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TARGETING HIGHER SKILLS AND HEALTHCARE JOBS:

How HPOG Grantees Set and Use Performance Goals

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Health Profession Opportunity Grants

OFFICE OF FAMILY ASSISTANCE

December 2018

Targeting Higher Skills and Healthcare Jobs: How HPOG Grantees Set and Use Performance Goals

Evaluation and System Design for Career Pathways Programs: 2nd Generation of HPOG (HPOG Next Gen)

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Overview

Introduction

In 2015, the Administration for Children and Families (ACF) within the U.S. Department of Health and Human Services awarded the second round of Health Profession Opportunity Grants ("HPOG 2.0") to 32 grantees in 21 states, including five tribal organizations. The purpose of the HPOG Program is to provide education and training to Temporary Assistance for Needy Families (TANF) recipients and other low-income individuals for occupations in the healthcare field that pay well and are expected to either experience labor shortages or be in high demand.

Grantees set overall five-year and annual performance goals on several key measures as part of the HPOG 2.0 application process, including:

1. Number of individuals enrolled in the overall HPOG program
2. Number of TANF recipients enrolled
3. Number of individual participants that begin basic skills education
4. Number of individual participants that complete basic skills education
5. Number of participants that begin any healthcare occupational training
6. Number of participants that complete any healthcare occupational training
7. Number of individual participants that obtain employment in a healthcare occupation

Grantees cannot subsequently change five-year performance goals but they may adjust annual goals for grant years 2 through 5 as they make progress towards their overall goal. Grantees formally report on their progress toward meeting their performance projections in semi-annual and annual Performance Progress Reports (PPRs) submitted to the Office of Family Assistance (OFA) in ACF. OFA monitors grantees' performance, negotiates annual goals with grantees, and provides assistance to grantees in taking needed corrective actions to meet projected performance goals.

Research Questions

The special analysis addresses the following major research questions:

- How did grantees develop five-year and annual performance projections?

- How do grantees and ACF interpret and use data regarding progress on each performance measure to develop and/or revise projections for each successive year?

Purpose

By exploring how grantees develop their performance projections, this special analysis aims to:

- Provide transparency around the process of developing and refining performance projections to help ACF better understand how applicants/grantees develop projections (e.g., what they are based on, assumptions used, etc.), in order to assess their accuracy, provide more informed guidance regarding revisions to annual projections, and better monitor performance.

- Share insights that could help future HPOG applicants craft performance projections.

Key Findings and Highlights

The special analysis of how HPOG 2.0 grantees set and use performance goals found that:

- Grantees considered a variety of internal and external factors and data when establishing their five-year performance projections, the most common of which were labor market demand, training provider capacity, and experience in HPOG 1.0.

- Most grantees determined one or more of their Year 1 projections by dividing the five-year totals for these projections by five.

- Most grantees monitored progress towards meeting their goals on a monthly basis, frequently in their monthly calls with their OFA project officers.

- OFA uses a variety of mechanisms to assist grantees in meeting their projections, including group and individual TA, requiring grantees to report on progress more frequently, and when necessary, corrective action plans.

- To address shortfalls across performance projections, grantees made adjustments to their programs to increase TANF recipient enrollment, increase enrollment and completion of basic skills courses, and increase the focus on short-term training. Additionally, grantees revised annual projections for future years to make up for shortfalls experienced in earlier years.

Methods

We collected data through interviews with one respondent from each of nine current HPOG 2.0 grantees and with OFA staff, conducted in January 2018. We also used data from grantees' Year 1 and Year 2 PPRs. Informal topic guide questions helped structure the conversations with grantees and OFA.

Suggestions for Improving the Process

Key suggestions for future HPOG grantees include:

- When developing initial performance goals expect delays in enrollment during program startup.

- Use a variety of available data on local labor market conditions and demand for healthcare occupational education to assess likely participation rates and employment outcomes.

- Develop a clear understanding of the needs of the potential HPOG participant population and the partners and stakeholders with whom they will work.

- Be frank and open in communicating challenges in meeting goals to OFA.

Key suggestions for OFA in future HPOG iterations include:

- Consider requiring grant applicants to develop MOUs with local TANF agencies to ensure mutual agreement over the number of TANF recipient referrals likely to apply to HPOG.

- Inform grant applicants about likely delays in enrollment during program startup.

- Include information in grant announcements that may be helpful to grantees in developing performance goals, such as data on mean times for HPOG participants to complete courses and the degree to which participants engage in multiple trainings to move along defined career pathways.

Executive Summary

In 2010, the Administration for Children and Families (ACF) within the U.S. Department of Health and Human Services awarded the first round of five-year Health Profession Opportunity Grants (HPOG 1.0) to 32 organizations in 23 states; five were tribal organizations. The purpose of the HPOG Program is to provide education and training to Temporary Assistance for Needy Families (TANF) recipients and other low-income individuals for occupations in the healthcare field that pay well and are expected to either experience labor shortages or be in high demand. HPOG 1.0 grantees designed and implemented programs to provide eligible participants with education, occupational training, and support and employment services to help them train for and find jobs in a variety of healthcare professions.

The current, second round of five-year grants ("HPOG 2.0") was awarded in 2015, with grant funds disbursed annually to 32 grantees in 21 states, including five tribal organizations.

The grants are administered by the ACF Office of Family Assistance (OFA), which assesses HPOG grantee performance on seven measures:

1. Number of individuals enrolled in the overall HPOG program
2. Number of TANF recipients enrolled
3. Number of individual participants that begin basic skills education
4. Number of individual participants that complete basic skills education
5. Number of participants that begin any healthcare occupational training
6. Number of participants that complete any healthcare occupational training
7. Number of individual participants that obtain employment in a healthcare occupation

Grantees developed their first-year and cumulative five-year performance projections for these measures as part of the HPOG 2.0 application process. They develop additional annual projections for grant years 2 through 5 during their grant period. Although grantees may not revise their cumulative five-year projections after grant award, they may change upcoming annual projections based on actual performance. They report to OFA on their progress toward meeting these projections on a semi-annual and annual basis throughout the life of their grant.

To better understand how grantees develop their cumulative five-year and annual projections and how to interpret results when they vary from projections, ACF engaged Abt Associates to conduct a special analysis of grantee experience developing and monitoring performance projections. The study also has the goal of developing recommendations for future HPOG grantees regarding setting and monitoring performance goals. The study addressed two major research questions:

- How did grantees develop five-year and annual performance projections?

- How do grantees and ACF interpret and use data regarding progress on each performance measure to develop and/or revise projections for each successive year?

