



Innovation in the Public Sector: An Evaluation

MASTER OF PUBLIC ADMINISTRATION
CAPSTONE APPLIED RESEARCH PROJECT

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Executive Summary

Purpose: The Oregon Department of Human Services (DHS) is early in the development and implementation of the Innovation Fund (IF), a program designed to provide funding for pilot and innovative projects that provide services for seniors and people with disabilities. A Capstone team of four Master of Public Administration students from the University of Oregon conducted an evaluation of the initiative to strengthen the funding process and ensure that funded projects are properly assessed for program effectiveness.

Project Scope: The evaluation aimed to answer five questions: 1) did DHS follow its initial outlined procedures; 2) is the Request for Proposals (RFPs) process inclusive for all potential applicants; 3) what improvements can be made to publicize the funding opportunity and streamline processes to make it more fair and equitable; 4) how well did the submitted proposals meet the goals of the Innovation Fund and 5) how equitable was the decision-making process?

Methodology: The UO Capstone team conducted a process evaluation of the IF to answer these questions, beginning with the initial stages of IF development and ending with policies for program evaluation. Methods included an analysis of data including the request for proposal documents, submitted proposals for both funded and unfunded projects, periodic evaluation data, interviews with IF Board members and representatives from eight funded projects, as well as academic and professional research about program evaluation, innovative grantmaking, and the senior and disabled population.

Findings: This analysis revealed the following main findings. Funded and unfunded proposals had a diversity of focus areas but were largely isolated geographically to the Portland Metro area. Each project's proposed measurements varied, which is likely due to having unclear guidelines for performance measurement, and unclear definitions for quality of life and cost effectiveness. Furthermore, the team found lack of clarity and little documentation describing how projects were selected for funding. Lastly, there was no policy indicating whether or not currently funded projects will have sustained funding in the future.

Recommendations: The team makes eight recommendations for the DHS Innovation Fund as they move forward in their development and as the Board moves forward with the next round of funding: 1) create a policy for refunding projects; 2) determine DHS's role in providing administrative support for project sustainability; 3) revisit DHS's definition of innovation; 4) create a request for proposal outreach strategy; 5) develop an evaluation framework for the Innovations Fund; 6) create a more transparent decision-making process; 7) set expectations for proposed measurements; and 8) determine DHS's role in expansion and scaling up of successful projects.



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Introduction

In 2013, the Oregon Legislature allocated \$2.3 million to the Oregon Department of Human Services (DHS) Aging and People with Disabilities (APD) unit for the Innovation Fund (IF) program. This program is housed in the APD's Advocacy and Development Unit, which works across departments and commissions to advocate for and promote new or improved programming for seniors and people with disabilities. The goal of the IF program is to fund innovative pilot projects that enhance services for seniors and people with disabilities through either an improvement in the quality of services provided, and/or an increase in the cost-effectiveness of services. Qualifying projects can either improve existing services or develop new services as long as service gaps are addressed. Funded projects should meet at least one of four desired goals: 1) prevention or delayed entry into long-term services and supports (LTSS), 2) helping individuals remain in the living setting of their choosing, 3) serving underserved populations, and/or 4) coordinating health systems and LTSS. After evaluating the implementation and success of the pilot projects in achieving the goals of the Innovation Fund (IF), the Advocacy and Development Unit will determine if the pilots can be replicated or scaled up to serve a greater number of seniors and people with disabilities in Oregon.

As the senior population in the United States is expected to grow, the costs of providing services will become more expensive. The Department of Human Services (DHS) may be able to improve the quality of life of Oregon's senior citizens and disabled population by funding new initiatives, or by shifting resources toward existing initiatives, that better serve their needs.

The Oregon DHS Innovation Fund is in its early stages of implementation and development. A team of University of Oregon students in the Master of Public Administration program was asked to conduct an evaluation of the IF program for a Capstone project. This report provides an evaluation of the IF program with an emphasis on its process. It is organized into six main sections. The first section provides a background of the IF and the currently funded projects. The next section is a literature review describing various types of evaluation and their significance. The next two sections focus on the research questions, data, and methodology that guide the analysis. Afterward, there is a thorough analysis of the data, including the team's recommendations for improvements DHS can make to move the Innovation Fund forward with more efficiency and equity. Lastly, the report concludes with a recommended program evaluation approach for future project funding cycles.

Background

Currently in Oregon, there are approximately 527,000 people with disabilities and 532,000 seniors (American Community Survey, 2013). Researchers project that by 2030 the number of seniors will grow to 20 percent of the population, an increase from 13 percent of the population in 2010. The trend in growth of the senior population results from both increases in life expectancy and an aging baby boomer cohort (Ortman, Velkoff, & Hogan, 2014). This trend is expected to affect medical costs, services, and policy (Martini, Garrett, Lindquist, and Isham, 2007; Davidson, 2013). Studies predict that due to an aging population, the cost of healthcare per capita in the United States is set to rise by just under one percent annually from 2000 to 2030 (Martini, Garrett, Lindquist, & Isham, 2007). Nationally, more than half of seniors over the age of 75 and a quarter of those between 65 and 74 are reported to have impairments related to mobility, vision, hearing, and self-care. Accommodations for this group will be increasingly needed, specifically in regard to staying in their homes as they age, housing accessibility, housing affordability and long-term care (Pendall, Freeman, Myers, & Hepp, 2012; Knickman & Snell, 2002).

The Oregon Department of Human Services (DHS) and Aging and People with Disabilities (APD) developed the concept of the IF program to proactively address the expected need for services among seniors and people with disabilities in Oregon. APD's creation of the IF represents an effort to address the lack of opportunities and financial incentives for social service related innovation. Innovation for basic needs is underfunded at the national and nonprofit level, compared to innovation funded for the military and in the commercial sector. More specifically, there is a deficit in innovation for the needs of the aging population including the need for organization of pensions, wellness support systems, and housing and transportation (Mulgan, 2006). Formal systems for innovation are essential in the public sector and can lead to improved services, performance, cost effectiveness, and public value (Mulgan & Alburym, 2003). The DHS IF attempts to fulfill this much needed role; this study will evaluate the degree to which it is effective at this task.

Long-Term Services and Supports

Long-term services and supports (LTSS) is a term that refers to the types of assistance provided to individuals with functional and cognitive limitations. LTSS comes in multiple forms to help with daily needs, activities and functions (Congress of the United States Congressional Budget Office, 2013). Oregon's long-term services and supports or LTSS are rooted in the Oregon law ORS 410 that declares, "in keeping with the traditional concept of the inherent dignity of the individual in our democratic society, the older citizens of this state are entitled to enjoy their later years in health, honor and dignity, and citizens with disabilities are entitled to live lives of maximum freedom and independence (oregonlaws.org)." In 2013 Senate Bill 21 was passed by the Legislative Assembly and mandated DHS to develop a plan to improve LTSS in Oregon (Department of Human Services Aging and People with Disabilities Program, 2015). The IF responds to this requirement as a means to improve this system. Funding for the IF supports

research and development to find new approaches to LTSS with a goal for Oregon to progress as LTSS leading providers (Brown, 2015).

IF Program Context

The IF received its resources through a request submitted to the State of Oregon Legislature by the DHS Advocacy and Development Unit. The proposal referenced the need for innovation in the public sector and was a response to a request for all state agencies to create new budget ideas for the governor. The funds have the flexibility of coming from the State of Oregon’s General Funds, where there are fewer spending restrictions. It is also worth noting that no additional staff were added to APD for the Innovation Fund.

IF Board

Although the IF program is housed in the APD, it is governed by the IF Board, which is tasked with determining which projects should receive funds and which projects have been successful in meeting the goals of the IF program. To populate the Board, APD first asked the relevant commissions to provide nominations, and then considered additional candidates by listing people who would like to support the project and would not have a conflict of interest, such as the potential to apply for the Innovation Fund (Brown, 2015). The Board is made up of eight members of advocates and stakeholders. TABLE 1 shows the affiliations and recruitment methods for current IF Board representation.

TABLE 1: INNOVATION BOARD AFFILIATIONS

Member Affiliation:	How they came to be on the board:
Academic	Recruited
Governor’s Commission on Senior Services	Nominated by Commission
Long Term Care Ombudsman Advisory Committee	Nominated by Commission
Member-At-Large	Recruited
Member-At-Large	Recruited
Oregon Disabilities Commission	Nominated by Commission
Oregon Home Care Commission	Nominated by Commission
State Independent Living Council	Nominated by Commission

Source: State of Oregon, Department of Health and Human Services



Funding Process

To solicit potential projects, DHS and the IF Board issued two Request for Proposals (RFP), one for small (\$50,000-350,000) and one for large (over \$350,000) grants. The Board's goal was to make the funds available to smaller organizations, who may not have the capacity to write a \$350,000 grant, hence the two funding levels. The Board reviewed and evaluated all submitted applications in order to determine which projects would receive IF support. Upon notice of award, the projects were required to enter into grant agreements with APD in order to access funding.

Descriptions of Funded Proposals

The IF Board awarded funds to proposals that demonstrated a match with their mission. Projects are expected to: be innovative, achieve desired outcomes of improved quality of life and/or cost-effectiveness, and address one or more of the four previously described IF goals. The RFP describes an innovative project as one that “provides a service or other element for seniors and people with disabilities that currently does not exist, an improvement to an existing service or project, or a service or project that has not been tested” (The State of Oregon Department of Human Services, 2014).

The first round of projects was awarded in July 2014 after a competitive application process and are expected to run through December 2015. Evaluations or progress reports are due quarterly, with the first reports due in early 2015. TABLES 2 and 3 provide a brief descriptions of the projects that did and did not receive funding from the IF in Round 1, respectively. Later in this report, the Capstone Team assesses how each of these projects met the IF criteria and provides justification as to why others were not funded (more detailed information can be found in Appendix 2).

