



Introduction

The Indiana Cancer Consortium (ICC) updated its evaluation plan to better assist leadership in assessing progress toward objectives outlined in the *Indiana Cancer Control Plan (ICCP)*, and to monitor the degree of member involvement and satisfaction with the ICC. The evaluation plan provides activities, tools, and timelines for a comprehensive evaluative approach, and includes recommendations for using the information collected. It was designed to provide maximum utility with minimal effort from ICC leadership, staff, and volunteers.

Methods

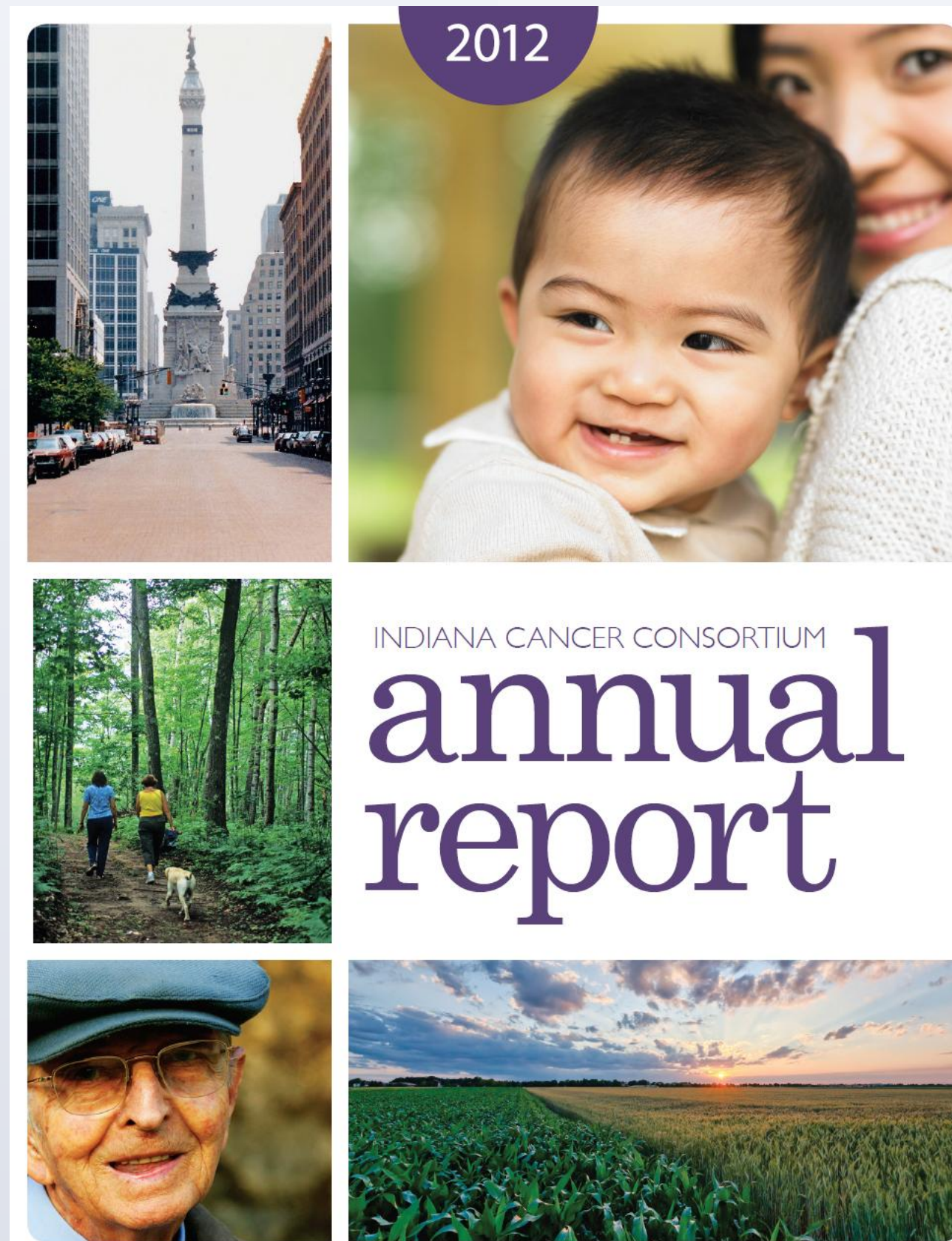
The Evaluation Advisory Group (EAG) is responsible for implementing the evaluation plan. Key activities include a member satisfaction survey (MSS), partner organization survey (POS), annual report, progress indicator report for ICCP objectives, committee activity reports, and an optional focus group script. Surveys are administered via email. The MSS is distributed yearly, while the POS is administered biennially. The EAG reviews survey results and makes recommendations to consortium leadership. The EAG then develops action plans and oversees implementation of recommendations.

