

## Instructions

	How Much?	How Well?
<b>Effort</b>	<p><b>Step 1: How much did we do? – Quadrant 1</b></p> <ul style="list-style-type: none"> <li>Start with “Number of customers served.”</li> <li>Better, more specific ways to count customers? Subcategories of customers?</li> <li>What activities are performed? (e.g., training providers). Convert each activity into a measure (# of providers trained).</li> </ul>	<p><b>Step 2: How well did we do it? – Quadrant 2</b></p> <ul style="list-style-type: none"> <li>Start with common measures: <ul style="list-style-type: none"> <li>Workload ratio (e.g. # client/provider)</li> <li>Customer satisfaction (e.g., Did we treat you well? Were you satisfied with services?).</li> </ul> </li> <li>Take each Quadrant 1 activity and ask how well was the activity performed. <ul style="list-style-type: none"> <li>What is your reach? (e.g., % of providers trained, % of eligible mothers who have received outreach materials).</li> <li>Can you measure the activity based on time? (e.g., % of lactation consultations completed within 24 hours).</li> <li><b>Can you measure the activity based on accuracy or meeting standards? (e.g., % of providers compliant with training).</b></li> </ul> </li> </ul>
<b>Effect</b>	<p><b>Step 3: Is anyone better off? How are they better off? – Quadrants 3 and 4</b></p> <ul style="list-style-type: none"> <li>Ask: “If your program works really well, in what ways are your customers better off?” How would you observe/measure this?</li> <li>These often occur in pairs (#s in Quadrant 3, %s in Quadrant 4).</li> <li>To save time, just focus on Quadrant 4 and place # signs in Quadrant 3 to show parallel.</li> <li>Four categories to consider – improvement in: <ul style="list-style-type: none"> <li>Skills/Knowledge (e.g., % of staff who showed improved knowledge after a learning session).</li> <li>Attitude/Opinion (% of mothers in pre-conception care who report intention to breastfeed).</li> <li>Behavior (e.g., % of families reporting adhering to safe sleep practices after receiving guidance).</li> <li>Access to/receipt of care (e.g., % of youth receiving transition plan).</li> </ul> </li> </ul>	<p><b>Step 4: Headline your measures – Determine communication, proxy, and data power</b></p> <ul style="list-style-type: none"> <li>Circle each measure that you have good, timely, and reliable data that is available now or with little effort (only circle Quadrant 2 and 4 measures).</li> <li>Ask “If you had to talk about this in a public setting, which circled measure would you choose?” (Public Square Test). Rank with #1, #2, #3. These are Headline Measures. Remaining circled measures are Secondary Measures that can be tried medium-term.</li> </ul> <p><b>Step 5: Data Development Agenda</b></p> <ul style="list-style-type: none"> <li>Ask “If you could invest in one to two measures for which you don’t have data, which ones would you choose?” Rank with A, B, etc. These make up your Data Development Agenda (in priority order).</li> </ul>

## Work Space

### Quadrant 1: Measuring Quantity of Effort (Counts and “Yes/No” Activities)

Primary Customer: \_\_\_\_\_

Other Customers/Subgroups: \_\_\_\_\_  
*(think about vulnerable groups in order to address health disparities)*

# of Customers Served: \_\_\_\_\_  
*(reword this for your customer)*

# of Activities Performed? \_\_\_\_\_

Other ideas:

### Quadrant 2: Measuring Quality of Effort (% of Reach; Satisfaction)

Common Measures (e.g., ratios, satisfaction): \_\_\_\_\_

% of Customers Served (Reach): \_\_\_\_\_

% of Activities Performed: \_\_\_\_\_  
*(measured by time or accuracy/standards)*

Other ideas:

### Quadrant 3: Measuring Quantity of Effect Is Anyone Better Off (#)?

### Quadrant 4: Measuring Quality of Effect How Are They Better Off (%)?

Changes in:

• Skills/Knowledge: % \_\_\_\_\_

• Attitude/Opinion: % \_\_\_\_\_

• Behavior: % \_\_\_\_\_

• Access to/receipt of care: % \_\_\_\_\_

Other ideas:

#### Health Equity Considerations:

- Are the groups affected by this measure at the table?
- How will this measure affect vulnerable groups differently?
- How will this measure be perceived by vulnerable groups?
- Will this measure ignore or worsen existing disparities?
- Can we focus on a vulnerable subgroup with this measure to address disparities?

Note: This tool is based on the Results-Based Accountability (RBA)<sup>TM</sup> framework developed by Mark Freidman, author of *Trying Hard is not Good Enough* and founder/director of the Fiscal Policy Studies Institute.

[www.mchevidence.org](http://www.mchevidence.org)

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