TABLE 2: INNOVATION FUND PROJECTS

Award	Agency and Project	Focus Area
\$350,000	Volunteers of America Oregon	Dementia
\$350,000	Multnomah County Aging and Disability Services	High Need Individuals ¹
\$243,000	Special Advocates for Vulnerable Adults	Guardianship
\$50,000	Rogue Valley Council of Government	Housing
\$49,960	Clackamas County Social Services	Transportation
\$50,000	Oregon Cascades West Council of Governments	ER and Hospital Prevention
\$27,000	City of Sandy	Dental and Health Services
\$50,000	Community Action Team	Home Repairs
\$50,000	Oral Health Coalition	Long Term Oral Health

Source: State of Oregon, Department of Health and Human Services

¹ This project provides case management for clients with chronic medical needs that do not qualify for long term services and support



TABLE 3: INNOVATION NON-FUNDED PROJECTS

Requested Amount	Agency and Project	Focus Area
\$349,706	REACH Community Development Corporation	Housing Stabilization
\$340,976	Resilient Businesses LLC	Cooperative Businesses
\$351,850	Washington County Disability, Aging and Veterans Services	Long Term Care
\$49,911	Friendly House- Sage Metro Portland	LGBT
\$50,000	Immigrant and Refugee Community Organization	Culturally and linguistically specific ESL and citizenship classes
\$350,000	Immigrant and Refugee Community Organization	Bilingual Community Health Workers
\$50,000	Multnomah County Aging and Disabilities Services Division	LGBT & HIV/AIDS
\$50,250	The Institute for Success over Stress	Laughter Yoga
\$21,663	LGBTQ Community Center Fund	LGBTQ Services
\$243,000	Community Vision, Inc. Dream Builders	Career Planning for Disabled Youth
\$349,450	Lifestyle Hospice Foundation, Inc.	Home Repairs
\$350,000	Metropolitan Family Service	Community Health Work Model
\$225,000	North End Senior Solutions	Transportation
\$100,000	Northwest Pilot Project Inc.	Housing Stabilization
\$300,000	Charles F. Surendorf II Art Foundation	LGBTQ services

Source: State of Oregon, Department of Health and Human Services



Literature Review

In order to determine the success of funded Innovation Fund (IF) programs, it is important to understand and review the concept of outcome-oriented evaluations. To assess how well the IF program is meeting its goals, an analysis needs to look at two levels of evaluation: evaluation of the projects themselves, and evaluation of the IF grantmaking process. Prior to conducting an analysis, it is important to not only understand the theories behind outcome oriented evaluations and process evaluation, but also the implications of applying these concepts to “innovative” projects and grantmaking entities themselves.

Outcome Oriented Evaluations

Organizations are increasingly being held accountable to successfully produce results and to become more outcome oriented. In other words, they must show their effectiveness in producing some sort of change, demonstrating the need for organizations to measure their outcomes. Plantz, Taylor Greenway, and Hendricks (1997) argue that outcomes measurement, as popularized by the United Way of America (UWA), focuses on program results or the benefit to participants during or after the program. One of the highest values for this type of measurement is its ability to improve programs and services.

Program Evaluation

Program evaluation and performance measures are examples of outcome-oriented evaluations. The Legislative Committee Services for the State of Oregon explain program evaluation as follows:²

“Program evaluation and analysis attempt to measure the effectiveness and efficiency of government programs by identifying quantifiable indicators of program performance. Such evaluation can demonstrate results for successful programs and identify problems in programs that are not succeeding. It covers such activities as reviewing or developing objectives, collecting and analyzing data, and implementing results.” (Harrell 2004, p. 1)

Furthermore, Carlson, Kelley, and Smith (2010) state that program evaluation takes a comprehensive approach that looks at program operations and ongoing interactions between

² Although the Capstone team does not use this type of evaluation in this report, another approach to evaluation, developmental evaluation, takes a step away from systematic measurement as a means to a final outcome. Instead it strives for a constant state of evaluation, where programs continually shift as internal and external factors change. Essentially, “the process is the outcome” (Patton 1994 p. 312). It is thought that this reduces the bias and limitations that are inherent to setting measurable goals upfront. The process of developmental evaluation rather, engages participants to set their own goals, understanding that this may be different for each participant. Perhaps more innovatively, developmental evaluation aims to hold no judgment for whether programs have performed inadequately or ineffective, but instead focuses on adaptation, without the belief that change is the same as progress (Patton 1994).

audiences, stakeholders and evaluators. The process involves the identification of issues through analysis of documents, in-person contacts, direct observations, and more.³

Performance Measurement

Performance measurements are similar to program evaluation in that it assesses the effectiveness of a program or service to produce change, but it does not rely on input from various stakeholders. Instead it focuses on measuring objective performance indicators. An example of performance measurements is the Government Performance and Results Act of 1993, which requires that federally funded programs measure the progress they make toward goals in addition to the outcomes (Poole, Nelson, Carnahan, Chepenik, & Tubiak, 2000). In 1991, Oregon was among the first states to implement a benchmark system as part of a major performance measurement initiative, Reinventing Government. Carlson, Kelly, and Smith (2010) suggest that this new system facilitated a shift from high-level performance indicators to the program level.⁴

Innovation and Evaluation

More specific to innovation, New York's Center for Economic Opportunity (CEO) is the only government body to receive a federal Social Innovation Grant to replicate its top performing programs (Binns, 2012). CEO customizes its evaluation strategy for programs individually. Methods for evaluation include focus groups, surveys, analysis of group data and random assignment trials. CEO funds numerous anti-poverty innovation pilot programs. Evaluations often begin in the early stages of the programs with program reviews that determine program model compliance by looking at enrollments, the way participants move through the program process and outcomes. Randomized control trials are used in some cases but most programs use other designs that are feasible in the particular circumstance. Programs found to be ineffective are terminated and those found to be successful are "baselined" and "scaled up" by partner agencies (Gais, Strach, & Zuber, 2014). Similarly, the Bill and Melinda Gates Foundation, known for funding innovations and pilot projects, employs a policy that requires evaluation

³ Current program evaluation literature often references the principles established by the American Evaluation Association (AEA). In 1994, the AEA developed five principles to guide program evaluation at a broad scale: systematic inquiry, competence, integrity/honesty, respect for people, and responsibilities for general and public welfare (American Evaluation Association). The Center for Disease Control and Prevention relies on a program evaluation framework that is based on standards created by the Joint Committee on Educational Evaluation. There are four standard categories including utility, feasibility, propriety and accuracy (Milstein & Wetterhall, 2000)

⁴ The Oregon Department of Administrative Services proposed eight key expectations criteria as part of performance measurement guidelines for state agencies, including the following:

- i. Key performance measures should gauge progress toward achieving agency goals and pertinent high-level outcomes, including Oregon Benchmarks;
- ii. Key performance measures should focus on the key indicators of agency success, and agencies should use Government Accounting Standards Board definitions;
- iii. Key performance measures should have targets;
- iv. Key performance measures should be accurate and reliable;
- v. Key performance measures should link to specific organizational units;
- vi. Key performance measures should include customer satisfaction and efficiency indicators; and
- vii. Key performance measures should allow comparisons with others wherever possible.



techniques that verify causal relationships, demonstrating whether the program intervention contributed to new observations (Gates Foundation, 2015).

Process Evaluation

Another component of program evaluation is a process evaluation. Arends et al. (2014) describe process evaluation as a way to analyze how programs or services were planned and implemented, as well as whether or not they actually produced the expected output. This emphasis on outputs (the program's activities) rather than outcomes (the program's impact) is the key difference between a process evaluation and outcome oriented evaluations. Arends et al., (2014, p. 124) also argue that a process evaluation can complement an outcome oriented evaluation because it "can help explain the success or failure of finding relationship between the intervention and the outcome(s) of interest" because it focuses on the effectiveness of the process.

Grantmaking Evaluation

One critical process evaluation to consider is the process of grantmaking because it influences the outcomes of funded programs. Therefore, a good grantmaking process is an integral component of achieving good outcomes. The literature on provides insight on grantmakers can use process evaluation as a learning tool to provide better services.

Evaluating a grantmaking process presents challenges, despite benefits. Wisely (2002) argues that one of the biggest challenges of grantmaking evaluation is that evaluating a grantmaker is not as effective as evaluating the grantees directly since grantmaking support is often only one of many factors that influence the capacity of a grantee. Some argue that, although the expectations about philanthropic accountability have shifted, grantmakers are more vulnerable to hostile criticism about how they spend their money and their influence over public policy. As a result, they are less likely to invite additional criticism in the form of evaluation. Alternatively, evaluators sometimes find it difficult to evaluate grantmakers whose intentions are for the public good.

Behrens and Kelly (2008) also argue that evaluations are especially difficult to conduct, and some grantmakers do not find them useful because the evaluations are often complicated and presented when it is too late to implement changes. Behrens and Kelly (2008) suggest that funders must adopt a more systems-oriented view of the work if grantmakers are to effectively use and learn from evaluation. Evaluation requires ongoing feedback and constant adjustment to funding strategies. Adopting a systems-oriented view requires reflective practice in order for grantmakers to learn and apply learnings.

Chelimsky (2001) suggests a framework on how to develop stronger evaluations in grantmaking organizations. Though many of the framework's steps are similar to other models, this model emphasizes the importance of establishing the credibility of grantmakers' decisions about whom to fund. Grantmakers can do this by conducting an evaluative assessment of prospective



grantees, doing a periodic review of the grantee-selection process, and providing evaluative assistance to grantees. This model also emphasizes the importance of an outside evaluation of the results of the programs grantmakers fund.

As part of a process evaluation, it is important that grantmaking organizations follow due diligence, which the Grantmakers for Effective Organizations (2010, p. 3) define as “the process through which an investor (or grantmaker) learns more about an organization’s financial and organizational health to guide an investment (or grant making decision).” Grantmakers are often challenged with learning as much as they can about potential grantees but should only ask for the information they really need and not overburden their applicants. One suggestion is for grantmakers to research potential grantees’ eight key priorities to ensuring due diligence: 1) organizational history and track record, 2) governance and executive leadership, 3) organizational vision and strategy, 4) proposed project: planning, outcomes, and evaluation, 5) human resources available, 6) external communications, 7) relationships and networks, and 8) financial health.

Grantmakers Involvement in Outcome Measurement

In addition to evaluating their process, grantmakers can be involved in helping funded programs measure outcomes. For example, Hendricks, Plantz, and Pritchard (2008) describe the UWA’s approach to require its funded programs to measure their own outcomes. UWA provided the funded programs with training and tools, including logic modeling, a four-part graphic that includes inputs, activities, outputs, and outcomes, which programs have reported to be useful. Another benefit to the UWA’s approach is the standardization and simplification of measurement terminology.