Table 1. ICC Evaluation Timeline

Evaluation Activity	Timeframe	Responsible Party
Update progress indicator report	September/October	Data Committee/Steering Committee
Implement POS ; draft a summary report	November – Every other year (odd years)	EAG/ICC Coalition Coordinator
Implement MSS ; draft a summary report	May	EAG/ICC Coalition Coordinator
Complete committee activity reports ; draft a summary report	Twice per year (every sixth meeting for monthly committees, every third meeting for bi-monthly committees)	Committee chairs/ICC Coalition Coordinator/Steering Committee
Conduct group discussions with committees using group feedback protocol ; draft a summary report	October/November (every other year or as needed)	Steering Committee and ICC Coalition Coordinator identifies the need or topic and coordinates with external evaluator to conduct the work
Assemble key information into an annual report	March/April	Steering Committee with support from committees and ICC Coalition Coordinator

ICC Evaluation Products

Annual Reports



POS 2013

2012 ICC Evaluation

Table 2. Percentage of Responding Agencies Addressing ICCP Goal Areas

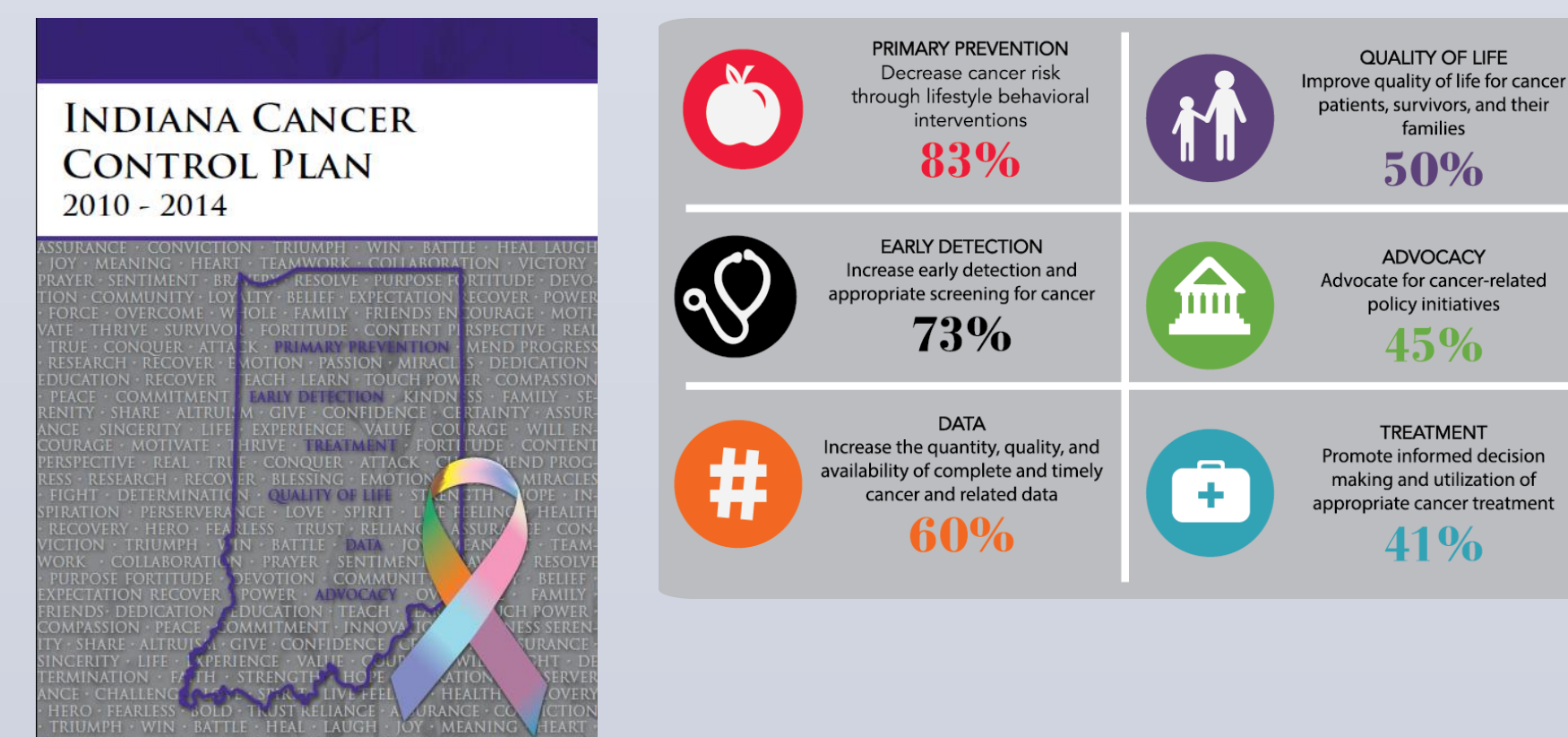


Figure 1. Recommendation for Strengthening Structure and Function



Results

Table 3. Implementation of Recommendations from 2012 ICC Evaluation

Evaluation Category	Recommendations	Results
ICC Mission and Role	<ol style="list-style-type: none"> Data Committee take responsibility for managing/updating progress toward ICCP indicators Steering Committee review progress toward objectives annually and report back out to ICC members Committee chairs be aware of the ICCP objectives and consult the plan regularly to guide activities Steering Committee and committee chairs ensure initiatives/activities can be replicated and have large scale impact on cancer burden Steering Committee and Data Committee work with other committees to develop measurement for developmental objectives 	<ol style="list-style-type: none"> Agreed to review and update data annually, and provide data for the annual meeting Included information in annual report Developed committee activity report Redesigned ICC structure (see Figure 1); however, direct implementation of recommendation is unclear Modified MSS to capture data for several developmental objectives