Methodology

To address the research questions for this study, we primarily relied on data collected through interviews with one respondent from each of nine current HPOG 2.0 grantees, conducted in January 2018. Each interview took place by phone and lasted approximately 60 to 90 minutes. We also interviewed OFA staff; this interview also took place by phone and lasted approximately 90 minutes. In addition to interview data, the study also uses data from grantees' Year 1 and Year 2 PPRs.

We developed topic guides for the interviews in coordination with ACF. The grantee topic guide asked about each grantee's role in developing, monitoring, and negotiating performance projections; the development of its first-year and cumulative five-year performance projections; the process it used to monitor progress against its projections and develop annual goals; and its experience working with OFA. In addition, we used topic guides to structure our discussions with OFA staff involved in monitoring grantee performance. Topic guide questions were informal and used to guide the conversation.

Using data on performance results and interview content, we summarized findings across the interviews about how grantees developed and monitored performance projections as well as recommendations they provided for future HPOG grantees and for OFA in working with grant applicants and awardees in developing goals and monitoring progress.

Findings

The special analysis of how HPOG 2.0 grantees set and use performance goals found that:

- Grantees considered a variety of internal and external factors and data when establishing their five-year performance projections, the most common of which were labor market demand, training provider capacity, and experience in HPOG 1.0.

- Most grantees determined one or more of their Year 1 projections by dividing the five-year totals for these projections by five.

- Most grantees monitored progress towards meeting their goals on a monthly basis, frequently in their monthly calls with their OFA project officers.

- OFA uses a variety of mechanisms to assist grantees in meeting their projections, including group and individual TA, requiring grantees to report on progress more frequently, and when necessary, corrective action plans.

- To address shortfalls across performance projections, grantees made adjustments to their programs to increase TANF recipient enrollment, increase enrollment and completion of basic skills courses, and increase the focus on short-term training. Additionally, grantees revised annual projections for future years to make up for shortfalls experienced in earlier years.

Improving Performance Projections for Future HPOG Grantees and for OFA

One of the study's goals was to develop suggestions for improving the performance projections process for future HPOG grantees, as well as for OFA, based on what we learned from the interviews. Key suggestions for future HPOG grantees include:

- When developing initial performance goals expect delays in enrollment during program startup.

- Use a variety of available data on local labor market conditions and demand for healthcare occupational education to assess likely participation rates and employment outcomes.

- Develop a clear understanding of the needs of the potential HPOG participant population and the partners and stakeholders with whom they will work.

- Be frank and open in communicating challenges in meeting goals to OFA.

Key suggestions for OFA in future HPOG iterations include:

- Consider requiring grant applicants to develop MOUs with local TANF agencies to ensure mutual agreement over the number of TANF recipient referrals likely to apply to HPOG.

- Inform grant applicants about likely delays in enrollment during program startup.

- Include information in grant announcements that may be helpful to grantees in developing performance goals, such as data on mean times for HPOG participants to complete courses and the degree to which participants engage in multiple trainings to move along defined career pathways.

1. Introduction

In 2010, the Administration for Children and Families (ACF) within the U.S. Department of Health and Human Services awarded the first round of five-year Health Profession Opportunity Grants (HPOG 1.0) to 32 organizations in 23 states; five were tribal organizations. The purpose of the HPOG Program is to provide education and training to Temporary Assistance for Needy Families (TANF) recipients and other low-income individuals for occupations in the healthcare field that pay well and are expected to either experience labor shortages or be in high demand.[1] HPOG 1.0 grantees designed and implemented programs to provide eligible participants with education, occupational training, and support and employment services to help them train for and find jobs in a variety of healthcare professions.

The current, second round of five-year grants ("HPOG 2.0") was awarded in 2015, with grant funds disbursed annually to 32 grantees in 21 states, including five tribal organizations. These HPOG programs share key features. They:

- Target skills and competencies demanded by the healthcare industry

- Support career pathways, such as an articulated career ladder

- Result in an employer- or industry-recognized credential

- Combine supportive services with education and training services to help participants overcome barriers to employment as necessary

The grants are administered by the ACF Office of Family Assistance (OFA), which assesses HPOG grantee performance on seven measures:

1. Number of individuals enrolled in the overall HPOG program
2. Number of TANF recipients enrolled
3. Number of individual participants that begin basic skills education
4. Number of individual participants that complete basic skills education
5. Number of participants that begin any healthcare occupational training
6. Number of participants that complete any healthcare occupational training
7. Number of individual participants that obtain employment in a healthcare occupation

Grantees developed their first-year and cumulative five-year performance projections for these measures as part of the HPOG 2.0 application process. They develop additional annual projections for grant years 2 through 5 during their grant period. Although grantees may not revise their cumulative five-year projections after grant award, they may change upcoming

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[1] HPOG was authorized by the Affordable Care Act (ACA), Public Law 111-148, 124 Stat. 119, March 23, 2010, sect. 5507(a), "Demonstration Projects to Provide Low-Income Individuals with Opportunities for Education, Training, and Career Advancement to Address Health Professions Workforce Needs," adding sect. 2008(a) to the Social Security Act, 42 U.S.C. 1397g(a), and extended by the Bipartisan Budget Act of 2018, Pub. L. 115-123, through fiscal year 2019.

annual projections based on actual performance. They report to OFA on their progress toward meeting these projections on a semi-annual and annual basis throughout the life of their grant.

Grantees vary widely both in their overall goal for participant enrollment (measure 1) and in the ratio of measure 1 to each of the other measures (2–7), implying that they might also vary in their assumptions and estimates of enrollment and completion in specific activities and enrollment of TANF recipients. To better understand how grantees develop their cumulative five-year and annual projections and how to interpret results when they vary from projections, ACF engaged Abt Associates to conduct a special analysis of grantee experience developing and monitoring performance projections as part of Abt's existing ACF project, *Evaluation and System Design for Career Pathways Programs: 2nd Generation of HPOG* (HPOG Next Gen).

The special analysis addresses the following major research questions:

- How did grantees develop five-year and annual performance projections?

- How do grantees and ACF interpret and use data regarding progress on each performance measure to develop and/or revise projections for each successive year?

By exploring how grantees develop their performance projections, this special analysis aims to—

- Provide transparency around the process of developing and refining performance projections to help ACF understand how applicants/grantees develop projections (e.g., what they are based on, assumptions used, etc.), in order to assess their accuracy, provide more informed guidance regarding revisions to annual projections, and better monitor performance.

- Share insights that could help future HPOG applicants craft performance projections.

The remainder of this chapter provides additional background on the development and monitoring of performance projections and describes the methods and data used for this study.