A common challenge nonprofits and public agencies face when dealing with outcome measurement is capacity to conduct evaluation and measurement. Carlson, Kelley, and Smith (2010) argue that these organizations are challenged by the high expectations for accountability brought forward by funders. Many organizations hire external evaluators to meet requirements of the funders like the UWA and federal government. Furthermore, in a study, Carman (2009) found that many state and local funders did not believe it was their role to require evaluation as a condition for grants because agencies lacked capacity and because the grants being allocated were relatively small. Additionally, an analysis of Oregon’s government performance reforms over the last 20 years found that nonprofit programs that had unique performance measurement systems as opposed to commonly used and understood systems received less funding (Carlson, Kelley and Smith, 2010).

It is also important to recognize that the UWA strives to be realistic in regard to the expected time frame given for developing outcome measurement systems. Nonprofits are not pressured to have performance targets or meaningful outcomes right away but are able to wait until there is enough data to determine reasonable targets. This may mean outcomes are considered

meaningful two to four years after implementation. The organization also takes into account the process for testing and refining these measures (Hendricks, Plantz, & Pritchard, 2008).

Scope of Work

The original scope of work discussed between the Department of Human Services staff and the University of Oregon Capstone team suggested that this report would:

- 1) evaluate how funded projects improve quality of life or reduce costs;
- 2) assess the overall cost effectiveness of the Innovation Fund (IF) program; and
- 3) analyze the inclusiveness of the Request For Proposals (RFP) process for applicants.

However, due to the recent implementation of IF program and the nature of initiating brand new projects, the Capstone team found the amount of available information was too limited to successfully and thoroughly approach the first two objectives. After an initial evaluation of available data, the Capstone team shifted the focus of the research to completing a process evaluation of the IF program at its current state. This process evaluation which includes an assessment of the IF creation, RFP process, and the submitted process, is discussed further in the Methodology section.

Research Questions

Upon redefining the Scope of Work for this research plan, the Capstone team outlined several key research questions to be addressed through the process evaluation:

- Did the Department of Human Services (DHS) follow its initial outlined procedures for the IF?
- Was the Request for Proposal process inclusive for all potential applicants?
- What improvements can be made to publicize the funding opportunity and decrease unnecessary processes to make it more fair and equitable for potential applicants?
- How well did the submitted proposals meet the goals of the IF?
 - How do submitted proposals meet the IF's definition of innovative?
 - How well do funded proposals measure cost savings, and/or how well do they measure quality improvement?
 - How well do submitted proposals meet the IF's 4 service goals?
- How equitable was the decision-making process in determining which proposals would receive funding?



Data and Methodology

The University of Oregon Capstone team used multiple data sources to gain insight into the implementation of the Innovation Fund (IF) program. Most of the data used within this analysis was provided by the Department of Human Services (DHS) and generated prior to the start of this research project. The Capstone team gathered supplemental data through interviews and outside research.

Data

DHS Data

Most of the data used for the project was provided by DHS staff. This included:

- *'Request for Proposals' Documents* - The analysis used the publicly-issued documents requesting proposals for projects seeking support from the IF.
- *Copies of all submitted proposals* - This consisted of all final proposals submitted by applicants during the RFP process that were subsequently evaluated by the IF Board. Methods included an analysis of successful and unsuccessful proposals.
- *Periodic Evaluation Data* - All funded projects are required to conduct periodic evaluations detailing how they are making progress towards the objectives and measures they proposed in their applications. The team's analysis utilized reports from the first quarter of project implementation.

Innovation Fund Advisory Board

The IF Board is charged with evaluating all submitted requests for funding and assessing evaluations submitted during the project implementation period. This data was provided by DHS Staff and included:

- *List of Board Members* - This was a list of all current IF Board Members, their affiliation, and contact information.
- *IF Board Meeting Information* - This included all meeting agendas, minutes, and supplemental information or documents that were produced or collected related to the IF Board Meetings that took place over the course of the grantmaking process. All materials were in written/digital format.

Interview Data

The Capstone team conducted interviews with key individuals involved with the IF:

- *DHS Staff* - This included interviews with DHS staff who played a role in the development of the program and the RFP process. Interviews with staff also played a key role in clearly outlining the priorities and objectives for the program.
- *IF Board Members* - This included any data collected through interviews with IF Board Members who played a role in the development of the grantmaking process and the evaluation of submitted proposals.
- *Awarded Project Representatives* – This included interviews conducted with representatives from awarded projects and pertains to information about the RFP process and the beginning implementation stages of their respective projects.



Other Data

- *State of Oregon Contracting Guidelines* - This includes any statutes or legal requirements related to contracting services out to other agencies.
- *Literature Review* - This will include academic and professional research about the concept of program evaluation and programs aimed to support the targeted populations, as well as grant making and innovation in funding social services.

Data Limitations

There are several limitations to the data used in this analysis. One limitation is the limited amount of data and the validity of the data that is available. The IF projects only received notice of funding in July 2014, and needed time to have an effective grant agreement in place before funding was initiated and project implementation could begin. Additionally, as many of the funded projects are pilots, initial implementation had a limited amount of time to create desired outcomes. Thus, there are limited data capturing how well project implementation is aligned with the submitted proposals and the degree of success with implementation. Additionally, this research relied significantly on qualitative data such as interviews with the IF Board and IF projects. Other possible quantitative data from sources such as the Oregon Procurement Information Network, which manages the RFP, were not available. Responses to interviews may have had some bias or perhaps cannot be generalized to others' experiences with the IF proposal or evaluation process. Additionally, the team was only able to interview two of the eight IF Board Members, and therefore had limited insight that is not likely to be representative of the whole Board.

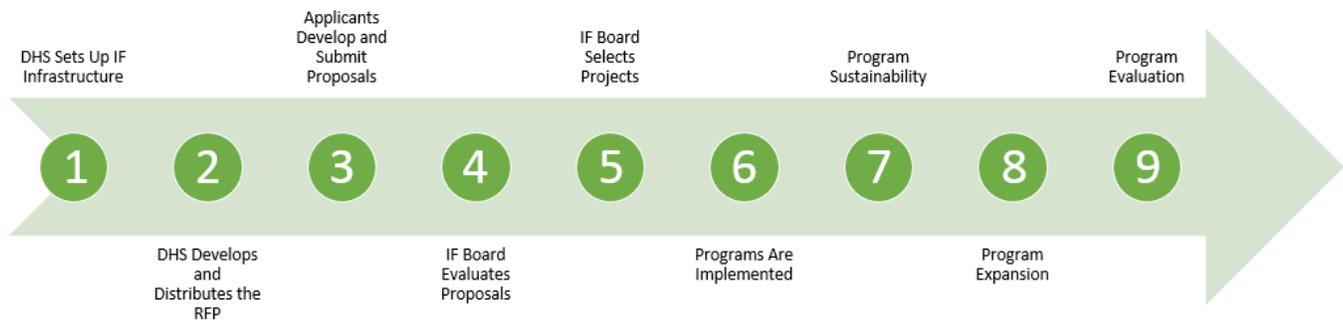
Methodology

After gathering data, the Capstone team concluded that a process evaluation would be the most appropriate approach to assessing the IF given the data available at the time of research. A process evaluation assesses "how a program or outcome was achieved," in this case, how the Innovation Fund was developed and carried out (Linnell, 2015). This is different than an outcome evaluation, where the intention is to see if the evaluated program was effective at producing change. As part of this evaluation, the Capstone team examined all submitted applications and compared funded and non-funded projects to see how the IF Board evaluated the proposals. Additionally, the team conducted interviews with eight of the nine funded projects, two of the eight IF Board members, and one DHS staff person. Observations from these interviews, as well as identified trends or inconsistencies from the proposals, formed the bulk of the analysis. The analyses, along with outside research on best practices, guided the recommendations.

Analysis and Recommendation

In order to conduct the evaluation of how the Innovation Fund (IF) was developed and initially implemented, the UO Capstone team broke down the process into nine steps, displayed in FIGURE 1. Each step was evaluated individually using mixed methodologies, and recommendations were made based on analysis of the results.

FIGURE 1: INNOVATION FUND PROCESS PHASES



Phase 1: DHS Sets Up IF Infrastructure

Department of Human Services (DHS) submitted a Policy Option Package (POP) outlining the IF. Once the state allocated funds to support the project, Aging and People with Disabilities (APD) was responsible for putting the POP into action. TABLE 4 shows the comparison of the proposal outlined in the POP and how the IF was actually implemented.

TABLE 4: POLICY OPTION PACKAGE AND FOLLOWING ACTIONS

Excerpts from POP	DHS Action
Innovative and pilot ideas will be submitted to the APD Advocacy & Development Unit for consideration.	Innovative proposals were submitted to the IF Board for evaluation and selection.
Pilots may cover a wide range of topics such as prevention, service improvements, use of technology, new methods of coordination, cost savings and others that address the needs of seniors and people with disabilities.	Applications were accepted with this spirit in mind. There is no definition, however, of Cost Savings or People with Disabilities.
An application form has been developed to document ideas to be considered.	A standard application was used for both small and large grant applications.
A process for concept evaluation is being drafted which will include factors such as: relationship to key performance measures, agency goals and mission, stakeholder input, partnerships, budget, timing, sustainability, service equity, proposed outcomes and more. Concepts that emerge as priorities will be implemented upon agency approval. A key element of all approved pilots will be an evaluation component.	A score sheet was developed with these factors. According to one IF Board member, the first rankings were based on their idea of innovation. The board then decided to prioritize a diversity of focus areas.
Periodic evaluation will be required and will be used to determine if the pilot/idea will proceed as planned.	There is a deadline for quarterly reports from each funded project.
Pilots that meet expected outcomes will be considered for permanent implementation, statewide if applicable. Through this process, APD will be better able to focus its resources on locally tested, successful, evidence-based practices that meet agency goals.	The Advocacy and Development Unit will advocate to DHS for expansion of successful projects. There is no policy or procedure documenting what this consideration for permanent implementation or its procedure will look like.
The Advocacy & Development Unit will solicit ideas, participate in and manage the evaluation process, staff pilots and evaluations, report outcomes, recommend next steps, facilitate transition of successful pilots to ongoing practice and wider application as appropriate.	Projects are in contact with the staff at the IF to discuss and explore options for any challenges or clarifications.

The POP set a good foundation for the IF. These actions outlined in the POP should be written in policies and procedures to help identify and address upcoming needs. The following sections



go into more detail on these types of policies, including but not limited to: documenting decision making, defining key terms, creating a procedure for permanent implementation.

