

The Basics of Results-Based Accountability (RBA)

Disly Juarez, MPH

Joseph Truong, MPA

Karen Swanson, PhD, ScM

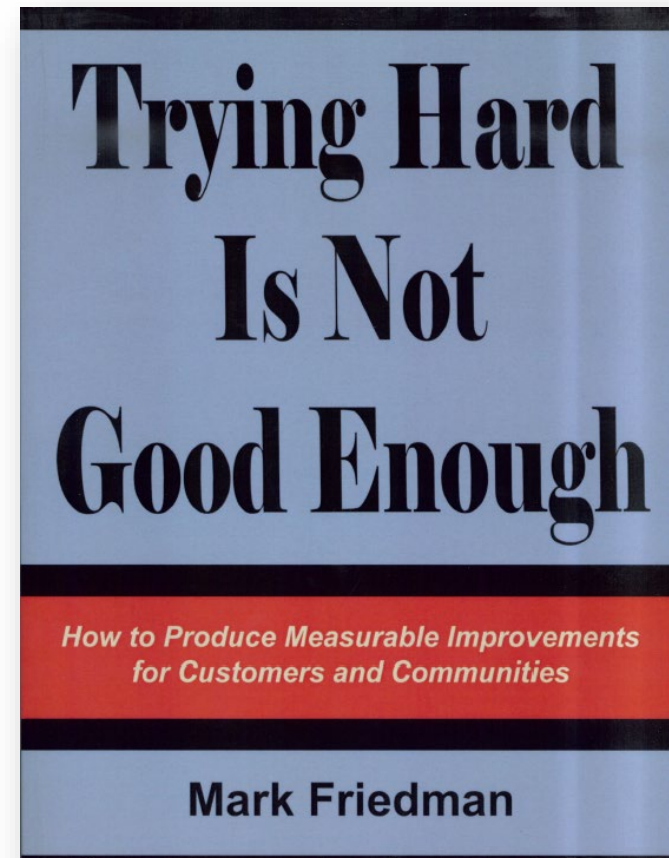
Quality Improvement & Accreditation Program



Results-Based Accountability (RBA)

This is a “how to” book on accountability for public and private sector agencies, school districts, cities, counties, states, and nations. It is an antidote to all the overly-complex and jargon-laden methods foisted on us in the past.

Mark Friedman

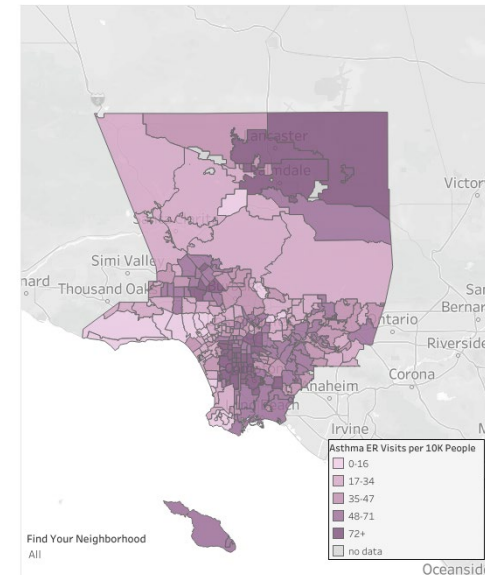


What is Results-Based Accountability (RBA)?

A disciplined way of thinking and taking action...

- To make the conditions of well-being more equitable for children, youth, families and the whole community, AND
- To improve the quality and effectiveness of programs, agencies, policies and service systems.

Asthma-Related ER Visits in LA County Neighborhoods
Average Number of Visits per 10,000 People
Source: CalEnviroScreen 3.0 (2017)



Results-Based Accountability Framework

is made of **two parts**



**Whole
Population**



Population Accountability

The well-being of **Whole Populations**
Communities, Cities, Counties,
States, Nations

Tracked by Population
Indicators.

**Client
Population**



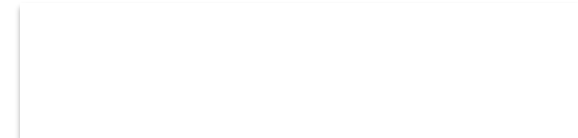
Performance Accountability

The well-being of **Client Populations**
Programs, Organizations, Agencies,
Service Systems

Tracked by Performance Measures.



Why Distinguish Population from Performance Accountability?



1. Doing the right things?

**RESULT
&
INDICATORS**

*A question
of*
ENDS

**A STRATEGY
&
PERFORMANCE MEASURES**

versus
MEANS

2. Doing things right?

Population Accountability (Whole Population)

R Result

- **A condition of well-being; an outcome we want**
 - Children Are Born Healthy
 - Children Are Ready for School
 - Everyone in the Community is Safe

I Indicator

- **A measure of a result**
 - Rate of low-birth weight babies
 - Percent ready at K entry
 - Crime rate

Performance Accountability (Client Population)

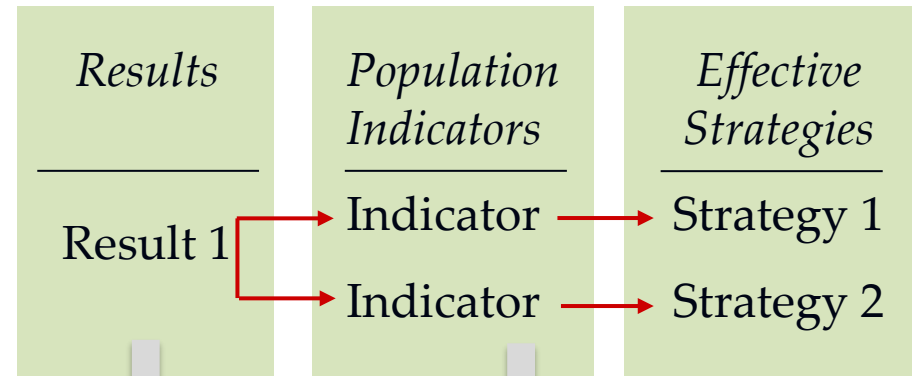
P Program

- **How services are provided to people**
 - Agency or Organization
 - Non-profit or for-profit
 - Formal or informal

PM Performance Measure

- **A measure of a program or service**
 1. How much did we do?
 2. How well did we do it?
 3. Is anyone better off?