1.1   Background

As part of the application process for HPOG 2.0 grants, OFA required applicants to provide "quantifiable projections" for each of the seven performance measures listed above. The Funding Opportunity Announcement (FOA)[2] required applicants to submit projections both for the first grant year (September 30, 2015–September 29, 2016) and cumulative, five-year totals for the full life of the grant (September 30, 2015–September 29, 2020). OFA gave applicants limited guidance about how to develop their projections. The FOA provided definitions for each of the seven performance measures and required that the projections be "logical and feasible given the total number of TANF recipients within the proposed service area, the organization's

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[2]   A funding opportunity announcement (FOA) is a notice by a federal government agency of an opportunity to obtain grant funds. The FOAs for HPOG 2.0 tribal and non-tribal grants, respectively, can be found here: https://ami.grantsolutions.gov/files/HHS-2015-ACF-OFA-FX-0951_0.pdf and https://ami.grantsolutions.gov/files/HHS-2015-ACF-OFA-FY-0952_0.pdf.

capacity to provide services, the identified employer demand, reasonable projected success rates at each step of the program, and the program's budget."

This section of the application could be awarded up to 5 (of 100 total) points. Applications were reviewed, scored, and ranked by independent, non-governmental review panels. OFA then reviewed the applications and rankings and made final funding decisions. As part of this process, OFA negotiated with applicants about the content of their applications, including their performance projections.

In addition to developing these initial projections, grantees are required annually to submit to OFA projections for the following grant year (e.g., in the middle of their first grant year, grantees developed projections for their second grant year). Grantees are advised to develop these projections based on their progress in the previous and current grant year, as well as on their overall five-year goals. At the time of this study, grantees had completed and reported on their performance for their first and second grant years, and had developed performance projections for their third grant year.

Grantees enter participant data continually in the ACF management information system called the Participant Accomplishment and Grant Evaluation System (PAGES). These data are automatically aggregated by PAGES for each of the seven performance measures. Using the data entered in PAGES, grantees formally report on their progress toward meeting their annual and five-year performance projections in semi-annual (September-March) and annual (September-September) Performance Progress Reports (PPRs) submitted to OFA. Grantees and their OFA project officers also use the data to monitor progress more frequently.

1.2   Methods and Data

To answer the research questions for this study, we primarily relied on data collected through interviews with one respondent[3] from each of nine current HPOG 2.0 grantees, conducted in January 2018. Each interview took place by phone and lasted approximately 60 to 90 minutes. We also interviewed OFA staff; this interview also took place by phone and lasted approximately 90 minutes.

In addition to interview data, the study also uses data from grantees' Year 1 and Year 2 PPRs.

Grantee Selection Criteria

We selected the nine HPOG 2.0 grantees according to a set of criteria, developed in coordination with ACF. Our goal was to ensure that these nine grantees varied across a range of characteristics that could be associated with how grantees establish and modify their performance projections and that could be useful in addressing the study's research questions.

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[3]   ACF intended for this to be a relatively informal, quick turnaround analysis. Accordingly, we chose to interview one respondent each from a sample of nine grantees, a total below the threshold for OMB Paperwork Reduction Act clearance, rather than interview respondents from all 32 grantees. As a result, this report is not representative of all grantees; instead, it provides a snapshot of the various approaches used by a purposive sample of grantees to develop and modify their performance projections.

These selection criteria include three binary criteria (yes/no) and three criteria using a range of values that were then ranked from high to low.

The three binary criteria:

- Tribal vs. non-tribal grantee.

- Grantee with multiple program sites[4] vs. grantee with single site.

- Repeat grantee (i.e., also participated in HPOG 1.0) vs. new grantee.

The three criteria with a range of values:

- Actual performance against first-year goals.

- Number of projected training completions, controlling for grant amount.

- Proportion of participants in short-term (as opposed to long-term) training.

The criteria, their operationalization, and rationales are detailed in **Appendix A**. The application of these criteria to all 32 HPOG 2.0 grantees appears in **Appendix B**.

To make our selection of grantees to interview according to these criteria, we used available data: Year 1 PPRs and publicly available information about grantees (i.e., number of program sites, participation in HPOG 1.0, tribal designation, and value of grant award). Using the data, we identified grantees on the binary criteria and ranked each as high or low on the other criteria. Our goal was to maximize the variety of grantee types and experiences developing and monitoring performance projections. The final grantees selected to be interviewed and their "scores" on the six selection criteria appear in **Exhibit 1-1** below. We identified nine grantees to interview. We also identified five alternative grantees to interview in the event that we were not able to schedule an interview with one of the original nine. One of the nine grantees we intended to interview was replaced with one of the alternative grantees. We also reached out to each grantee's HPOG evaluation site team[5] to learn whether there were any special circumstances we should take into consideration when assessing grantees for inclusion in this study. The selection of grantees was discussed with and approved by ACF.

Informal Topic Guides

We developed topic guides for the interviews in coordination with ACF. The grantee topic guide asked about each grantee's role in developing, monitoring, and negotiating performance projections; the development of its first-year and cumulative five-year performance projections; the process it used to monitor progress against its projections and develop annual goals; and its

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[4] A program site is a location where participant intake occurs. A grantee can have one or more sites.

[5] ACF contracted with Abt Associates to conduct a national evaluation of the HPOG 2.0 program. As part of that effort, teams of researchers at Abt and its subcontractors ("site teams") are assigned to each of the grantees to implement the evaluation.

experience working with OFA. Topic guide questions were informal and used to guide the conversation. Interviews were intended to supplement and clarify information provided by grantees through their PPRs. As such, questions in the topic guide were tailored to individual grantees. The topic guide for our interviews with OFA staff asked about the development of grantees' five-year and annual performance goals, the monitoring of grantees' annual performance goals, and the experience of working with grantees. The topic guides appear in **Appendix C** and **Appendix D**.

Exhibit 1-1. Grantee Selection Criteria for Interviewed Grantees[a]

Grantee[b]	Tribal Grantee	Multiple Sites	Repeat Grantee	Performance Against First-Year Results		Number of Projected Training Completions, Controlling for Grant Amount		Proportion of Participants In Shorter-Term and Longer-Term Training[c]	
				Highest	Lowest	Highest	Lowest	Highest	Lowest
Action for a Better Community, Inc.				x			x	x	
Cankdeska Cikana Community College	x		x	x		x			x
Central Community College		x	x				x		
Chicago State University					x	x		x	
Kansas Department of Commerce		x	x	x		x			x
Missouri Department of Social Services		x				x	x		
San Jacinto Community College District						x	x	x	
Volunteers of America Michigan						x			x
Workforce Investment Board SDA-83, Inc.			x	x		x			x
Total	1	3	4	4	4	4	4	3	4

SOURCE: Year 1 Performance Progress Reports, from PAGES data
NOTES: [a]For the three non-binary criteria, if a grantee has an "x" in the "Highest" or "Lowest" columns, it ranked among the top ten or bottom ten grantees, respectively. If a grantee does not have an "x" in the "Highest" or "Lowest" columns, the grantee fell in the middle of the 32 grantees.
[b]This table includes only those grantees that were interviewed as part of the study. However, these criteria were applied to all 32 grantees.
[c]For this criterion, grantees with an "x" in the "Highest" column have a high proportion of participants in short-term training, and grantees with an "x" in the "Lowest" column have a low proportion of participants in short-term training.