Phase 2: DHS Develops and Distributes the RFP

The next step in the process was the development and distribution of the "Request for Proposals" (RFP) document. As requested by DHS within the initial scope of work, this part of the analysis focuses specifically on the inclusiveness aspects of the RFP process. Creating an inclusive RFP process ensures that DHS is reaching out to all organizations and agencies that may be interested in seeking out IF support and reduces the chances of bias that may emerge if only a portion of agencies in Oregon receive word of the funding opportunity. Inclusiveness of the RFP process was analyzed in two aspects: geographic, including urban versus rural, and focus areas of service.

The RFP issued during the first round of funding does not specifically outline priorities for geographic location nor service areas. Interviews with DHS staff supports this, indicating there had not been discussion of either of these factors, both in terms of RFP distribution and that outreach was not strategically designed to cast as broad of a net as possible. Given that there was no target set during the RFP process, this analysis was limited to assessing the characteristics of all the proposals that were submitted to determine if and where improvements could be made to the RFP distribution process.

Geographic Diversity:

Assessing the geographic characteristics of submitted proposals can provide information about the RFP process and promotion of the opportunity to apply for funding. Geographic distribution patterns may be reflective of factors such as outreach methods or capacity to apply for funding and reflects the equity of the methods used to promote the funding opportunity. It is important that all Oregon communities have an equal opportunity to seek this funding, given the variety of unmet needs in the population that are often dependent on community characteristics. For example, urban areas may provide better access to basic services such as healthcare and transportation, making it easier for seniors and people with disabilities to maintain independent lifestyles. Trying to ensure that there is adequate rural representation among projects is important because successful pilot projects that are tested in urban areas may not necessarily be replicated in rural areas, given the unique challenges and needs of their populations.

TABLE 5 shows that in Oregon, larger shares of population in non-metropolitan areas are seniors or have a disability. Metropolitan counties, as designated by the U.S. Office of Management and Budget (OMB), have at least one core urban area of more than 50,000. In Oregon, there are 13 counties that classify as Metropolitan, and have the lowest population percentage of seniors and people with disabilities. The 13 counties that classify as Micropolitan, which have at least one urban core with a population between 10,000 and 50,000, had higher percentages than



Metropolitan. Counties without an OMB designation do not have an urban area of more than 10,000. The population in these 10 counties had the highest percentage of seniors and people with disabilities.

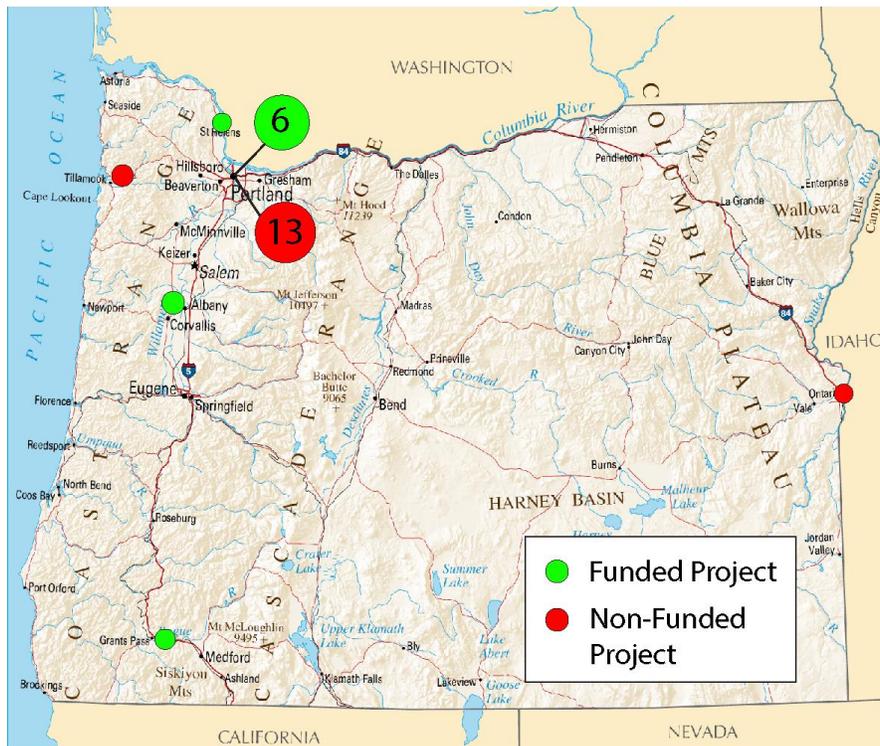
TABLE 5: POPULATION BREAKDOWN BY COUNTY DESIGNATION

County Designation	Total Population	Persons with Disabilities		Persons 65 and older	
		Population	Percent	Population	Percent
Metropolitan	3,191,168	408,846	13.6%	413,397	14.3%
Micropolitan	543,679	100,651	18.0%	99,469	17.9%
None	94,741	17,371	19.4%	19,133	21.7%
Total	3,829,588	526,868	13.8%	531,998	13.9%

Source: American Community Survey 2013, County designation by Office of Management and Budget, Analysis by UO Capstone Team

FIGURE 2 shows the geographic distribution of all submitted IF proposals. A review of the geographic locations of the proposals demonstrated that the promotion of the RFP process may have been somewhat exclusive in terms of promotion of the opportunity for funding. An analysis of both funded and non-funded proposals showed that geographic location of proposing agencies tended to skew more towards the I-5 corridor, and particularly within the Portland area. Six out of the nine funded proposals and twelve out of fifteen of the non-funded proposals were located in the metro Portland area. While it is important to recognize that most of Oregon’s population is located in metro areas along the I-5 freeway, there is a clear lack of representation from agencies in southern and eastern Oregon, which is where many rural communities are located.

FIGURE 2: GEOGRAPHIC DISTRIBUTION OF FUNDED AND NON-FUNDED PROJECTS



Source: "Map of Oregon NA" by Unknown - National Atlas. Licensed under Public Domain via Wikimedia Commons - http://commons.wikimedia.org/wiki/File:Map_of_Oregon_NA.png#/media/File:Map_of_Oregon_NA.png; Customized by UO Capstone Team

While the prominence of proposed Portland-based projects may reflect the fact that most of Oregon’s population is located in the Metro area, it is important to consider why most proposals came from agencies serving more urban Oregon communities. This lack of geographic diversity may be an indicator that the design of the RFP process made the awareness of the opportunity for funding more towards organizations that serve seniors and people with disabilities in urban areas. It is unlikely that there was a bias towards funding proposals located in urban areas, as non-funded proposals were primarily from the Portland area as well. Interviews with DHS staff indicated that the proposal was primarily distributed through the standard network of the Department of Aging and People with Disabilities (APD). This notion was supported through interviews with representatives from funded projects, many of whom heard of the opportunity as a result of already being connected with DHS. The high number of proposals from the metro Portland area may be because of the fact that agencies and organizations located in rural areas may not be as networked at the state level, and therefore would have a lesser chance of hearing about the funding.

Focus Area of Service:

In contrast to geographic area, an analysis of the focus areas of service from the submitted proposals seems to indicate that the RFP was successful in soliciting proposals for a variety of



projects. Among the 26 proposals submitted, there were 11 different focus areas of service. TABLE 6 shows the variety of service areas among all submitted proposals.

TABLE 6: FOCUS AREAS OF SERVICE AMONG SUBMITTED PROPOSALS

Focus Area of Service	Funded	Non-Funded
Alternative Treatment	0	1
Case Management	0	1
Cooperative	0	1
Dementia	1	0
Guardianship	1	0
Health or Dental	3	1
High Need Individuals	1	0
Housing or Home Repairs	2	3
Immigrant Services	0	2
LGBT Services ⁵	0	5
Transportation	1	1

Source: State of Oregon, Department of Health and Human Services; Analysis by UO Capstone Team

Recommendation: Create RFP Outreach Strategy

Based on conversations with APD and with the documents analyzed, there did not seem to be a strategic approach to advertising this funding opportunity to agencies across Oregon; While this did not impact the effectiveness of receiving proposals from multiple service areas, an analysis of the geographic location of submitted proposals indicates the possibility of some shortcomings in the original RFP outreach process. To address this, the team recommends that the IF Board first determine whether there is a need to prioritize geographic areas. While this may not necessarily be outlining specific targeted locales or communities, the IF Board should determine if APD needs to put more effort into reaching out to agencies and organizations in areas that may not be connected into the DHS network. Additionally, while submitted proposals represented a wide range of focus areas, the IF Board may consider whether there is a need to prioritize, and document whether or not service area plays a role in the evaluation of proposals. This is primarily to ensure that DHS and the Board maintains transparency throughout the RFP process. Once this is determined, the IF Board could reexamine the RFP process and determine what other networks could be used to advertise the funding opportunity. DHS Staff have

⁵ The research team acknowledges the odd result that none of the five submitted applications pertaining to services for LGBT received IF support. Due to the limited amount of information documented regarding the decision-making process, the Capstone team’s analysis found that none of these proposals appeared to be innovative or did not meet an IF objective of improving quality of life or improving cost-efficiency.



already identified several outlets that they intend to use. APD staff should use the wide networks of other DHS agencies as well as the networks of those on the IF Board.

Phase 3: Applicants Develop and Submit Proposals

Another aspect of inclusiveness of the funding opportunity assessed whether or not the application requirements were burdensome for applicants. A complex application process may discourage agencies that have an unmet need or an idea from applying if they do not have the capacity or resources to apply for funding. In many cases, smaller agencies or those in rural areas have limited staffing and are unable to take on the additional task of developing a complex application.

According to interviews conducted with representatives from funded projects, the application process did not seem to be overly burdensome for applicants, at least in comparison to other funding opportunities offered by the State. After interviewing eight of the nine funded proposals, the majority of interviewees expressed that the application was straightforward and similar to other grant proposals, though some expressed that the time given to complete the application was too short. One newer organization spent more time on the proposal because it had to conduct more research and start from scratch, but it said the application was still acceptable. Some proposers indicated that they had difficulty navigating the Oregon Procurement Information Network, especially if the system was new to them.

Phase 4: IF Board Evaluates Proposals

When deciding which projects to fund, the IF Board evaluated how well the submitted proposals fulfilled the three main steps:

1. **Successful projects utilize an innovative approach to address an unmet need for seniors and/or people with disabilities.** Innovation is a critical component to the IF program because it allows for new and more effective approaches that can be replicated or up-scaled to better serve seniors and people with disabilities across the state of Oregon.
2. **Projects must demonstrate how they intend to improve quality of life and/or cost effectiveness in the delivery of services to the target population.** Measuring these outcomes is useful for the projects because they can evaluate their own progress and effectiveness in order to make adjustments as necessary. They are also important to allow DHS to be good stewards of taxpayer money by ensuring each proposal actually makes progress towards what it set out to do.
3. **Projects must align with at least one of the IF's four service goals.** Goal alignment is important because it means DHS can dedicate its limited time and funding on projects that actually advance the purpose of the IF. The four goals are listed within the following analysis.