Population Accountability



Examples of Results

- Angelinos live lives free of alcohol addiction
- Angelinos eat in safe restaurants
- Children are covered by health insurance

Examples of Population Indicators

- % of students who had at least one drink of alcohol in the past 30 days
- Rate of foodborne illness hospitalizations each year (per 100,000)
- % of children covered by health insurance

Community Results

Christchurch, New Zealand

The City is Well-Governed

The City and its People are Prosperous

The City and its People Value and Protect Nature

People in the City are Healthy

Communities in the City are Inclusive and Diverse

The City Values and Foments Recreation, Fun and Creativity

People in the City are Safe

People in the City Enjoy Lifelong Learning

The City is Attractive and Well-Designed



Understanding Progress on a Result

People in the City are Healthy (Result)

Population level measure
to assess progress for Result (Indicator)

Low Birth Weight

Diabetes Rate

Access to Medical Home

Air Quality Index > 100



Indicators Quantify Progress for Results



Populations Level Indicators are collected from community level data sources:

- Census
- Department of Education
- Department of Public Health

Indicators are not collected from agency/program/client data

Criteria for Choosing Indicators

Communication Power

Does the indicator communicate to a broad range of audiences?

Importance Power

Does the indicator say something of central **importance** about the result?
Does the indicator bring along the data **herd**?

Data Power

Quality data available on a timely basis? Is it cost effective to produce and do we have it?

Three Part Indicator List

Headline Indicators



- 3 to 5 “Headline” Indicators
- What this result “means” to the community
- Meets the Public Square Test

Secondary Indicators



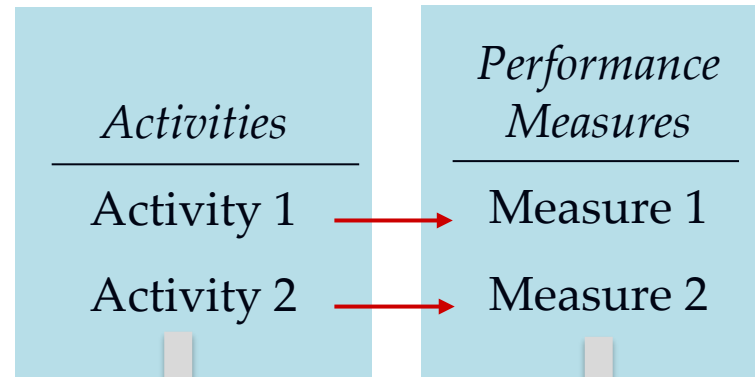
- Everything else that's any good
- Used later in the Story Behind the Curve

Data Development Agenda



- New Data
- Data in need of repair (quality/timeliness)

Performance Accountability



Examples of Activities

- Completing Investigations
- Performing Surveillance
- Engaging Partners

Examples of Performance Measures

- % of outbreaks investigated within standard timeframe
- % of children under 6 years who participate in the State Immunization Registry
- % of coalition members who attended the meeting

RBA's 3 Kinds of Performance Measures

Performance Accountability

Answers 3 different questions about a program's activity:

- 1) How much did we do? (quantity)
e.g., # of foster children served
- 2) How well did we do it? (quality)
e.g., % of foster children placed in their original neighborhood/school catchment area
- 3) Is anyone better off? (impact on the customer)
e.g., % of foster children in stable living arrangements after 6 months in care

Quantity

Quality

**How
Much**

did we do?

(#)

**How
Well**

did we do it?

(%)

Effort

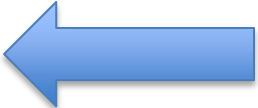
How hard did we try?

Effect

Is anyone better off?

Performance Measures Categories

	Quantity	Quality
Input / Effort	<p>How Much Did We Do? (#)</p> <p><i>(Least Important)</i></p>	<p>How Well Did We Do It? (%)</p> <p><i>(2nd Most Important)</i></p>
Output / Effect	<p>How Much Change? (#)</p> <p><i>(3rd Most Important)</i></p>	<p>Quality of Change? (%)</p> <p><i>(Most Important)</i></p>



HOW MUCH measures

<u>How much did we do?</u>	<u>How well did we do it?</u>
# Customers served (by customer characteristic)	% Common measures Workload ratio, staff turnover rate, staff morale, percent of staff fully trained, worker safety, unit cost, customer satisfaction: <i>Did we treat you well?</i>
# Activities (by type of activity)	% Activity-specific measures Percent of actions timely and correct, percent clients completing activity, percent of actions meeting standards

HOW WELL measures

<u>Is Anyone Better Off?</u>	
# Skills / Knowledge	% Skills / Knowledge
# Attitude / Opinion	% Attitude / Opinion including customer satisfaction: <i>Did we help you with your problems?</i>
# Behavior	% Behavior
# Circumstance	% Circumstance

ABO measures

Performance Measures Category Examples

	Quantity	Quality
Input / Effort	How Much Did We Do? (#) <i>(Least Important)</i>	How Well Did We Do It? (%) <i>(2nd Most Important)</i>
Output / Effect	How Much Change? (#) <i>(3rd Most Important)</i>	Quality of Change? (%) <i>(Most Important)</i>

Human Resources Division

# of exams posted	% of exams posted within 5 days
# of managers who hired from the exam list	% of managers who hired from the exam list

Health Education Administration

# of plain language trainings	% of attendees who felt the objectives were met
# of attendees with increased knowledge in plain language	% of attendees with increased knowledge in plain language