Limitation of the Study

One limitation of the study is that some of the grantee staff we interviewed were not fully knowledgeable about all aspects of the development of performance measure projections for the initial grant application. In some cases, staff who developed those first-year and cumulative five-year performance projections were no longer employed by the grantee. In other cases, interviewees simply could not recall all of the details of making those initial performance projections. This is not surprising given that interviews for this study took place in January 2018, and applications were submitted and grants were awarded in May and September 2015, respectively. Also note that the sample of grantees is not representative of all grantees, as explained in footnote 4, above.

1.3   Organization of the Report

The remainder of the report summarizes the results of interviews with HPOG grantees and OFA staff. **Chapter 2** explores the process by which grantees developed and finalized their cumulative five-year and first-year performance projections. **Chapter 3** describes how OFA and grantees monitored performance, possible reasons for under- or overperformance, and the steps taken to address issues. **Chapter 4** summarizes perceptions of grantee and OFA staff on working together. Finally, **Chapter 5** describes insights that could help future HPOG applicants craft performance measures and provides recommendations to OFA.

2. Initial Goal Setting

This section describes the process by which grantees set their cumulative five-year and first-year goals.

2.1 Establishing Five-year Goals

The five-year performance projections established by the nine grantees interviewed for this study appear in **Exhibit 2-1**. The exhibit provides a snapshot of the wide variation in projections for the seven HPOG performance measures across grantees.

Projections across grantees vary in *total numbers*; for example, program enrollment overall varies from a low of 344 to a high of 2,000. Projections also vary across grantees in *comparison* to one another. For example, the Kansas Department of Commerce projected that 30 percent of all individuals enrolled in its program would obtain employment by grant end, whereas the Workforce Investment Board SDA-83 projected 75 percent. A wide range of factors and data went into grantees' decisions about how to establish these five-year projections.

Exhibit 2-1. Five-year Performance Measure Goals, by Grantee

Performance Measure	1. Number of *individuals* enrolled in the overall HPOG program	2. Number of *TANF recipients* enrolled	3. Number of individual participants that *begin* basic skills education	4. Number of individual participants that *complete* basic skills education	5. Number of participants that *begin* any healthcare occupational training	6. Number of participants that *complete* any healthcare occupational training	7. Number of individual participants that obtain employment in a healthcare occupation
Action for a Better Community Inc.	1,500	375	526	334	1,180	883	1,050
Cankdeska Cikana Community College	344	20	50	34	321	300	237
Central Community College	1,445	132	365	286	1,277	1,043	936
Chicago State University	700	315	630	567	608	486	438
Kansas Department of Commerce	2,000	375	1,500	1,050	1,700	1,105	610
Missouri Department of Social Services	1,815	275	360	235	1,634	1,388	1,225
San Jacinto Community College District	1,250	250	500	400	1,000	800	640
Volunteers of America Michigan	1,250	850	1,125	1,065	1,050	875	750
Workforce Investment Board SDA-83	800	230	300	230	800	600	600

SOURCE: PAGES

Factors and Data

Grantees considered a variety of external and internal factors to develop their five-year goals. They also used several different data sources. Exhibit 2-2 provides a list of the factors and data considered by grantees.

Exhibit 2-2 External and Internal Factors and Data that Informed Five-Year Goals

External Factors/Data
Local/regional labor market demand
Demand for healthcare training
Education skill levels of potential participants
Training provider capacity
Other programs in the community
HPOG 2.0 random assignment requirement
State TANF policy
Internal Factors/Data
Experience in HPOG 1.0
Enrollment trends in grantee's own healthcare training programs
Number of incoming students in need of basic skills education
Duration and cost of long-term training
HPOG 2.0 goals to increase access to education and training and career laddering
Relationships with employers

External factors and data

Eight of the grantees interviewed for this study looked at *local and/or regional labor market demand* in the healthcare field when developing their five-year goals. Grantees obtained labor market data from the Bureau of Labor Statistics, their state departments of labor, and employers. These data included information about the state economy, current and projected demand for healthcare occupations, wages for and education levels required by those jobs, and trends in hiring. Three of these grantees reported working with either an employer association or an advisory group of employers and educational institutions focused on the healthcare field. One grantee noted that soliciting information from local employers helped ensure it understood the local labor market context and not just state-level trends. Another grantee noted that employers approved its selection of high-skill, high-demand healthcare occupations.

Three of the grantees interviewed reported that they also considered worker *demand for healthcare training*. One grantee reported using data on the number of individuals produced by the state and local education systems in each category to understand supply and worker demand for healthcare training.

Two of the grantees reported looking at the *education skill levels of potential participants*. One grantee determined that a high proportion of participants would need basic skills education. The other grantee noted that it had difficulty determining the skill level of potential participants because that information was not readily available from the local education system.

Four of the grantees considered *training provider capacity* to deliver healthcare training. One grantee noted that this factor outweighed demand for training. Another grantee serving rural areas explained that the capacity of local training providers limited the types of healthcare trainings it could offer.

One of the grantees reported looking at what *other programs in the community* serving the same population offered to its participants. Four of the grantees interviewed considered the grant's *random assignment requirement*[6] when setting their five-year goals, electing to be more conservative with their enrollment goals to ensure they could meet the requirement.

Finally, one of the grantees reported that it used recent changes in *state TANF policy* (e.g., more stringent eligibility requirements, reductions in the amount of time individuals can receive TANF) that led to an overall decline in the number of recipients in the state to inform its TANF projections. One grantee used data on the number of TANF recipients per county to develop its TANF performance projection.

Internal factors and data

All of the repeat grantees reported that they relied on their *experience in HPOG 1.0* to generate their five-year goals for HPOG 2.0. They looked at the goals they set for their HPOG 1.0 program, their performance against those goals, and the strategies they used to meet those goals as one of the factors for developing realistic targets for round two.

Two of the grantees interviewed reported looking at *enrollment trends in their own healthcare training programs*. Another grantee used its organization's data on the proportion of *incoming students in need of basic skills education* to determine those goals. One grantee reported thinking about the *duration and costs of long-term training*, and balancing the *competing goals* of increasing access to education and training with career laddering[7]. Finally, one grantee also considered the strength of its **relationships with employers** when setting its five-year goals.