The team carefully examined both funded and non-funded proposals to determine how well they aligned with these requirements. Overall it is evident that there is no clear consistency on how innovation, quality of life, and cost effectiveness are defined and measured, either by the IF program or the submitted proposals. However, several projects did meet many of the IF service goals.

Innovative Approach

Although the first step of the IF is to support innovative projects, there appears to be inconsistency with how the definition of innovation is communicated among the Board and how it is defined in the RFP. For example, one board member mentioned that innovation is subjective, and that the Board “just knows” when a project is innovative based on intuition and experience. During one of the meetings that the team observed, the Board also continued a discussion on what it considered as innovative, even after the first round of projects were already funded. Additionally, despite the RFP’s definition of innovation as either a new project that has not been tested or an improvement to an existing service or project, the Board had a clear preference for new projects.

This distinct difference between the funded and non-funded projects may be attributed to how the Board perceives innovation. As shown in TABLE 7 nearly 70 percent of the funded projects are brand new rather than an extension of an existing program. The largest proportion of non-funded proposals, on the other hand, are an extension of an existing program. The remaining non-funded projects are some type of needs assessment to identify an innovative intervention, or they do not clearly describe how they are innovative.

TABLE 7: INNOVATIVE PROPOSALS

	Funded		Non-Funded	
	Number	Percent	Number	Percent
New project that has not been tested in Oregon	6	67%	4	27%
Improvement to existing service or project	2	22%	5	33%
Coordination of existing services	1	11%	1	7%
Intervention will be identified after conducting a needs assessment	0	0%	2	13%
Unclear on how it is innovative	0	0%	3	20%
Total	9	100%	15	100%

Improve Quality of Life or Cost-Effectiveness

As for the second step, the submitted proposals displayed a variety of proposed measurements for improved quality of life and cost effectiveness. This may be an indicator that applicants need clarification on definitions and expectations on how to adequately measure these outcomes. Indicators for quality of life ranged from using qualitative tools such as questionnaires and self-assessments, to measuring process outputs. Indicators for cost



effectiveness were less clear, despite that most proposals claimed to make sort of improvement in this area. Nearly all of the funded proposals that intend to improve quality of life provide some sort of measurement. However, only half of the projects that intend to improve cost effectiveness provided some sort of measures. Furthermore, the quality of the proposed measures vary. Though nearly 70 percent of the funded proposals use pre and post data, less than 35 percent use some sort of control group. See TABLE 8.

TABLE 8: PROPOSED MEASURES FOR FUNDED PROPOSALS

	Number of Applicants	Percentage
Project intends to improve quality of life but does not provide measures	2	22%
Project intends to improve cost effectiveness but does not provide measures	4	50%
Use quantitative measures	3	33%
Use qualitative measures	6	67%
Use quantitative and qualitative measures	2	22%
Measure outcomes	6	67%
Measure outputs only	3	33%
Use control groups	3	33%
Use pre and post data	6	67%

Meets IF Service Goals

The final step is that projects must address one or more of the following IF service goals:

- 1) Implement early intervention to prevent or delay entry into Medicaid-funding long-term service and supports (LTSS);
- 2) Help individuals to remain in their own home or community setting of their own choosing;
- 3) Provide service equity for underserved seniors and people with disabilities; and/or
- 4) Coordinate between health systems and LTSS.

It is clear all funded projects met at least one of these goals. This is important because it demonstrates the IF Board appropriately awarded funds to projects that actually met the goals. For example, all of the funded projects met at least one goal, and many of them met two or more. Furthermore, all but two non-funded projects aligned with these goals. With the exception of the two non-funded projects that did not directly align with the intended goals,



the main difference between funded and non-funded projects is whether they were perceived as innovative by the Board. See TABLE 9.

TABLE 9: SERVICE GOALS IN FUNDED AND NON-FUNDED PROJECTS

IF Service Goals	Funded Projects		Non-Funded Projects	
Delay LTSS	8	89%	6	40%
Remain in home	8	89%	12	80%
Service equity	5	56%	8	53%
Coordination between health services and LTSS	4	44%	2	13%

Recommendation: Revisit Definition of Innovation

To help assess proposals more efficiently, the team suggests that the Board revisit how it defines innovation. Thus, potential applicants will have a clearer understanding of what the expectations are and how they will be assessed. The Board can discuss whether or not it wants to use the definition of innovation that is described in the RFP (innovation can either be a new project that has not been tested or an improvement to an existing service or project), or it can change the definition based on its preference (innovation as a new project). The key is that the definition in the RFP and the Board’s actual practice should be consistent so the application process is clear and fair.

Recommendation: Set Expectations for Proposed Measurements

There is also a wide range of proposed measurements in part because the projects had different focus areas, but also because quality of life and cost-effectiveness are not clearly defined. This will make it difficult for DHS to determine how well the IF met these objectives at a higher, programmatic level. As a result, the team recommends that DHS develop clear definitions so projects can provide better measures. One suggestion is to provide an example of an acceptable measure of an outcome. Non-funded proposals often proposed outputs rather than outcomes, so DHS could define the difference between the two in the RFP. DHS could also outline the qualities of a good measurement. For example, a strong measurement would use some type of control group, and a fairly strong measurement could use pre and post data. Setting the expectations and definitions in the RFP will help the applicants develop better measures. Additionally, as DHS considers hiring an evaluator for the IF, the evaluator can potentially work with funded projects to develop strong measures

Phase 5: IF Board Selects Projects

Given that the IF is supported by tax dollars, it is important that DHS maintains transparency



throughout the course of the project. A vital component of this analysis is the decision-making process for determining which submitted proposals got funded. The decision-making process is the point at which the IF Board evaluates how well submitted proposals aligned with DHS’s established priorities and requirements. Additionally, given the subjective nature of measuring innovation, it is particularly important that the evaluation process of IF proposals be clear and transparent, should there be objections to the scores administered by the IF Board. In assessing the current framework of the decision-making process, this analysis identifies several steps DHS should take in order to significantly foster more transparency within IF proposal evaluation.

The RFP for the first round of funding provides a brief framework for the decision-making process. Specifically, it states that “DHS will conduct a comprehensive and impartial evaluation of the Proposals received” (p. 11 RFP document) and that an Evaluation Committee will assess submitted proposals. Though not specified within the RFP, the IF Board served as the Evaluation Committee. The RFP also outlines the criteria that the Committee would use to evaluate all proposals that were submitted.

Proposals are evaluated using two types of criteria. First, each proposal must meet a number of minimum requirements such as demonstration of eligibility and inclusion of the designated proposal cover sheet. Proposals are assigned a “Pass” or “Fail” on these criteria; proposals that receive a “Fail” on any of these requirements do not move on to the second stage of evaluation, a scored methodology. DHS included a scored methodology in order to evaluate the quality of the Proposal Narrative, particularly whether the proposal satisfied the RFP requirements and whether it did so in a clear and complete manner. TABLE 10 shows how much weight was placed on each of the required narrative sections.

TABLE 10: EVALUATION CRITERIA

Criteria	Grade/Points
Eligibility	Pass/Fail
General Proposal Requirements	Pass/Fail
Technical Proposal Requirements	
Letter of Intent	Pass/Fail
Project or Pilot Design	60
Proposer Capacity and Data Collection	20
Work Plan and Timeline	10
Project Budget and Budget Narrative	10
Total	100

Source: State of Oregon, Department of Health and Human Services



While the RFP outlines clear evaluation criteria, there is little documentation of the evaluation of proposals submitted during the first round of IF funding. Each Board member was provided with considerations for evaluation, a form describing the criteria for each proposal, as well as a form that outlines how points were assigned to each proposal, allowing for comparison of all the Proposers. There are several stages of the decision making process that are not clear. Specifically, it was not determined whether each Board member scored the projects individually, or whether scores were assigned as a group. Additionally, the only available documents for review were the cumulative score sheets for the proposals, the team was unable to determine how well these score sheets reflect the Board’s true decision-making process, nor if the sheets were being used as they said they would be. This could be problematic should any non-funded Proposer choose to appeal the decision-making process.

Documentation of the decision-making process is particularly important given the focus put on determining the innovation of projects. It is difficult to quantify or measure innovation, making it even more important for DHS to demonstrate how evaluators may have assessed innovation. An analysis of the described innovation of non-funded proposals shows that these proposals did not adequately propose projects or pilots that are truly innovative. However, the lack of an explicit definition of innovation and a lack of documentation of the decision-making process makes this conclusion subjective, abstract, and speculative.

Recommendation: Create Transparent Decision-Making Processes

In order to promote transparency of the IF decision-making process, DHS needs to ensure that proper and thorough documentation is not only being kept of how proposals are evaluated, but also that they reflect the true decision-making process and are aligned with DHS’s priorities. Quantifying innovation is not easy, which makes it difficult to objectively evaluate proposals in comparison with each other. In addition to explicitly providing a definition of innovation, documentation of why an evaluator may see a project as innovative improves the accountability of the decision-making process. This is key to maintaining transparency, but also ensuring that the proposal evaluations remain aligned with IF’s goals and priorities.

Phase 6: Projects Are Implemented

After evaluation by the IF Board, selected projects developed contracts with DHS in order to receive funding, and could begin project implementation. All projects successfully began implementation in 2014 upon completion of the contracting process. Based on first-quarter project reports and interviews with project representatives, most projects have not faced significant barriers that hindered implementation. General challenges that emerged included difficulties with slow start-ups, recruiting the targeted number clients for services, and recruiting community partners for project implementation. Two projects reported frustration with the length of the contracting process, which impacted implementation. All projects that reported implementation problems reported that they were able to adapt their project design to address these challenges. Most projects kept with the measurable outcomes proposed in the



initial application. One project noted they consulted with DHS Staff to reassess their evaluation plan.

The team's analysis concluded that these were standard programmatic challenges, and are not a result of shortcomings within the IF processes. Additionally, the delay in contracting processes is likely a product of external factors outside of the control of DHS. The team had no recommendations for DHS regarding this step in the process. DHS should continue to provide support for projects and work with agencies to adjust project design as needed.