Performance Measures Category Examples

Input / Effort	How Much Did We Do? (#) <i>(Least Important)</i>	How Well Did We Do It? (%) <i>(2nd Most Important)</i>
	How Much Change? (#) <i>(3rd Most Important)</i>	Quality of Change? (%) <i>(Most Important)</i>

Division of HIV & STD Prevention

# of people living with HIV who are engaged in care	% people with HIV who are engaged in care
# of people with HIV who are virally suppressed	% of people with HIV who are virally suppressed

Office of Violence Prevention

# of parks participating in Parks After Dark (PAD)	% of PAD parks implementing healing programming
# of PAD participants reporting improved social connections, support & wellbeing	% of PAD participants reporting improved social connections, support & wellbeing

Performance Measures Category Examples

Quantity Quality

Input / Effort	How Much Did We Do? (#) <i>(Least Important)</i>	How Well Did We Do It? (%) <i>(2nd Most Important)</i>
	How Much Change? (#) <i>(3rd Most Important)</i>	Quality of Change? (%) <i>(Most Important)</i>

Substance Abuse & Prevention Bureau

# of people receiving Narcan, syringes or fentanyl testing strips	% of people receiving Narcan, syringes, or fentanyl strips of those served
# of overdoses reversed	% of overdoses that were reversed

Emergency & Preparation Response Division

# of Medical Reserve Corps (MRC) members offered trainings	% of MRC members who enroll in trainings
# of MRC members who certified via successful completion of trainings	% of MRC members who certified via successful completion of trainings

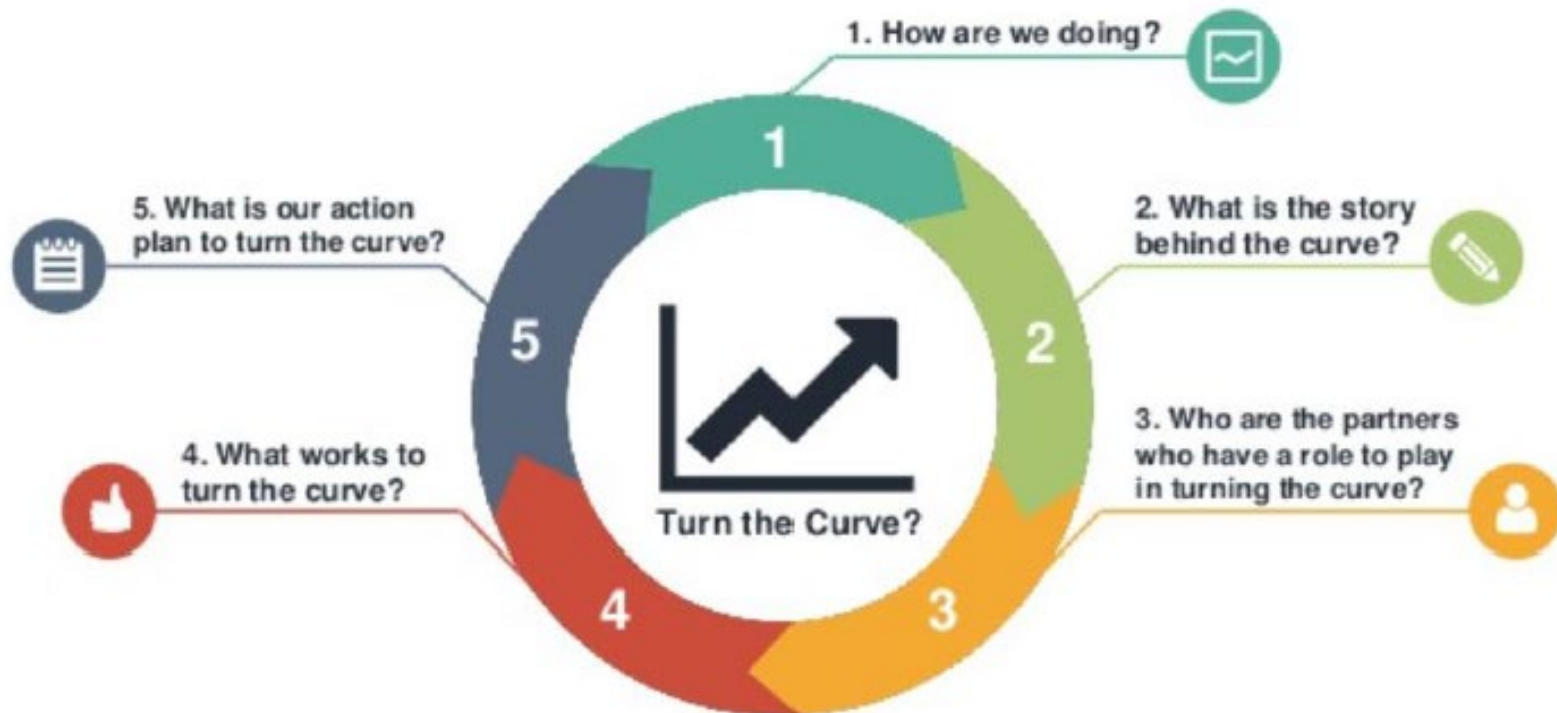
Results-based Accountability Exercise

Result, Indicator, Strategy, or Performance Measure?