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[6] HPOG was created by Congress as a national demonstration program with a mandated evaluation. Non-tribal grantees are required to participate in a randomized control trial for the impact evaluation component of a multi-pronged, national evaluation strategy. For more information, see https://www.acf.hhs.gov/opre/research/project/national-evaluation-of-the-2nd-generation-of-health-profession-opportunity-grants-hpog-20-national-evaluation.

[7] A career ladder shows tiers of occupations from entry-level through advanced with training and credentials specified for each level. "Career laddering" means moving up the ladder, from one occupation to a higher-level occupation that likely requires additional training.

Strategies for Developing and Finalizing Goals

Respondents from six of the nine grantees interviewed for this study had limited knowledge about the specific approach their grantee used to set its five-year goals for the HPOG application, either because those staff were not present at the time or they simply could not remember those details.

All of the repeat grantees reported at least starting with, if not almost replicating, their numbers from HPOG 1.0. One grantee reported starting with enrollment in healthcare training because the most important limiting factor was the capacity of training providers, and then working backward from there to overall program enrollment. Another grantee reported starting from total enrollments and then progressing through the other goals. A third grantee reported that each goal was developed independently.

One grantee reported a careful process for determining the number of TANF recipients to enroll. Working closely with the state's TANF administrator, it looked at the number of TANF recipients in each county, removed those served by another program, and then identified the number that might be appropriate for the HPOG program.

Two of the grantees with multiple sites reported working with those sites to develop their five-year goals. One of these grantees reported that it deferred to the expertise of its sites, and as a result, set the goals higher than it had planned. Another grantee described internal negotiations within the staff that resulted in its goals being lower than planned.

Grantees also negotiated their five-year goals with OFA prior to grant award. OFA reported negotiating with approximately half of all grantees. OFA staff estimated that they specifically negotiated performance projections with approximately one-quarter of grantees, but that other grantees changed their performance projections as a result of negotiations related to budget. Among the grantees we interviewed for this study, two reported that they negotiated their five-year goals with OFA. One grantee reported making minor changes due to math errors, and the other grantee reported increasing TANF enrollment and employment projections during negotiations with OFA.

2.2   Establishing Year 1 Goals

In addition to five-year goals, OFA required grantees to include their performance projections for Year 1 in their grant application. OFA staff and grantees reported a few different approaches to setting these goals. The approach employed by some grantees was to divide their five-year performance projections by five. Among the grantees interviewed for this study, two did this for all seven measures; one came close to doing so (exactly for three goals and within a few units for four goals). One grantee did this for five of seven projections; three grantees did this for two projections; and two did not use this approach at all. Among the seven grantees that used this approach for at least one of their projections, all seven used it for TANF enrollment (measure 2).

Three grantees—two of which also participated in HPOG 1.0—set at least some of their projections lower in Year 1 to account for grant start-up delays and/or misalignment between the grant start date and the school calendar. Two grantees set their projections for healthcare training completion (measure 6) and employment (measure 7) lower in Year 1 under the

assumption that fewer than one-fifth of all participants projected to complete training and obtain employment by grant's end would do so at this early stage. Finally, one grantee reported that it frontloaded enrollment in Year 1 to account for the duration of long-term training.

None of the grantees interviewed for this study reported changing its Year 1 performance projections as a result of negotiations with OFA. One grantee explained that it changed its Year 1 projection for one performance measure (measure 2; number of TANF recipients enrolled) to carry through an increase to its five-year goal for this measure.

3. Monitoring and Revising Goals

This section begins with a description of the extent to which grantees monitor their annual and five-year performance projections and the process by which they do so. It then explores the explanations grantees provide for not meeting their goals. Finally, the section concludes with a discussion of the actions OFA and grantees take to address differences between goals and results.

3.1 Monitoring Progress

All grantees reported that they monitor progress toward meeting their goals at least monthly. Grantees review PAGES data independently and/or in meetings with their OFA project officer. Some grantees reported monitoring progress toward their goals more frequently: two grantees review data biweekly, one weekly, and one almost daily.

Among grantees with multiple program sites, two reported that they share PAGES data with their sites, and one receives updates on site progress through biweekly calls with the HPOG 2.0 evaluation site team. Grantees also reported distributing data to staff and partners. Two grantees share data biweekly with staff such as case managers and academic advisors; one grantee reviews data with partner organizations monthly.

Grantees reported that they monitor progress toward their annual goals regularly, and their five-year goals less frequently. OFA staff noted that they typically discuss with grantees progress toward five-year goals quarterly, but may do so more or less frequently, depending on grantee responses to this information. OFA reported that for some grantees, discussion of cumulative progress is motivating, whereas for others it is overwhelming. Two grantees reported that they break down their annual goals into quarterly or even weekly goals; share those with sites and staff; and monitor progress against these goals.

Grantees and OFA staff have monthly phone meetings. Grantees and OFA staff reported that during these calls they review their annual goals and progress toward those goals, discuss potential areas of concern and their causes, and identify strategies for addressing these issues. Grantees reported that these monthly calls are the mechanism through which they notify OFA of potential issues that did or could affect the likelihood of meeting their goals. OFA staff explained that once an issue is identified and discussed on one of these calls, they look for improvement within the next two months, and if progress is not observed, they provide additional assistance to resolve it. OFA reported that they have more formal conversations with grantees about their performance on a semi-annual basis, when they review grantees' PPRs.

3.2 Explanations of Under- and Overperformance

Grantees reported several reasons for not meeting their annual performance goals in the first two grant years. Though by no means an exhaustive list, below are some key reasons for underperformance that emerged in our interviews with grantees. Additionally, a few grantees shared reasons for overperformance on performance goals.

Experiences enrolling TANF recipients

Several grantees noted issues enrolling TANF recipients in their programs. Two grantees reported that the TANF population had decreased due to changes in state-level policy, namely reductions in the length of time individuals may receive benefits. Three grantees reported that random assignment reduced this already limited population of TANF recipients by assigning a portion of individuals to the control group. One grantee acknowledged that shortfalls in its TANF goals resulted from delays in implementing a TANF-specific recruitment strategy.

Grantees also noted conflicts with other programs and offices operating in their states. One grantee explained that a grant program run out of a state agency offering a set of services similar to the HPOG program elected to enroll individuals in its own program rather than referring them to the HPOG grantee. Another grantee explained that other agencies and organizations working with TANF recipients are required to spend their resources on TANF recipients before referring them elsewhere, so they do not have any incentive to refer individuals to the local HPOG program. A third grantee reported that the issue lies with the TANF program's work and education requirements. Because these requirements emphasize short-term training, state agencies serving TANF recipients are reluctant to put them in long-term training because then the agencies will not meet their own performance goals. The grantee reported that some TANF recipients are not interested in short-term training because they perceive the jobs for which they would be qualified for post-training do not pay a livable wage, thus, they choose not to enroll in HPOG.