Phase 7: Project Sustainability

One of the key areas of speculation that arose during interviews with project staff was how to maintain the sustainability of the projects beyond IF support. The program was designed specifically to explore how innovative projects could serve unmet needs among seniors and people with disabilities, and the funding specifically targeted pilot projects. IF pilot projects face a dilemma in seeking out other funding sources because it is difficult to demonstrate program success with a year's worth of implementation results. Additionally, given the current structure of IF funding (i.e. projects are only guaranteed funding for one year of operation), there is a high risk that services will be discontinued after a year if they are not able to obtain outside funding or support.

As the sole funder for most of the IF projects, it is important that DHS determine how they might want to support projects in the future, beyond the initial distribution of funding. Only two of the eight interviewed IF projects currently use funding support outside of the funds provided by DHS. Additionally, several projects are currently receiving in-kind support from community partners. All projects indicated that they were planning on reapplying for IF support.

Currently, DHS has not written any sort of policy outlining proposal refunding, however staff indicated that there was an assumption that, ideally, funding would only be awarded to new proposals. However, given the lack of explicit instruction saying so, DHS intends to allow all currently funded projects to re-submit proposals for the next round of funding. It would not be sustainable for DHS to continue to fund these projects year after year. Additionally, refunding established projects year after year would not align with the goals of the IF to explore innovative ways of meeting the target population's needs. DHS should also consider that there may not be enough innovative proposals out there to maintain a model of funding new projects every year. Therefore DHS staff and the IF Board need to determine the best method of balancing IF priorities with the desire to support the sustainability of IF projects.

Recommendation: Address Sustainability

DHS needs to decide what steps it should take to ensure sustainability of the IF programs. DHS should put a policy in place outlining the protocol for providing funding support for previously



funded IF projects. It is likely not feasible for DHS to decline continued support for these projects; however it is not sustainable to maintain funding levels beyond the first year. DHS could explore a “stair-step” approach, so that funding support declines annually. With this approach, DHS would introduce a “matching” requirement for proposals seeking re-funding, in that they would have to obtain a certain amount of funds from a source outside of DHS. The required match amount could increase as funding went on, which forces projects to eventually acquire enough outside support that proposers do not need DHS support.

DHS should consider whether they are able to provide any sort of administrative support to help these projects develop funding structures that can be sustainable in the long term, without a need for DHS or IF support. Support may include provisions for dedicated staff working with individual projects, or DHS might assist projects in making connections to other funding opportunities. DHS could also consider whether they can expand the flexibility of the IF program to offer longer funding periods to promote the sustainability of successful projects.

Phase 8: Project Expansion

One of the key motivations of the IF is to support pilot projects that could possibly be expanded or replicated in other communities. The Policy Option Package for the IF states that DHS’s Advocacy and Development Unit will “...facilitate transition of successful pilots to ongoing practice and wider applications as appropriate.” However, through the team’s review of documents provided by DHS, it appears that there is no plan or strategy for the upscaling or expansion of successful IF projects.

Recommendation: Determine Role in Expansion and Upscaling

The Advocacy and Development Unit should determine what role they intend to take in facilitating the expansion and upscaling of successful projects. Projects would benefit from procedures outlining next steps and prioritization for qualifying programs. Should the intent be to take a more proactive role in facilitation, the team recommends that the Advocacy and Development Unit determine their capacity to assist with advocating for the budget and infrastructure of an expanded project within DHS.

Phase 9: Evaluation

The final phase of the process concerns the ongoing evaluation of funded projects. All projects were required to incorporate an external evaluation into their implementation plan. All nine funded projects provided adequate evaluation plans, though they had varied approaches to program evaluation and outlined different measurements and outcomes. Eight of the nine projects had identified a specific person who would conduct their evaluation, and ninth indicated they would issue an RFP upon receiving funding. Three of the projects identified evaluators from universities, three utilized other local public agencies, two contracted with a private evaluator, and the final project issued an RFP to identify their evaluator. Based on



interviews with project representatives, most projects did not have difficulty in creating an evaluation plan, though some indicated difficulty in dedicating funds specifically for evaluation. A couple of projects were able to obtain in-kind evaluation services, allowing for more funds to be used for project costs.

At the most recent IF Board Meeting, DHS staff presented the possibility of using a dedicated evaluator to possibly evaluate the whole IF program and funded projects as well. The Board considered several options including hiring an external evaluator or giving the responsibility to an internal staff member. Members also discussed the pros and cons of using one evaluator for all funded projects, noting that this would be difficult given the variety of focus areas of service among the projects. As of this analysis, there was no decision made about hiring a program-wide evaluator.

Recommendation: Develop evaluation framework for the Innovation Fund

The process evaluation started in this analysis is the first step towards a robust program evaluation of the IF. DHS should create a standardized program evaluation framework for both the IF as a whole, and for all IF projects. Using a standardized framework will help DHS to more efficiently demonstrate how well the IF program is meeting the desired goals and objectives. Additionally, creating a standardized framework would allow DHS to provide more assistance to potential projects in identifying potential measurements and outcomes. The Capstone Team has provided an example framework of an approach DHS could potentially use and apply to the IF in the next section.

Next Steps

Recommendation Summary

TABLE 11: RECOMMENDATIONS AND PRIORITIES

Priority	Recommendation
Most Critical	Create policy for refunding projects
	Determine DHS role in providing administrative support for project sustainability
	Revisit definition of innovation
	Create RFP outreach strategy (determine priorities and expand network)
Critical	Develop evaluation framework for the Innovation Fund
	Create transparent decision-making process
	Set expectations for proposed measurements
	Determine DHS role in expansion and upscaling of successful projects

In this section, the UO Capstone Team has constructed a priority ranking system for each of the established recommendations. These have been ranked by level of importance to encourage the Innovation Fund (IF) to focus on the highest priorities first. The highest priorities bear the most weight for upcoming decisions which are crucial to the next round of funding.

Most Critical - Recommendations have been given a high priority for critical reasons.

1. ***Create policy for refunding projects*** - Leaders from the various funded projects had questions in regard to how the projects will be able to sustain themselves in the future and whether or not they will be able to be refunded in the upcoming year. Because the IF Board is currently developing the RFPs for the next round of funding, it is important that this policy is discussed and set quickly.
2. ***Determine Department of Human Services (DHS) role in providing administrative support for project sustainability*** - It is vital that DHS determines how the IF and the Advocacy and Development Unit will be able to help projects become more self-sufficient in the future, and to what specific degree they would like to offer support in the development and maintenance of projects. Establishing this upfront will prevent confusion and clarify each entity's role.
3. ***Revisit definition of innovation*** – The team also recommends that DHS establishes a clear and consistent definition of innovation. Establishment of this definition will



prevent projects that do not meet this definition from applying and will also leave no room for confusion or subjectivity in regard to the question of ‘*what is innovative?*’.

4. **Create RFP outreach strategy (determine priorities and expand network)** - The team considered the outreach strategy to be a high priority because the next round of RFPs will be administered soon and it is essential for IF to determine whether or not there will be greater effort to make the RFPs more inclusive geographically and to organizations that may exist outside of the DHS social loop.

Critical - The following recommendations are critical but less time sensitive compared to those listed as most critical.

1. **Develop evaluation framework for the Innovation Fund** - Establishment of an evaluation framework will likely be a long process. The earlier the IF can begin this development process, the more likely that projects will be equipped to abide by the standards and expectations set by the IF.
2. **Create transparent decision-making process** - The new round of RFPs is scheduled to be issued in the near future, thus it will be essential to begin working on making revisions to the established system and protocol, in order to build a robust and transparent decision-making process.
3. **Set expectations for proposed measurements** - Overall, the team found that funded projects proposed adequate measures to determine outcomes; however, they lacked consistency in quality. This is something that can be addressed through the establishment of an evaluation framework.
4. **Determine DHS role in expansion and ‘scaling up’ of successful projects** - This is a necessary component for the IF to determine in the future, however it will take some time before currently funded projects will show results worthy of expansion or upscale. It will likely take more than one year of implementation to determine the project’s success and degree of external validity.

Recommended Program Evaluation Approach: The Social Innovation Fund

In light of the above recommendations, the UO Capstone Team suggests that DHS and the IF will benefit from developing an evaluation framework. A framework can guide current and future funded projects in their development, including their plans to measure outcomes. This framework would provide a clear picture of the IFs’ expectations for an ideal approach to evaluation and provide a clear way for projects to assess whether or not they are producing desired outcomes and meeting project goals. A solid understanding of their successes and failures can allow projects to go back to the drawing board and make adjustments as needed. The following section provides an example of an evaluation framework that is currently in place for a federal innovation fund similar to the DHS Innovation Fund.

The Social Innovation Fund (SIF) is a federal initiative implemented by the Corporation for National and Community Service. SIF provides funding to organizations that support innovative projects and programs that demonstrate impact, identifies project components that work, and



looks for ways they can be improved. The SIF supports best practices and encourages the proliferation of evaluation. A discussion of SIF's suggested evaluation components, which can be found on their website, is included in this section.

Social Innovation Fund Evaluation:

The SIF categorizes projects based on a 3-tier evaluation system.

Preliminary evidence - projects in this tier show a logical hypothesis that is supported by credible research. An example would be a study that has tracked participant responses and measurable outcomes after participants have been through the program.

Moderate evidence - projects in this tier show evidence supporting causal conclusions. An example of a study that supports causal conclusions, is a well-designed experimental or quasi-experimental study that shows the effectiveness of the program or strategy.

Strong Evidence - projects in this tier show evidence from studies that support causal conclusions and have had enough participation to provide confirmation that 'scaling up' regionally or nationally may be appropriate. For example, the project should have more than one well-designed and implemented experimental or quasi-experimental study that supports effectiveness.

SIF has created a guide to assist grantmaking entities and innovative projects establish an evaluation framework by which the above tiers are judged. SIF uses the criteria in the evaluation plan guide to score projects and make its funding decisions; it establishes a universal framework for evaluation, and is intended to be used by SIF grantees, sub grantees and evaluators. However, as the DHS Innovation Fund is a state-funded initiative with characteristics similar to SIF, it will be beneficial to take heed of the already established framework in an effort to improve the DHS Innovation Fund in its early stages of maturation. The major components of the evaluation plan guide will be discussed as they are applicable to the UO Capstone Team's recommendations for the DHS Innovation Fund⁶.