1. Los Angeles County has safe communities - **Result**
2. Pedestrian fatality rate - **Indicator**
3. Installation of bike lane lines on the street - **Strategy**
4. Covid morbidity rate - **Indicator**
5. Percent of PEs done on time - **Performance Measure**
6. Los Angeles County children are born healthy - **Result**
7. Average Emergency Preparedness & Response Division disaster response time - **Performance Measure**

Turn the Curve Thinking: 5 Questions to Move from Talk to Action

Turn the Curve Action Plan Process

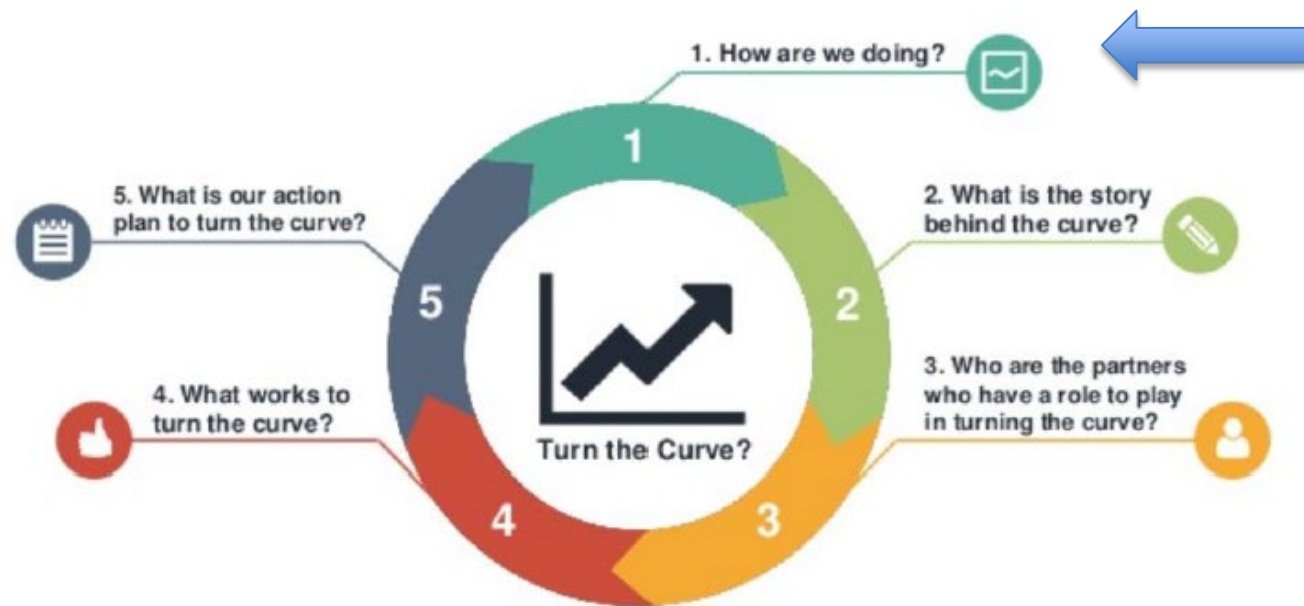


Turn the Curve Thinking

Step 1. How are we doing?

- Chart your data at least quarterly
- What do we need to know about the data?
- How are we doing on the data?
- Disaggregate the data, if possible

Turn the Curve Action Plan Process



Turn the Curve Thinking

Step 2. What is the story behind the curve?

- Describe why the trends look like they do in the chart
- Include factors that are making the trends better and those making the trends worse and why

Turn the Curve Action Plan Process



Turn the Curve Thinking

Step 3. Who are the partners who have a role to play in turning the curve?
 - List and name the role of each partner who can change the story in order to close the gap between your result and 100%

Turn the Curve Action Plan Process

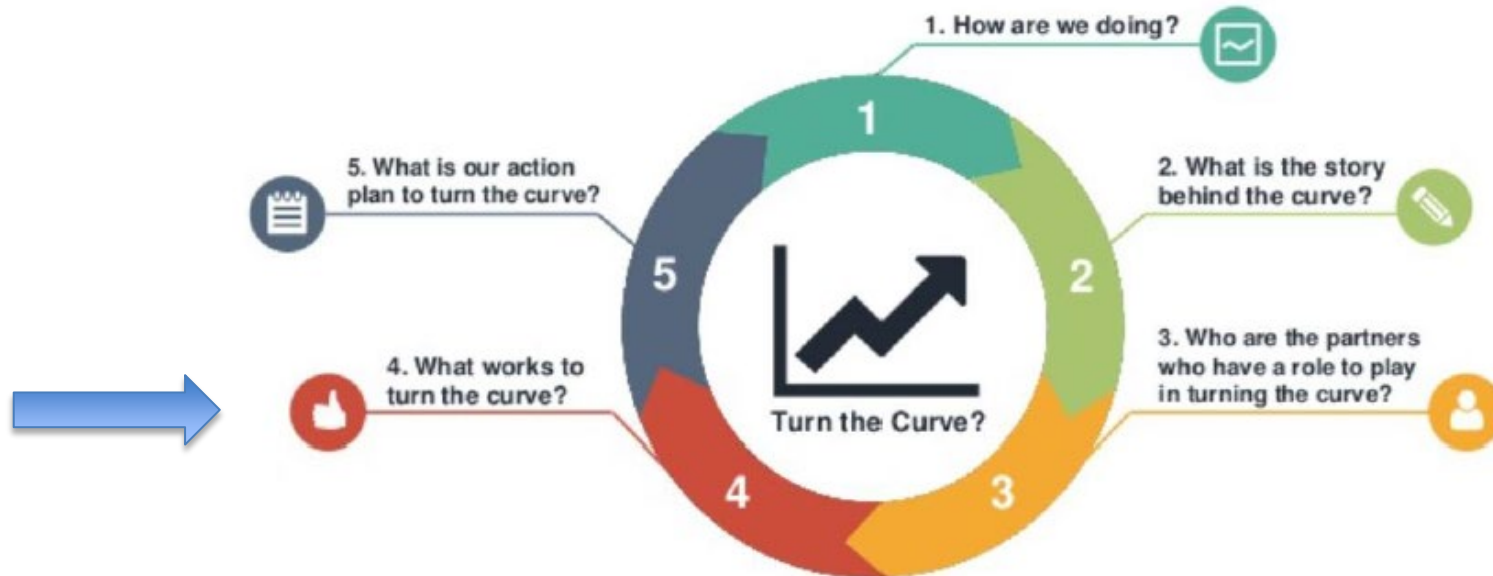


Turn the Curve Thinking

Step 4. What works to turn the curve?

