is the Danger Zone - this area needs a lot of improvement.

3.0–3.9 is the Work Zone - more effort is needed in this area to maximize the partnership's collaborative potential

4.0–4.5 is the Headway Zone - although the partnership is doing pretty well in this area, it has the potential to progress even further

4.6–5.0 is the Target Zone - the partnership currently excels in this area and needs to focus attention on maintaining its high score.

**Arkansas “Synergy Score” = 4.1**



# Partnership Tool - Results

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Leadership Effectiveness Score = 4.3

Partnership Efficiency Score = 4.4

Non-financial Resources Score = 4.0

Financial Resources Score = 3.8

# Partnership Tool - Results

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## Decision-making process:

How decisions are made –

92% very or extremely comfortable

How often they support decisions –

96% usually or always

How often they feel left out of decision-making –

96% never or almost never

# Partnership Tool - results

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## Benefits vs. drawbacks of Coalition participation

65% reported that the benefits greatly exceed the drawbacks

27% reported that the benefits exceed the drawbacks

8% reported that the benefits and drawbacks are about equal

0% reported that the drawbacks exceed the benefits

0% reported that the drawbacks greatly exceed the benefits

# Evaluation - "Paper" Survey

(n=61)

## Member Satisfaction Survey

76% response rate

Arkansas Oral Health Coalition, Inc. - SMILES: AR, U.S.™

Meeting Effectiveness Inventory (MEI)

Please answer the following questions about this meeting. Feel free to add comments.

Type of meeting: (circle one)      coalition      workgroup      or

Name of Group: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Date of Meeting: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

1. Clarity of goals for meeting: (circle one number)

Poor	Fair	Satisfactory
	Good	Excellent

(e.g., unclear, diffuse, conflicting, unacceptable)      (e.g., clear, shared by all, endorsed with enthusiasm)

1	2
3	4
5	

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

2. General level of participation in the meeting: (circle one number)

Poor	Fair	Satisfactory
	Good	Excellent

(e.g., people seemed bored/distracted, lack of verbal participation)      (e.g., all paid attention, participated in the discussion)

1	2
3	4
5	

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

3. Who chaired the meeting? (check one)

- Chairperson
- Vice-chairperson
- Staff
- Committee member

From Butterfoss, F.D., Center for Pediatric Research; Center for Health Promotion, South Carolina DHEC, 1994, Revised 1998

# Evaluation Results – “Paper” Survey

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Likert 1 to 5, with 5 being “very satisfied”

- **Clarity of vision = 4.6 average, 66% very satisfied**
- **Leadership = 4.9 average, 95% very satisfied**
- **Key participants = 4.5 average, 56% very satisfied**
- **Communications = 4.8 average, 67% very satisfied**
- **Objectives met = 4.5 average, 59% very satisfied**

65% attended most of the time  
39% attended often or rarely  
4% had never attended

# Evaluation Results – “Paper” Survey

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## Comments:

- “Prior to formation of the Coalition, one rarely heard about oral health issues in Arkansas”
- “Coalition has accomplished a lot in short time; key has been a number of activities that were limited in scope but yielded visible outcomes”
- “Coalition is highly effective in all aspects & was very much needed in our state”
- “Would like to see more long-term legislative interest & support”

# Evaluating the Evaluations

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- Paper
  - Not electronic-friendly
  - Not really anonymous
  - Comments – all positive
- On-line
  - Not for computer-phobes

# **So What? = where can we improve**

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- **Insufficient “local” input**
- **More need for diversity**
- **Few “funders”**
- **No faith-based organizations**
- **We’re in the Headway Zone, but with plenty of room for improvement**



# Informal Evaluation

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- Monthly meetings, 10/year
- Willingness to attend
- Participation in events
- Fun !

# Success Stories

from Fran Butterfoss, Coalitions & Partnerships for Public Health

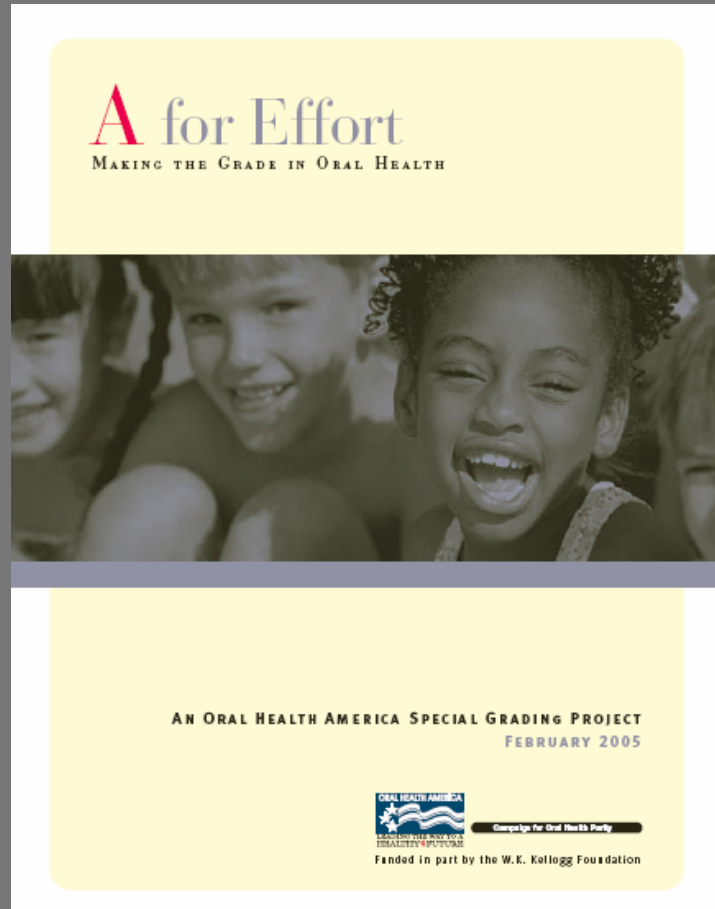
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The coalition representative from Delta Dental acknowledged that before becoming part of the Coalition

**“Delta Dental had heart, but not always the expert knowledge of what programs would work best in the community.”**

**The Coalition “helped us find the right niche and put us in touch with a network of experts who could help us implement feasible and effective programs”**

From D to A, just a little improvement.



But evaluations show where there's always room for more!