Grantees also reported other TANF recipient concerns and barriers that hinder their enrollment. Two grantees explained that some TANF recipients are fearful that by participating in the HPOG program they will lose their TANF benefits. Additionally, one grantee reported that many TANF recipients have a high number of barriers to participation which, despite the range of supports HPOG programs offer, can prevent their participation in the first place or delay their movement through basic skills education and healthcare training.

One grantee reported that its overperformance on TANF enrollment resulted from strong preexisting relationships with tribal and state TANF administrators, which facilitated referrals of TANF recipients to their HPOG program.

Delays and timing issues

Five grantees reported that shortfalls in performance measures occurred because project start-up activities delayed the start of recruitment and enrollment by anywhere from five to eight months. These activities included developing budgets, hiring and training staff, putting contracts in place, and setting up systems to manage and operate the grant. This issue was not limited to new grantees; repeat grantees also experienced delays due to start-up, despite their previous experience as part of HPOG 1.0. Two grantees reported delays in getting approval from their states to operate their training program and contract with their selected partners.

Finally, two grantees explained that they underperformed on some of their goals in the first grant year because the HPOG grant period does not align with the college semester schedule. They reported that they had to wait several months to enroll students in certain programs that followed a semester schedule.

Confusion about performance measures

Several grantees reported that they were confused by the definitions of some of the performance measures, which led to shortfalls in meeting the associated performance goals. Three grantees reported confusion with the definition of *basic skills education*. Two grantees explained that they had not been counting all eligible courses provided by the training provider as basic skills courses. One grantee mistakenly believed that basic skills training had to happen simultaneously with healthcare training. Another grantee was under the false impression that to be eligible for basic skills courses, participants were required to have a healthcare credential.

Participant time in healthcare training

Many grantees explained that they underperformed on their goals for healthcare training completion (measure 6) and employment (measure 7) because participants did not move out of training as quickly as the grantees expected.

Seven grantees reported that participant demand for long-term training was higher than they anticipated. Two grantees noted that many participants were electing to move directly from one training to the next, without an intervening period of employment. One grantee reported that in addition to enrolling in long-term training programs, many of its participants were busy completing prerequisite courses for these programs.

One grantee noted that it overperformed on the healthcare training completion measure because participants completed training earlier than expected. These earlier completions resulted from participation in shorter-term training and from participants who began training under an HPOG 1.0 grant but completed training under HPOG 2.0. .

Data issues

Finally, grantees also reported that challenges collecting and inputting data led to shortfalls in meeting their performance projections. Two grantees reported issues with data entry, indicating that the data in PAGES did not accurately reflect their actual progress toward meeting their goals. Three grantees reported that they had difficulty obtaining employment data from participants because once they complete the HPOG program, they become much harder to reach.

3.3   Adjustments to Meet Five-year Projections

This section describes the actions taken by OFA and grantees to address problems observed during program monitoring in an effort to meet five-year projections.

Strategies Employed by OFA

OFA provides support to grantees during their monthly monitoring calls. In addition to making their own suggestions about how to deal with underperformance, OFA also puts grantees in touch with other grantees that have faced similar issues. OFA also offers grantees a range of technical assistance (TA) opportunities:

- **Group TA** provides support to a number of grantees facing similar issues and is delivered in the form of webinars, promising practice briefs, videos, roundtables, and the

annual grantee meeting. These cover such topics as employer engagement, participant recruitment, partnerships, career pathways, systems change, counseling, and others. The HPOG Roundtable Meetings are two-day regional meetings of HPOG grantees that focus on a specific topic each year; the 2017 ones, for example, included workshops, dialogue, and action planning on case management, including executive functioning, coaching, and retention. The HPOG Annual Meeting brings all HPOG grantees together to share promising practices and common challenges, get updates and guidance from ACF, and learn about innovative strategies from each other and from national experts.

- **Individual TA** is tailored to a specific grantee's needs. When a grantee expresses a need for technical assistance an assessment is completed and a TA plan is created on a given topic. A subject matter expert leads the individual TA event for the grantee and may take the form of a webinar, phone call, in-person assistance, or peer knowledge exchange with another grantee. Individual TA was provided to grantees on topics such as employer engagement, case management, and TANF partnerships.

Among the grantees interviewed for this study, four reported taking advantage of other grantee knowledge, individual TA, or a combination of the two.

As described in section 3.1, once OFA staff identify an issue and discuss it with a grantee, they look for progress within two months, and if that does not occur, they provide additional assistance to the grantee. When OFA observes a grantee making little progress against its performance projections over several months, OFA might require the grantee to submit PPRs quarterly rather than semi-annually and to provide concrete examples of how it is addressing areas of underperformance. If grantees systematically fall short of their performance goals and assistance efforts, such as TA, have not helped, then OFA will issue a corrective action letter that requires the grantee to submit a corrective action plan for addressing the issue which outlines steps to be taken to improve performance. OFA then monitors the grantee's progress toward complying with the plan.

OFA reported that it uses performance projections to motivate grantees and hold them accountable to meeting their goals. The HPOG Program has its own performance projections, which it reports to Congress and the public; these are an aggregate of all grantees' individual program goals. OFA encourages grantees to meet their annual and five-year performance goals in order to help the national HPOG Program meet its goals. OFA also reminds grantees that they developed and justified their own five-year and annual goals; they were not assigned them by OFA.

Adjustments to Grantee Programs

In response to issues identified in monitoring progress toward meeting performance projections, and with support from OFA, grantees have made several changes to their programs. These changes were typically made to help recover from shortfalls in their projections. Below are some changes made by multiple grantees as reported in the course of our interviews.

TANF recipient enrollment

To increase TANF recipient enrollment, four grantees reported that they put more resources into developing their relationships with TANF partners and other state agencies that interact with

TANF populations. Two grantees noted that they modified their recruitment materials to make it very clear to TANF recipients that they would not lose their benefits by enrolling in the HPOG program. Finally, one grantee reported expanding outreach efforts by recruiting TANF recipients in new areas.

Basic skills

Five grantees reported challenges enrolling participants in basic skills courses and getting them to complete basic skills courses. As described above, three grantees misunderstood the definition of *basic skills education*. Once their understanding was corrected—by their OFA project officer or by working with PAGES staff—the grantee saw an increase in their performance on these measures.

The fourth grantee reported that changing its eligibility requirements increased its basic skills enrollment and completion numbers. In the first year of the grant, it required that individuals test at a ninth-grade level before they could enroll in the program and complete basic skills courses. At the advice of OFA, the grantee lowered the education requirement to seventh/eighth grade.