ICC Structure and Function	<ol style="list-style-type: none"> Reduce number of standing committees to four: Steering Committee, Advocacy Committee, Data Committee, and Education and Practice Committee Include regional coalitions as fourth committee under the Steering Committee Explore adding staff capacity for resource development, strategic planning, and evaluation 	<ol style="list-style-type: none"> See Figure 1 See Figure 1; released a request for proposals to support development of two additional regional coalitions Added part-time ICC Regional Cancer Control Coalition Coordinator to manage regional coalitions
ICC Member Engagement	<ol style="list-style-type: none"> Continue to offer conference call option for meetings and explore strategies to ensure engagement Send email once a year describing committee activities and invite people to participate Collect member affiliation information through the MSS for review by Membership Committee Empower committee chairs to call on members to complete tasks Provide training for ICC leadership Provide leadership with information on roles, responsibilities, and resources 	<ol style="list-style-type: none"> Purchased Go To Meeting (web conferencing software) Sent out recruitment email Reviewed MSS results and identified need for members with resource development experience and policymakers Not yet formally addressed Provided leadership training for state chronic disease coalitions in August 2013 Gathered examples from other states and tested new materials with District 6 coalition

Conclusion

The ICC is committed to evaluating its efforts, listening to partners, ensuring recommendations lead to action, and disseminating evaluation findings.

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