- Brainstorm all possible strategies that could work: evidence-based, promising practices, no-cost/low-cost, and off-the-wall ones

Turn the Curve Action Plan Process

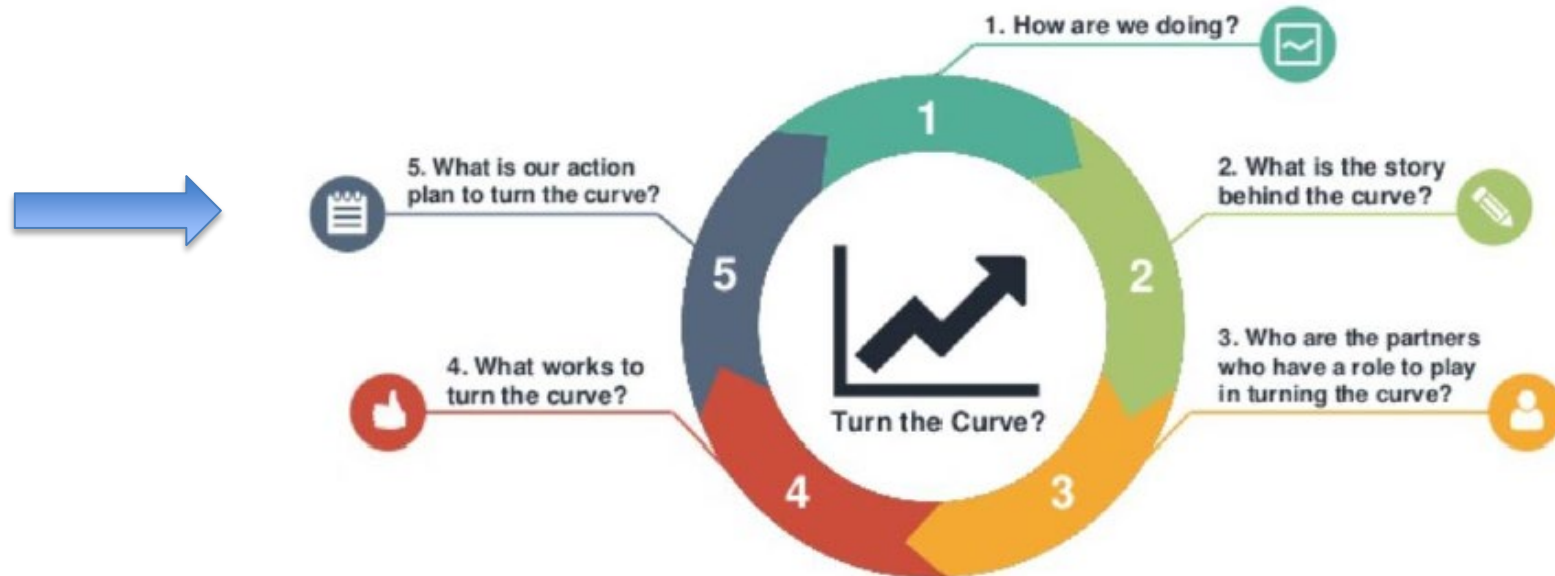


Turn the Curve Thinking

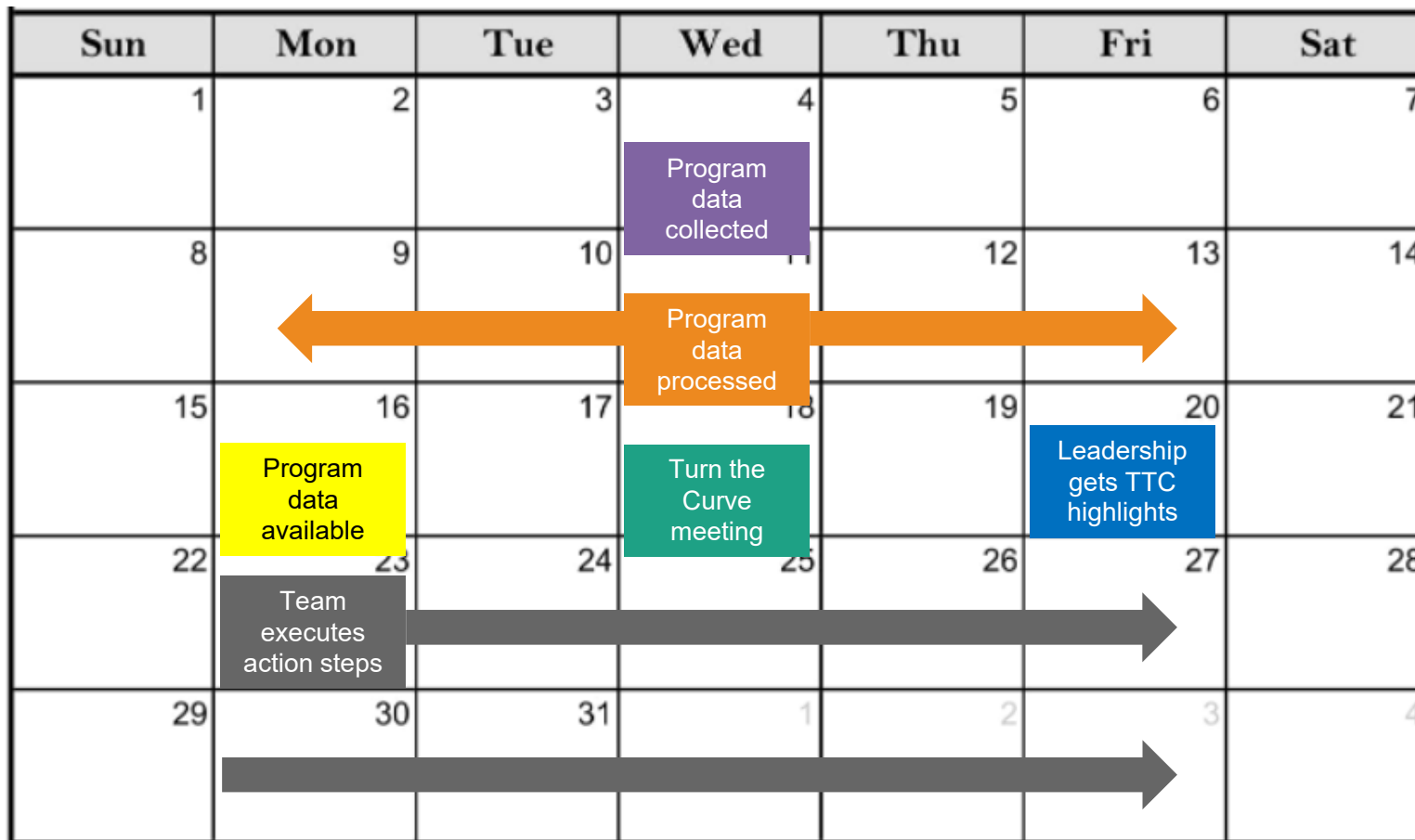
Step 5. What is our action plan to turn the curve?