The Logic Model

The DHS Innovation Fund may benefit from the use of the logic model tool, as suggested by the SIF. A logic model is a visual tool to present your project design, using words and graphics to present project resources, what you plan to do with them, and results expected to be achieved (W.K. Kellogg Foundation, 1998). Elements focus on a cause and effect relationship, which link inputs to desired outcomes. Inputs and activities have clear paths to various outcomes, and measurable outcomes are emphasized.

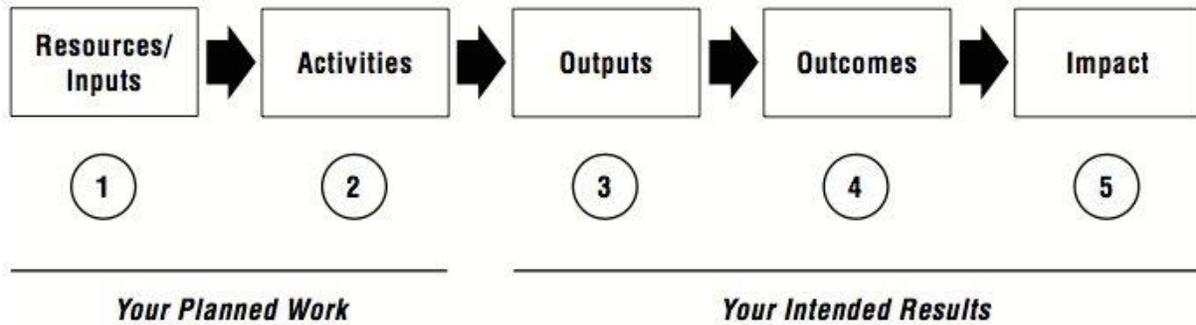
The UO Capstone team found that many project proposals used outputs in place of outcomes, although the IF application clearly requested a description of outcomes. The creation of a logic model could benefit each project will enable management to clearly sort out program design and desired outcomes. Encouraging IF applicants to include a logic model within the proposal

⁶ For future reference, the guide and more information on the SIF may be found on their website.



can ensure projects have thoroughly deciphered the details of project implementation and have distinguished between program inputs, outputs and outcomes. A logic model will also affirm the program design by drawing connections from the program resources, to activities (or interventions), to results and outcomes. See FIGURE 3.

FIGURE 3: LOGIC MODEL



Source: W.K. Kellogg Foundation, 1998

Research Questions and Approach

The SIF guide suggests that plans for evaluation include research questions that are measurable and can be answered through empirical evidence. Conducting a thorough evaluation means looking at both the outcomes as well as the process. Evaluations designed by SIF typically reflect impact (outcomes) and implementation (process). Impact evaluation questions look at the outcomes that will be experienced by program participants or beneficiaries.

Implementation evaluation questions focus on the processes involved with program operation. Research questions and the logic model developed in accordance with one another will ensure impact evaluation measures the correct outcomes and program implementation is monitored accurately.

The design of an impact study validates an intervention’s responsibility for changes experienced by participants or beneficiaries. The strength of an impact evaluation can be determined by the extent to which it yields internal and external validity. For example, a design that yields a high level of internal validity, but lacks strong external validity can be considered as moderate evidence. Internal validity exists if it is determined changes are caused by the intervention rather than other possible factors. External validity refers to the study’s ability to show that the change made by the intervention is replicable to groups outside the study group, or the degree to which it is generalizable.

The IF, at this early stage of operation, has minimum standards for evaluation. Encouraging project applicants to establish a framework for evaluation that focuses on both process and outcomes will help projects to establish a system of checks and balances that will ultimately provide greater accountability. This approach will also point out how studying the program will



expand evidence of the program’s effects, and how the study may contribute to the types of evaluations that will be needed in the future. This can be important in considering whether or not projects may have the capacity to be scaled up to a regional or state level.

Measurements

The team found that IF-funded projects varied in the quality of their proposed outcome measures. Requiring or encouraging applicants to use measurements that are based on established standards may alleviate this concern. The SIF guide explains that program evaluation may take on multiple components including the analysis of program implementation, program outcomes and program impact. Other types of evaluation include cost-benefit and cost-effectiveness analysis. Measures selected need to be reliable, valid, and appropriate for the study. Poor measures can lead to false results, inaccurately explaining the effects of a program. A measure that is reliable should yield the same results when used with the same group of people time and time again. A measure is valid if it reflects and matches the concept under consideration.

SIF recommends that if measures are to be in the form of a survey, test, interview, or structured observation, the following considerations should be explained:

- The intended respondents
- The proposed administration method
- The number of questions included
- The anticipated administration time
- How the questions are organized and worded
- The response categories used
- Potential score/response ranges

SIF recommends that if the measures are to be based on an existing data set such as program records of services provided, public data sets and patient records, then the following points should be described:

- The proposed data source;
- When the data were collected and by whom;
- Who funded the original data collection;
- The type of data provided by the data source
(for example: Is this medical data for each patient, or are they aggregate? Are the data provided as counts or percentages?)

Evaluator Qualifications and Independence

The DHS IF Board is in the process of determining whether or not they will hire an internal evaluator. The SIF recommends that evaluation be conducted by an individual or team of evaluators who have a skill set that is in alignment with the type of program or project they are

assessing and the proposed evaluation design that is proposed. The following points in regard to evaluator qualification and independence should be considered, both for the DHS IF internal evaluator, as well as for future IF-funded projects as they hire external evaluators:

- Evaluators should have experience with content similar to the proposed project and experience with the specific type of evaluation that is proposed.
- It should be verified that the evaluator can handle the size and scale of the evaluation.
- The evaluator’s independence from the project will need to be established in order to assure that their opinions of outcomes and impacts are unbiased.
- Staff will need to provide oversight to ensure the evaluation is being conducted according to desired standards.
- Any conflicts of interest should be disclosed and mitigated.
- Plans should be set that determine when evaluation findings will be released and whether or not the evaluator has the ability to release their findings independent of the project.

The aforementioned evaluation guidelines are excerpts from the SIF guide, which goes into much more detail describing the SIF recommended evaluation criteria and framework from start to finish. The criteria discussed in this report are those we found most applicable to the DHS Innovation Fund within the scope of this Capstone project.

Conclusion

The Department of Human Services' (DHS) Innovation Fund (IF) is breaking the mold with its effort to fund innovation in a sector. It is uncommon for the government sector to partake in such an enterprise, although this approach is needed to advance toward solving societal challenges, especially in the social services. By and large, the IF is administering a valuable service by affording a chance for untested programs and projects the opportunity to show their potential effectiveness. There may not be another way to fund such new projects without the support of the IF.

The IF is still early in its development and implementation and ultimately trial and error will lead to more solid policies and procedures. Addressing issues early on will add value to the program and continue it on a successful trajectory. IF and its funded projects have the potential to lead a movement toward social innovation in Oregon, and provide a platform for successful programs to be scaled up. UO Capstone Team's recommendations were made after extensive assessment of the IF funding process, project proposals, interviews and other data analysis. In all possible cases, findings were compared to best practices.

The fund is thus far doing an excellent job bringing in proposals for a variety of innovative projects that span a wide range of focus areas. The work IF is doing fulfills a crucial public service that is greatly beneficial to the state of Oregon, and the UO Capstone team looks forward to seeing this work thrive in coming years.

References

- American Evaluation Association. (n.d.). *Readings*. Retrieved February 20, 2015 from: <http://www.eval.org/p/cm/ld/fid=98>
- Arends, I., Bültmann, U., Nielsen, K., van Rhenen, W., de Boer, M. R., & van der Klink, J. J. (2014). Process Evaluation of a Problem Solving Intervention to Prevent Recurrent Sickness Absence in Workers with Common Mental Disorders. *Social Science & Medicine*, *100*, 123-132.
- Behrens, T. R., & Kelly, T. (2008). Paying the Piper: Foundation evaluation capacity calls the tune. *New Directions for Evaluation*. Vol 199, p 37-50.
- Binns, C. (2012). Governing Innovation . *Stanford Social Innovation Review* (Winter), 59-60.
- Brown, M. (2015). Innovations Fund Background Context Rationale.
- Carlson, J., Kelley, A. S., & Smith, K. (2010). Government Performance Reforms and Nonprofit Human Services: 20 Years in Oregon. *Nonprofit and Voluntary Sector Quarterly* , *39* (4), 630-652.
- Carman, J. G. (2009). Nonprofits, Funders, and Evaluation: Accountability in Action. *The American Review of Public Administration* , *39* (4), 374-390.
- Chelimsky, E. (2001). What Evaluation Could Do to Support Foundations: A framework with nine component parts. *American Journal of Evaluation*, *22*(1), 13-28.
- Congress of the United States Congressional Budget Office. (2013). *Rising Demand for Long-Term Services and Supports for Elderly People*.
- Corporation for National & Community Service. *Social Innovation Fund Evaluation Plan Guidance*.
- Davidson, P. (2013). Aging Population, Health Care Costs, and the National Debt. *Challenge* , *56* (4), 22-25.
- DHS (2010). "Seniors and People with Disabilities." Oregon Department of Human Resources Seniors and People with Disabilities, Salem OR.
- Department of Human Services Aging and People with Disabilities Program. (2015). *Senate Bill 21 Final Report*.
- Gais, T., Strach, P., & Zuber, K. (2014). *Poverty and Evidence-Based Governance*. State University of New York, The Nelson A. Rockefeller Institute of Government.
- Gates Foundation (2015). *How We Work*. Bill and Melinda Gates Foundation. www.gatesfoundation.org.

