**DRAFT**

**III. Applicant Evaluation and Performance Measurement Plan**

1. **Background**

The purpose of this evaluation plan is to improve TBOHA performance measures related to Examination of Immigrants and Refugees, with an emphasis on improving examination initiation, examination completion within 90 days, and LTBI treatment initiation. The national TB objectives on examination of immigrants and refugees can be accessed at: <https://www.cdc.gov/tb/programs/evaluation/indicators/default.htm>

On July 1, 2018, TBOHA changed the funding formula by which local public health jurisdictions are paid for their work to prevent TB, and a direct payment of $300 per B-waiver immigrant or refugee notification received was initiated. This change was made to ensure LPHAs have resources to support B-waiver follow-up. The new funding method aligns with the funding principles for state and local public health authorities (LPHAs) outlined by the Oregon’s Public Health Advisory Board.

This program evaluation will compare 1) rates of medical evaluation initiation within 30 days and 2) evaluation completion within 120 days before and after the payment began on July 1, 2018. This evaluation will use a pre/post intervention trend analysis comparing the probability of outcomes before and after payment initiation. Preliminary findings will inform secondary data collection; secondary data collection will likely involve key informant interviews or surveys of LPHA staff and administration to indicate possible reasons for findings or identify strategies for subsequent intervention. The findings of this program evaluation will (1) assess the effect of direct payment on B-waiver evaluation and completion rates (2) explore the factors underlying any effect and (3) inform subsequent interventions to magnify effect.

**Goals & Objectives**

**Goals:** To determine if paying LPHAs for each B-waiver notification received improves performance LPHA performance on NTIP indicators. To explore interventions to amplify or mitigate effect.

**Objectives:**

1. Analyze B-waiver time to medical evaluation initiation and time to evaluation completion before and after implementation of payment policy. Compare rates.
2. Analyze data using pre/post payment trend analysis to compare probability of outcomes.
3. Identify key informants at among LPHA staff and administration.
4. Complete qualitative data collection to explore reasons for analytic outcomes.
5. Based on outcomes and qualitative factors, explore subsequent possible interventions to amplify or mitigate effect of payment.

**Corresponding NTIP Indicators**

Examination of Immigrants and Refugees:

* Examination Initiation (Immigrants and Refugees with Abnormal Chest X-rays Read Overseas as Consistent with TB Who Initiated Medical Examination Within 30 Days of Notification)
* Examination Completion (Immigrants and Refugees with Abnormal Chest X-rays Read Overseas as Consistent with TB Who Completed Medical Examination Within 120 Days of Notification)

1. **Program Evaluation Plan**

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| --- | --- | --- | --- | --- |
| **Step** | **Indicators/Deliverables** | **Data Source** | **Method for Data Collection and Analysis** | **Target Date** |
| 1. Develop logic model | Logic Model | EDN | B-waiver data reporting  Calculate rate of initiation and completion | 3/2020 |
| 1. Develop analysis plan | Analysis plan |  |  | 4/2020 |
| 1. Compile and clean data | Data periods:  2012-2018 and 2018-2020 | NTIP, Orpheus, EDN | EDN data, NTIP indicators | 7/2020 |
| 1. Preliminary data analysis | NTIP initiation rate  NTIP completion rate | NTIP, Orpheus, EDN | EDN data, NTIP indicators | 8/2020 |
| 1. Refine analysis plan if needed, develop survey or interview questions | Refined plan, survey or interview tool |  | EDN data, NTIP indicators | 9/2020 |
| 1. Identify & contact key informants among LPHA staff and administration | Informant list | Informant list | Survey/interview | 9/2020 |
| 1. Collect survey data | Raw data | Informant list | Survey/interview | 10/2020 |
| 1. Analyze survey data | Cleaned data set | Survey/interview data | Survey/interview | 11/2020 |
| 1. Complete & submit report | Final report |  |  | 3/2021 |

1. **Data Management Plan**
   1. Line list data of investigations not meeting the NTIP objectives will be accessed from SAMS via a secure login. Line list data do not include any personally identifiable information (PII)
   2. Surveillance data for patients with active TB disease will be collected by and accessed from the Orpheus via a secure login. These data will not be disseminated outside of the state TB program.
   3. B-waiver notification data will be accessed via secure SAMS login from the Electronic Disease Notification system. Data for analysis will be download and saved to a secure, password-protected file structure behind the Oregon Health Authority firewall.
   4. LPHA point-of-contact information will be collected by utilizing already developed contact lists collected by TBOHA.
   5. Point-of-contact information will be stored in a secure folder within a programmatic shared drive. Access to this drive is only granted to state employees within the state TB program.