- Decide which strategies you will select to implement
- Make sure strategies are tied to a root cause, are feasible and specific
- Create action plan table: action item, when due, & who will lead

Turn the Curve Action Plan Process



Scheduling



How We Track & Report Progress

Version 7: <https://scorecard.clearimpact.com/>



Register

Username

Password

[Forgot Password](#) Login

Clear Impact Scorecard Elements

- Result or Outcome
 - What you are working towards attaining
- Indicator/Measure Graph
 - Shows history and where indicator/measure is going if you do nothing different
- Story Behind the Curve
 - What factors could influence the graph's curve in both positive and negative directions? (root causes)
- Partners
 - Partners who could help you turn the curve and their role
- What Works
 - Brainstorm all strategies that could work to turn the curve
- Action Plan
 - Strategies to implement that are tied to a root cause, are feasible, and specific,

- Home
- Scorecard Objects
- Action Manager
- Custom Reports
- Tools
- Admin
- Billing

Demo Scorecard Export Options Edit

This is a demonstration scorecard designed to showcase the features of Clear Impact Scorecard.

Population Accountability

	Most Recent Period	Current Actual Value	Current Target Value	Current Trend	Baseline % Change
R RESULT A condition of well being for children, adults, families, or communities					
I INDICATOR A measure that helps quantify the achievement of a result	Q4 2019	96%	95%	3	25% ↑

Performance Accountability

	Most Recent Period	Current Actual Value	Current Target Value	Current Trend	Baseline % Change
P PROGRAM A program, agency, or service system responsible for helping achieve Results.					
PM PERF-MEASURE How much did we do?	Oct 2019				

Getting Started

Here are a few things to do first.

- 1 Welcome-Video
- 2 Explore the Scorecard
- 3 Create Your Own Scorecard
- 4 Enter Data
- 5 Invite Colleagues to Join You

[Dismiss this](#)

Kickoff Checklist 4



Program Name

Mission: Program or Division mission statement

Vision: Program or Division vision statement

Scorecard View

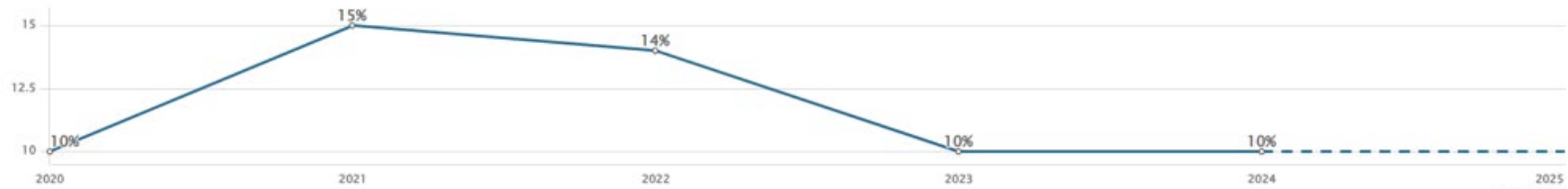


RESULT = A Condition of Well-being

R Result

PI Population Indicator: How Result is being measured

Data Source: Pilot Database



Story Behind the Curve Partners What Works Action Plan

ClearImpact.com

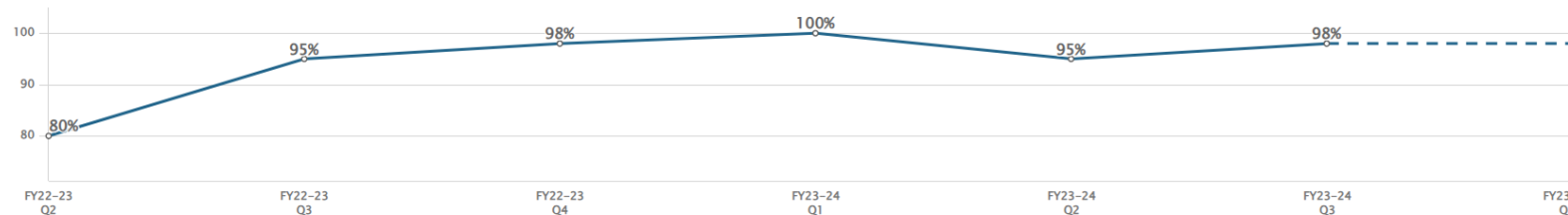
All Data Showing...

PROGRAM = Performance section

P Program Activity

PM MCH Performance Measure: How much did we do?

PM WELL Performance Measure: How Well did we do?



Story Behind the Curve Partners What Works Action Plan

ClearImpact.com

All Data Showing...

PM ABO Performance Measure: Is Anyone Better Off?