- Harrell, D. (2004). *Background Brief on Program Evaluation*. State of Oregon, Legislative Committee Services.
- Hendricks, M., Plantz, M. C., & Pritchard, K.J. (2008). Measuring Outcomes of United Way-Funded Programs: Expectations and Reality. *New Directions For Evaluations* , 119 (Fall), 13-35.
- Knickman, J. R., & Snell, E. K. (2002). The 2030 Problem: Caring for the Aging Baby Boomers. *Health Services Research* , 37 (4), 849-884.
- Linnell, D. (2015). "Process Evaluation vs. Outcome Evaluation." Third Sector New England, Boston MA. Accessed on 04/2015 at <http://tsne.org/process-evaluation-vs-outcome-evaluation>.
- Marquis, C. (2000). Innovation Funds for Universities. *Fund for University Quality Improvement, Argentina*.
- Milstein, B., & Wetterhall, S. (2000). A Framework Featuring Steps and Standards for Program Evaluation . *Health Promotion Practice* , 1 (3), 221-228.
- Mulgan, G., & Albury, D. (2003, October). Retrieved January 28, 2015, from <http://www.childrencount.org/documents/Mulgan%20on%20Innovation.pdf>
- Oregon DHS. (2013). 2013-15 Policy Option Package.
- Oregonlaws.org. (n.d.). *State Policy for Seniors and People with Disabilities*. Retrieved May 8, 2015, from oregonlaws.org: <http://www.oregonlaws.org/ors/410.010>
- Ortman, J. M., Velkoff, V. A., & Hogan, H. (2014). *An Aging Nation: The Older Population in the United States*. U.S. Department of Commerce, Economics and Statistics Administration. U.S. Census Bureau.
- Patton, M. Q. (1994). Developmental Evaluation . *Evaluation Practice* , 15 (3), 311-319.
- Pendall, R., Freeman, L., Myers, D., & Hepp, S. (2012). *Demographic Challenges and Opportunities for U.S. Housing Markets*. Economic Policy Program Housing Commission . Bipartisan Policy Center.
- Phone Interview with Max Brown (04/09/2015).
- Plantz, M. C., Taylor Greenway, M., & Hendricks, M. (1997). Outcome Measurement: Showing Results in the Nonprofit Sector. *New Directions for Evaluation* , 76 (Fall), 15-30.
- Poole, D. L., Nelson, J., Carnahan, S., Chepenik, N. G., & Tubiak, C. (2000). Evaluating Performance Measurement System in Nonprofit Agencies: The Program Accountability Quality

Scale (PAQS). *American Journal of Evaluation* , 21 (1), 15-26.

Social Innovation Fund (2015). Access from <http://www.nationalservice.gov/programs/social-innovation-fund/evidence-evaluation>.

State of Oregon Department of Human Services. (2014, May 8). Request for Grant Proposals. *Innovative Projects and Pilots for Services to Seniors and People with Disabilities RFPG #3768* . The State of Oregon Department of Human Services.

W.K. Kellogg Foundation . (1998). *Logic Model Development Guide*. Battle Creek: W.K. Kellogg Foundation .

Wisely, D. S. (2002). Parting Thoughts on Foundation Evaluation. *American Journal of Evaluation*, 23(2), 159-164.

Appendix

I. Acronyms

APD	Aging and People with Disabilities
DHS	Department of Human Services
IF	Innovations Fund
LTSS	Long Term Support Services
RFP	Request For Proposals
SIF	Social Innovation Fund

II. Proposal Matrix

Project	Geography	New Program	Unmet Need	IF Goals			
				Well-being/ independence	Choice and Dignity	Delay LTSS	Remain in home
Volunteers of America Oregon (Adult Day Centers)	Portland	New Program	No existing community based services for dementia - allows them to get services while remaining at home; and more resource for their caregivers	X			X
Multnomah County (HUB Project)	Multnomah County	Coordination of existing programs	Clients with acute/chronic medical needs, substance abuse disorder and/or mental illness and unstable housing that currently not qualify for ADS long term services and supports	X		X	X
SAVO (Special Advocates for Vulnerable Oregonians) (Guardianship)	Multnomah County	New program	1,500 adults under courtappointed adults - 150-200 new cases annually; starting with new services; monitoring guardianships and fiduciaries; volunteers do the training and monitoring of guardians	X	X	X	X
Rogue Valley Council of Government (Lifelong Housing)	Rogue Valley/Jackson county	New program	Accessibility of seniors and disabled within their homes	X	X	X	X
Clackamas County Social Services (Transport)	Clackamas County - Pilots in Lake Oswego and a rural area	New program	Helps seniors to remain living independently, develop better transportation options, more accessible rideshare; addresses inadequate transport options	X	X		X
Oregon Cascades West Council of Governments (ER/Intensive care management)	Linn County - urban and rural	New component of existing program	Targets those who are a high-cost to health system that they don't have the time/resources to dedicate to this population	X	X	X	X
City of Sandy (Oral Health) (Mobile clinic)	Clackamas	Expansion of existing program	Improve oral health: convenience for seniors; access to care is difficult for seniors; Medicare and OHP don't cover a lot of dental services	X		X	
Community Action Team (Lend a Hand)	Based out of St. Helens - Tillamook, Clatsop, and Columbia Counties	Unknown	Home repairs; Accessibility, health, and safety - generally people (seniors, veterans, people with disabilities) who otherwise don't have support to make these repairs	X	X	X	X
Oregon Oral Health Coalition (Dental Training)	Clackamas - 5 different facilities	New program	Improve oral health: focus on early detection and education			X	



(Proposal Matrix Continued)

Project	Organizational Capacity	Quality of Life Indicators	Cost Effectiveness	Evaluation Plan
Volunteers of America Oregon (Adult Day Centers)	Uses administrative; hiring people to do the therapies	Tracking behaviors; indicating whether they can stay in their house; surveys with family members, more resources for caregivers	No great indicators - just presents what the expected costs of treating this population would be outside of this program	Conduct RFP to get evaluator - attend meetings, conduct interviews, create feasibility for expansion, analyze quantitative data
Multnomah County (HUB Project)	1.5 FTE are dedicated to coordination and case management; also contracting out services with two other agencies	control vs treatment group to see if there's a difference in services; remaining in home; coordination of partners, service equity	Comparing health care utilization and costs of HUB and control group both at start and after 1 year	ID'd researcher at Portland State who will conduct the evaluation. Work with hub to develop interview questions and work with clients and help guide project staff and team in quantitative data collection
SAVO (Special Advocates for Vulnerable Oregonians) (Guardianship)	New volunteers, unsure if new staff	Interviews with clients; monitoring reports (by volunteers); resources for guardians; quantitative counts of other services/case management	Fewer hospitalizations; does not enter LTSS (case files, court documentation); fewer reports of abuse/neglect; volunteer reports	\$20,000 allocation - listed a person - MWESB
Rogue Valley Council of Government (Lifelong Housing)	Unsure	Developing cost-benefit tool - that shows how repairs impact quality of life	Developing cost-benefit tool	Contract with Susan Duncan - person IDed - spend \$2,400
Clackamas County Social Services (Transport)	Hiring .5 FTE Project Coordinator	All self reporting - perceptions in ability to use transportation, improvement of QoL, greater sense of community; ability use/understand technology	Nothing listed	County Public Health Dept provides epidemiologist - the evaluator is in-kind
Oregon Cascades West Council of Governments (ER/Intensive care management)	New intensive case manager, unsure if any other new	monthly likert scale (self-report); communication b/t medical providers and case management	decrease in treatment costs - measure engagement of participants	External evaluation - assistance through OHSU, no funding allocated
City of Sandy (Oral Health) (Mobile clinic)	Not clear - using staff and getting volunteers	Written evaluations from clients; follow up phone evaluation a month after (qualitative)	nothing listed about how, but say they will reduce costs	- Clackamas Cty Public Health - agreed to evaluation - donated in-kind
Community Action Team (Lend a Hand)	Unclear - budget is vague and broad	number/type of projects completed	possible reduction in trips to ER and doctor visits; avoid chronic illness? (collecting hospital data)	Identified the agency who will conduct the evaluation (area agency on aging) - asking them to develop list of expectations they want to see from the pilot
Oregon Oral Health Coalition (Dental Training)	Using existing staff; hiring project manager		Mostly just processes outputs - kind of leaning towards early intervention...	external evaluation - already identified - 3% of budget - OHSU school of dentistry

III. Interview Summary

Project Interview Themes:

Implementation was slow for some (due to administrative logistics, timing complications with partners). They also had some challenges in meeting their target clientele numbers.

While all projects are designed to address both cost-effectiveness and improved quality of life, there is no consistency in proposing measures that adequately measure improved cost-effectiveness. Two projects did not provide any measure and others provided general measurements that may indirectly show reduced cost but do not explicitly show improved cost-effectiveness.

Most projects have kept the outcomes they initially proposed in their applications.

Most agencies are already tracking demographic information, and those who are not recognize the need to track this information.

Only two of the eight funded projects utilize outside funds for program operations. Many rely on in-kind donation of staff time and involvement from partner agencies.

A possible solution suggested by a project is to create a “stair-step” support so that funding declines annually, to help the projects become more self-sufficient and autonomous. Also, matching grant requirements could be required in the application process for re-funding projects.

All projects have a vision for expanding their program, if funding was not an issue.

Most projects have experience with program evaluation but some did not have experience with external evaluation. There is a varying degree of difficulty in getting evaluators: some projects had no difficulty but others had challenges. There is also a varying degree of involvement from evaluators, which also impacts the costs.

It is a challenge for projects to implement programs with uncertainty of the future funding.

All projects stated enough money for basic implementation; however, one project said it was not enough to hire an external evaluator. One project says it has enough funds because of the amount of in-kind donations they are receiving.

Five projects heard about the RFP through “word of mouth,” two through listservs, and one project was unsure how they heard of the opportunity.

Projects spend varying amounts of time on the applications, mostly depending on the capacity of the agency.

Projects would like to see a smaller application for the smaller grants and a better definition of innovation. They would also like to know next steps and opportunities for future funding.

All projects said they would reapply. One did say they would want to but would need to deal with external barriers and would base their application on building on the base they built. Another said they would apply for the larger grant.

Board Member Interview Themes

The “same old people” applied for grants.

The decision-making process was fair but the priorities changed during the rankings. Clarification of the process and priorities will be helpful.

IV. Innovation Fund Logic Model

Inputs	Outputs	Outcomes Short	Medium	Long
<p>\$2.3 million allocated from State of Oregon</p> <p>Advocacy and Development Unit</p> <p>Community Partners</p> <p>DHS Office Resources</p> <p>Eight Board Members</p> <p>ORPIN</p> <p>Three Staff</p>	<p>Nine Grants Funded</p> <p>Number of Participants Served Projects</p> <p>Number of Counties Served by Projects</p>	<p>Project Outcomes</p> <ul style="list-style-type: none"> • Transportation Provided • Guardians Monitored • Dental Care Given • Home Repairs Completed 	<p>Health systems and LTSS are coordinated.</p> <p>Individuals remain in the living setting of their choosing.</p> <p>Prevention or delayed entry into LTSS.</p> <p>Underserved populations are reached.</p>	<p>Seniors and people with disabilities will achieve well-being through opportunities for community living, employment, family support, and services that promote independence, choice, and dignity.</p>