To address shortfalls in basic skills enrollment and completion, the fifth grantee made several changes to its program. The grantee determined that enrollment was low in part because participants perceived the basic skills training as either a punishment or a waste of time. To change these perceptions and increase enrollment, the grantee rebranded its basic skills training as "College Prep"; clarified the connection among Test of Adult Basic Education (TABE) scores, basic skills training, and college success; and created an orientation session to help participants feel comfortable in the classroom. To increase completion of basic skills education, the grantee increased the number of basic skills courses to match demand for this training; made the receipt of certain services contingent on completion of basic skills training; and increased the focus on reducing or eliminating barriers (e.g., childcare, transportation) for participants prior to their enrollment in such training.

Shifting focus to short-term training

Four grantees reported shifting the focus of their healthcare training from long-term to short-term to meet their goals around training completions and employment in healthcare (measures 6 and 7). One grantee reported that it shifted to short-term training to better meet the needs of its population, which had very limited educational background and many barriers.

Setting Annual Goals after Year 1

In addition to making adjustments to their programs, many grantees also make adjustments to their annual goals. This happens each spring, when grantees submit their annual performance projections for the following grant year. OFA reported that it typically advises grantees to subtract the number of participants served to date plus the number of participants they realistically expect to serve by the end of that grant year from their five-year goal, and then divide the remainder by the number of years left in the grant. In this way, if a grantee falls short of its goals in a given year, it could try to make it up gradually over the course of the grant. OFA noted that it does allow grantees to use a different approach, as long as the grantees provide a reasonable justification for doing so.

Three grantees reported that this is how they dealt with shortfalls—applying the shortfall evenly across the remaining grant years. Another three grantees reported that they rolled over the full amount of any shortfall into the next grant year. One grantee explained that its approach depends on the extent of the difference between the goal and the result. If the difference is relatively small, the grantee would apply it to the next grant year; if it were larger, the grantee would spread it evenly over all remaining grant years.

All grantees reported using PAGES data to set their annual goals. One grantee supplemented that with data on the academic performance of participants (e.g., results of certification tests). Another grantee reported using labor market data received weekly to inform goal setting.

4. Working Relationship between HPOG Grantees and OFA

This section begins with an account of grantees' and OFA staff's reflections on working together to establish, monitor, and modify performance projections. OFA staff reported that their relationships with grantees work particularly well when grantees perceive OFA staff to be "on the same team" as them. One grantee expressed appreciation that its OFA project officer was interested in understanding the "nuances of [our] community." Another grantee reported that OFA was very supportive of its program and cared about participants, working with the grantee to ensure that the program was accessible to the population it served.

OFA staff and grantees agreed that communication was important to the success of the relationship. OFA staff and grantees have monitoring meetings by phone monthly or more regularly. Three grantees reported they contacted their project officer outside of these regular meetings and always received responses quickly, within the same day or even the same hour. Grantees reported that the availability of OFA staff helped them to feel supported. One grantee reported that it appreciated OFA's communication style, explaining that grantee staff were always comfortable asking questions and sharing ideas without being judged.

OFA staff also reported, and grantees confirmed, that grantees appreciated opportunities to receive TA and connect with other grantees. Two grantees reported receiving TA through OFA, which they perceived to be beneficial. Three grantees reported that OFA connected them to peers facing similar challenges. OFA also noted that relationships with grantees work best when grantees are open to its suggestions, receptive to receiving TA, and honest about the challenges they experience with their program.

Some grantees also expressed frustration about working with OFA staff. One grantee perceived its project officer to be critical of its performance regardless of any improvements in performance or influence of factors that the grantee perceived to be outside of its control, such as projections around TANF. OFA staff confirmed that communication around TANF performance projections was perhaps the most challenging aspect of working with grantees because many grantees have trouble meeting their goals, in part because TANF agencies are focused on employment, while the HPOG program aims to support career laddering. Another grantee reported that it had worked with multiple OFA project officers, all of whom had their own approach to the work. Specifically, each project officer used a different format for Memoranda of Understanding (MOUs) between grantees and their partner organizations, so with each new project officer, the MOUs had to be revised.[8] Finally, one grantee felt that OFA staff put too much emphasis on meeting annual goals; this grantee reported focusing on five-year goals.

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[8] MOUs document informal (nonbinding) agreements between parties related to mutual responsibilities and goals for a specified set of activities.

5. Considerations for Future HPOG Grantees and OFA

At the end of each interview, we asked grantees and OFA staff to reflect on their experience with performance projections. This section begins with a description of grantees' advice to potential future HPOG grantees about how to develop their performance projections. It then summarizes grantees' recommendations about ways to improve the process of developing, monitoring, and modifying performance projections. In addition to the suggestions and advice provided by grantees, we offer some considerations, based on the results of this analysis, for future HPOG applicants, as well as OFA and other federal agencies setting performance projections for grantees.

5.1 Current HPOG Grantees' Considerations for Future Grantees

We asked grantees to share any advice they would offer to potential future grantees around performance projections and documenting progress. Grantees shared suggestions related to four topics: timing, data, knowledge of population and partners, and communication.

Timing

Two grantees advised future grantees to factor in delays related to program start-up when setting their first-year goals. Two grantees suggested that future grantees think carefully about how the college schedule aligns with the HPOG Program schedule and set projections accordingly.

Data

Four grantees shared advice about data. One grantee noted that the process of developing performance projections requires collecting an enormous amount of data from a wide variety of sources, which can be labor intensive. They suggested that future applicants to the HPOG Program start this process early, especially if they do not already have relationships with the agencies and organizations maintaining the needed data. Another grantee suggested using state departments of labor as a resource for data on state, regional, and local labor markets. A third grantee advised future grantees to look at a wide variety of data when developing their projections, including data on demographics and TANF recipients. Another grantee suggested that future grantees ensure they have systems in place for collecting employment information, especially if they are relying on participants to provide it.

Knowledge of population and partners

Two grantees advised future grantees to ensure that they have a deep understanding of the populations they will serve under HPOG and the stakeholders and partners with whom they will work.

Communication

Finally, one grantee advised future (and current) grantees to be honest and forthcoming with OFA about deficiencies in their own programs and to identify solutions proactively.

5.2   Current HPOG Grantees' Considerations for OFA

Grantees shared several suggestions for improvements related to performance projections, approvals, and guidance provided in the FOA and/or by OFA staff.

Performance projections and PAGES

One grantee suggested that OFA consider removing the TANF population from the random assignment requirement, thus expanding the population of potential TANF participants. Two grantees suggested improvements around PAGES. One noted that it was difficult to manage program start-up at the same time that it was required to learn how to use PAGES. It suggested that training on PAGES occur either before or after the most intensive start-up period. The other grantee, which has multiple sites, suggested that PAGES data should be easier to access at the site level to facilitate site-level monitoring.