★ | **PI** Population Indicator: How Result is being measured ⓘ

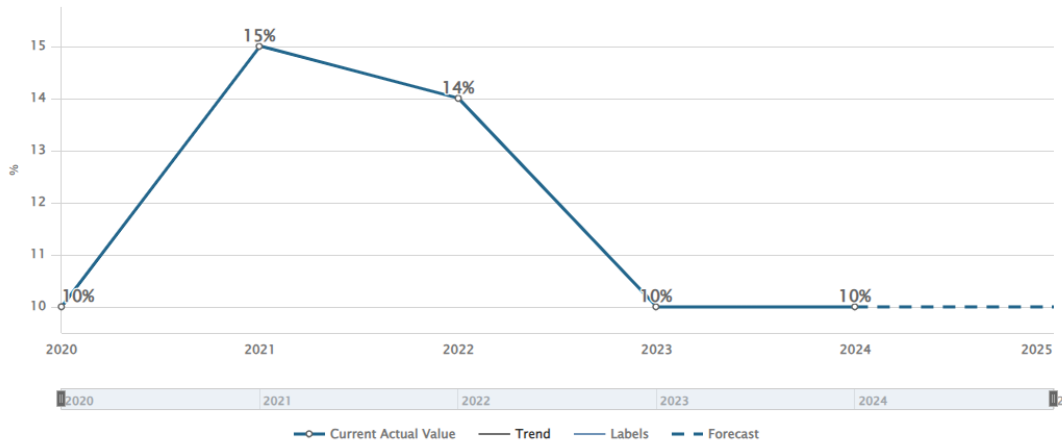
Annually | Lower is Better | Not Calculated

- Edit
- Export
- Excel
- Add
- Options

Sticky Chart

Population Indicator: How Result is being measured

Data Source: Pilot Database



Notes

Story Behind the Curve ⓘ

Describe the trendline in the curve as well as positive and negative contributory factors

Partners ⓘ

List which specific partners can help you turn the curve and what their roles would be

What Works ⓘ

Brainstorm all possible strategies that could turn the curve

Action Plan ⓘ

Choose the strategies based on feasibility, leverage, and specificity



Relationships

Containers

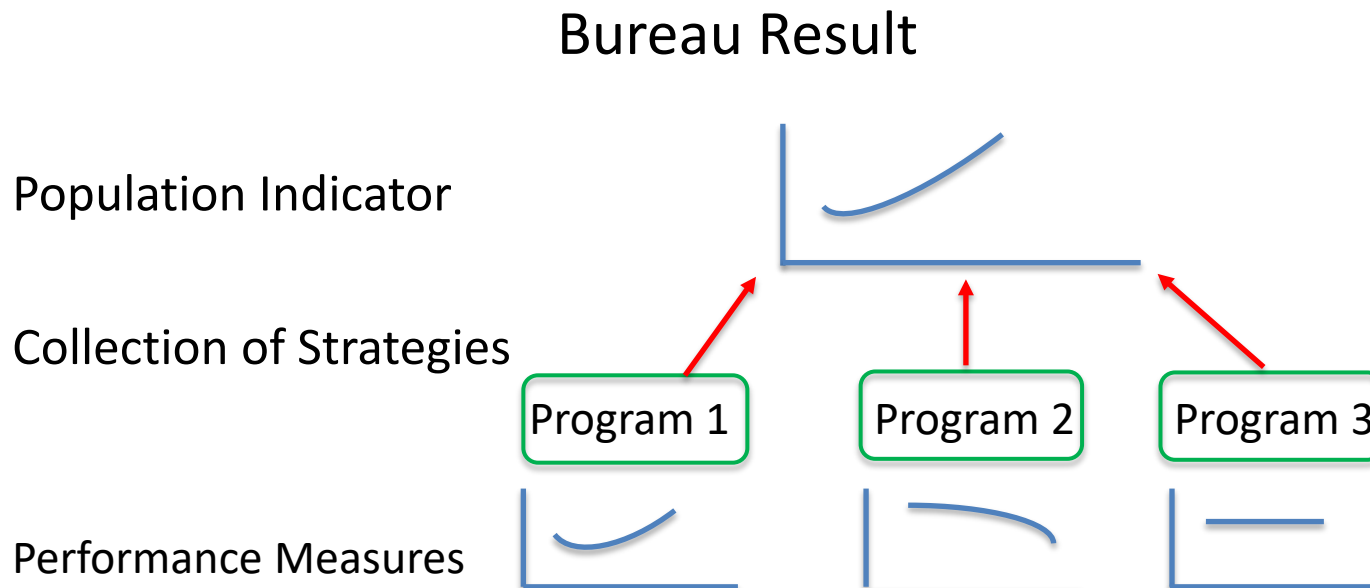
Existing Container

Purpose of Scorecards

- Help Programs Prioritize their Work
 - Based on their mission and vision
- Education & Transparency
 - Can inform our staff, customers, stakeholders, and public of what we are doing, how we are doing it, whether we are making a difference, and what we are doing to improve
- Increase Partnership
 - Turn the curve thinking will help us forge new relationships with partners who have a role to play and could help us
- Function as our department-wide Performance Management System (PHAB requirement)
 - Quarterly metrics tracked & analyzed for improvement
 - Executive Leadership can quickly be updated on any program's current efforts and impact

Purpose of Scorecards (con't)

- Collective Impact
 - Multiple programs' efforts towards a Result in one scorecard
 - We are doing this at the bureau level
 - Bureaus are developing bureau-level scorecards



Scorecard Tips

Structure

- Include program mission & vision statements
 - Provides the reader with the purpose of your program and what you are trying to achieve
- Include your program's top 2-3 key activities
 - Create at least one HOW MUCH, HOW WELL and one IS ANYONE BETTER OFF performance measure for each

Format

- Use plain language
 - Readability grade level can be assessed in Word

Scorecard Tips (con't)

Content

- Population indicators and performance measures— refer to Scorecard Rubric
 - Includes the details for how to fill out each section of the scorecard

Rubric for Assessing a Turn the Curve Action Plan for a Performance Measure

Turn the Curve Action Plan Author:	
Division/Program/Scorecard Title:	
Performance Measure:	
Reviewer:	
Date:	
Score:	of 20

Rating Key: 4 = Covered the components of this key element clearly and fully. (Each component is a yes or a no.)
 3 = Covered the components of this key element substantially with only minor deficiencies.
 2 = Covered the components of this key element but had at least one significant deficiency.
 1 = Missing one or more of the required components of this key element.

Questions about the Scorecard:

- A. Is the mission statement up-to-date & written in plain language?
- B. Is the vision statement up-to-date & written in plain language?
- C. Who are your customers?
- D. If you had to describe your program using the work of only one activity your program does, which activity would you choose?
- E. If you got to choose a second activity, what would that be?
- F. A third activity?

Performance Plan Elements	Rating	Guidance/Comments
<p>1. Performance Measure. Uses a high-quality headline performance measure and presents corresponding data clearly.</p> <p>A. The performance measure communicates well to relevant constituencies.</p> <p>B. The performance measure measures something of central importance about the services provided (“how well delivered ” or “if ‘customers’ are ‘better off’”).</p> <p>C. Quality data are available on a timely basis for the measure or there is a “data development agenda” to develop and implement the performance measure.</p> <p>D. For the performance measure, data (actual or estimated) are presented clearly in a graph, with both an historic baseline and a forecasted baseline. The measure is also disaggregated.</p>	<p>1. <input type="checkbox"/></p> <p>A. <input type="checkbox"/></p> <p>B. <input type="checkbox"/></p> <p>C. <input type="checkbox"/></p> <p>D. <input type="checkbox"/></p>	<p>A. Stakeholders, clients, patients, the general public</p> <p>B. Measuring key target populations, services provided and their impact</p> <p>C. Timely basis= quarterly, unless impossible</p> <p>D. Forecasted baseline is where the curve would go if we did nothing; Disaggregating data unveils disparities so strategies can address root causes for specific populations</p>
<p>2. Story Behind the Curve. Rigor in determining the “story behind the curve” of the performance measure baseline.</p> <p>A. Identifies and prioritizes “root causes” (positive and negative, internal and external, current and anticipated) for specific populations.</p> <p>B. Pursues/proposes research on root causes where appropriate.</p> <p>C. Surfaces and challenges assumptions.</p>	<p>2. <input type="checkbox"/></p> <p>A. <input type="checkbox"/></p> <p>B. <input type="checkbox"/></p> <p>C. <input type="checkbox"/></p>	<p>A. Identify & prioritize the root causes of the gaps for disaggregated race/ethnicity data or examine the gap between result and 100%. There is always room for improvement!</p> <p>B. Answer why the service is how it is. Any analysis needed? Ex) Anything holding you back? A tie-up in other part of the system? (e.g., Need to check with service providers?)</p> <p>C. Does the story challenge outdated assumptions? (Causal factors that are outdated or untested.)</p>
<p>3. Potential Partners. Rigor in identifying partners and their roles who could help to “turn the curve” of the performance measure baseline.</p> <p>A. Identifies partners and the roles they play in turning the curve.</p> <p>B. Considers if the story behind the curve suggests any new partners.</p>	<p>3. <input type="checkbox"/></p> <p>A. <input type="checkbox"/></p> <p>B. <input type="checkbox"/></p>	<p>A. Include partners' roles in having an impact</p> <p>B. Do the root causes point to any potential partners?</p>

note: Components not highlighted are optional, unless they are already known or being done.

<p>4. Exploring What Works. Rigor in exploring what would work to “turn the curve” of the performance measure baseline.</p> <p>A. Identifies research/evidence-based strategies.</p> <p>B. Identifies “low-cost/no-cost” strategies.</p> <p>C. Generates “off-the-wall” strategies (<i>i.e.</i>, actions that would work but may not appear feasible) to foster innovation.</p> <p>D. Considers if information is needed for a research agenda.</p> <p>E. Innovates – surfaces and challenges assumptions.</p>	<p>4. <input type="checkbox"/></p> <p>A. <input type="checkbox"/></p> <p>B. <input type="checkbox"/></p> <p>C. <input type="checkbox"/></p> <p>D. <input type="checkbox"/></p> <p>E. <input type="checkbox"/></p>	<p>A. What strategies are proven to work?</p> <p>B. What are low-resourced strategies?</p> <p>C. Innovative strategies incorporate ideas from the customers; involve them in brainstorming</p> <p>D. Start a research agenda, if needed</p> <p>E. New ideas that will test outdated assumptions</p>
<p>5. Action Plan Selection. Rigor in selecting which strategies to implement.</p> <p>A. Strategies are linked to root causes identified in the story behind the curve. The plan weighs the potential impact of each strategy in turning the curve (its “leverage”) by considering the importance of the root cause(s) it addresses.</p> <p>B. Assesses the feasibility and effectively balances with leverage in selecting strategies.</p> <p>C. Strategies are consistent with the values of the organization.</p> <p>D. The strategies are sufficiently specific to allow for adequate consideration and effective implementation.</p>	<p>5. <input type="checkbox"/></p> <p>A. <input type="checkbox"/></p> <p>B. <input type="checkbox"/></p> <p>C. <input type="checkbox"/></p> <p>D. <input type="checkbox"/></p>	<p>Choose the strategies by rating each one on:</p> <p>A. Potential impacts on root causes</p> <p>B. Feasibility & leverage (reach)</p> <p>C. In line with DPH values</p> <p>D. Specific enough to consider them</p>

note: Components not highlighted are optional, unless they are already known or being done.

Questions?

If you have any questions or need help on your scorecard, feel free to email: RBA_Consultation@ph.lacounty.gov