Approvals

One grantee reported that the HPOG program requirement to obtain approval from OFA for all recruitment materials was onerous due to the number of materials, which slowed the process for placing these materials online and in the community. Another grantee reported that approval of its request for carryover funds[9] took so much time that its institution was resistant to accepting the funds, doubtful they could be spent in the time remaining. Both grantees suggested that the respective approval processes be streamlined to reduce their duration, and that they be clearly defined and documented.

FOA guidance and other topics

Two grantees suggested that the FOA include more guidance about how to set performance projections. One of them proposed the provision of guidance around how to track interim activities that do not fall within one of the seven performance measures. For example, the grantee reported developing its own system, outside of PAGES, for tracking individuals who completed healthcare training but had not yet completed the certification exam required to become employed in the occupation they trained for[10]. The other grantee suggested that the FOA include additional detail in the definitions of performance measures 3 and 4 (beginning and completing basic skills training); for example, what types of courses could be counted as basic skills.

Two grantees made suggestions around program start-up. One proposed that the FOA explicitly advise grantees to take program start-up into account when setting their first-year goals. The other suggested that additional guidance be given, either through the FOA or through OFA,

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[9]   Grantees receive grant funding from OFA annually, and they receive the same amount of funding each year for the five years of the grant. If a grantee does not expend all of its grant funding in one year, it may request to "carry over" funds to the next grant year.

[10]   PAGES allows entry of training completion with a separate field for recording whether the individual received a Professional, state, or industry certification or license.

about what activities are involved in program start-up and strategies for speeding up that process.

5.3   Considerations for OFA from the Analysis

Based on the results of our interviews with HPOG 2.0 grantees, we suggest that OFA address some of the challenges related to enrolling TANF recipients. For example, it could be helpful for future FOAs to require applicants to develop MOUs with their TANF agencies that specify the likely number of referrals from the agencies and the policies regarding whether, for how long, and under what conditions enrollment in HPOG fulfills the TANF work requirements.

Second, OFA should consider grantees' suggestions that future FOAs advise applicants to take program start-up into account when developing their performance projections and that additional guidance be given to grantees about strategies for speeding up the start-up process. Delays due to start-up activities can affect both grantees' ability to meet their projections and the HPOG 2.0 Program's goal to encourage career laddering. We heard from one grantee that the population served by this grant can take approximately one-and-a-half times as long to complete training as the typical student. Considering this pace and the potential need for basic skills education or completion of prerequisites, delays in program start-up could affect a grantee's ability, within the grant period, to put participants through multiple trainings and/or the long-term training that is most likely to result in a livable wage.

OFA did make changes from HPOG 1.0 to HPOG 2.0 to better support the HPOG focus on career laddering. For example, OFA reported that it changed the way it counts healthcare training enrollment and completion such that if an individual completes two sets of training (e.g., Certified Nursing Assistant and Licensed Practical Nurse), each set is counted separately for a grantee toward meeting its training projections. Other changes made were documenting the career pathways levels of the trainings (entry-, mid-, or high-level) that grantees offered and participants enrolled in, so as to better track training progression over time, and giving grantees credit toward projections for participants enrolled in training longer than 12 weeks who have reached the milestone of completing at least half of that training.

6. Conclusion

This special analysis sought to provide insight into how HPOG 2.0 grantees develop their cumulative five-year and annual performance projections. To address this topic, we reviewed grantees' Year 1 and Year 2 PPRs, and selected nine grantees with a range of characteristics that could be related to how grantees establish and modify their projections to interview.

We found that:

- Grantees considered a variety of internal and external factors and data when establishing their five-year performance projections, the most common of which were labor market demand, training provider capacity, and experience in HPOG 1.0.

- Most grantees determined one or more of their Year 1 projections by dividing the five-year totals for these projections by five.

- Most grantees monitored progress towards meeting their goals on a monthly basis, frequently in their monthly calls with their OFA project officers.

- OFA uses a variety of mechanisms to assist grantees in meeting their projections, including group and individual TA, requiring grantees to report on progress more frequently, and when necessary, corrective action plans.

- To address shortfalls across performance projections, grantees made adjustments to their programs to increase TANF recipient enrollment, increase enrollment and completion of basic skills courses, and increase the focus on short-term training. Additionally, grantees revised annual projections for future years to make up for shortfalls experienced in earlier years.

Findings by Criteria

We selected grantees to interview based on five criteria that we hypothesized might be associated with how grantees establish and modify their performance projections. This was not necessarily the case. Below are key findings organized by criteria (see Appendix A for additional information about the selection criteria).

Criteria	Operationalization
Tribal vs. non-tribal grantee	Only one of the grantees interviewed for this study is a tribal grantee, and it reported no considerations unique to its status.
Grantee with multiple sites vs. grantee with single site	Among grantees with multiple sites, two reported working with their sites to develop their five-year performance projections. One of these grantees reported increasing its projections at the advice of its sites, which it determined to have greater expertise.

Criteria	Operationalization
Repeat vs. new grantee	All grantees that participated in HPOG 1.0 reported that this experience informed their performance projections under HPOG 2.0. These grantees considered their goals under their original program, their performance against those goals, and the strategies they used to meet those goals. All grantees used their HPOG 1.0 projections as a starting place for setting their goals under HPOG 2.0, and some grantees replicated one or more of these projections under 2.0.
	More repeat than new grantees reported that the random assignment requirement and the potential for delays in project start-up in the first grant year affected their performance projections. That said, both new and repeat grantees attributed underperformance to delays in project start-up.
Actual performance against first-year goals	Grantees rarely met all of their performance goals exactly. In their explanations for underperformance, grantees pointed to challenges enrolling TANF recipients (affecting measure 2); delays in program start-up and student enrollment (affecting all measures); confusion about the definition of basic skills education (affecting measures 3 and 4); participants moving out of training and into employment at a slower rate than expected (affecting measures 6 and 7); and challenges collecting and inputting data (affecting all measures). Among the two grantees that provided explanations for overperformance, one noted that it exceeded its TANF enrollment goal due to strong relationships with tribal and state TANF administrators, and the other explained that it exceeded its healthcare training completion goal because participants completed training more quickly than expected.
Number of projected training completions, controlling for grant amount.	Four of the five grantees who ranked among the top ten grantees with regards to the number of projected training completions were repeat grantees.
Distribution of participants across short-term and long-term training.	Many grantees reported that participants took longer to complete healthcare training than originally expected when they developed their performance projections, which led to underperformance on this measure. Grantees explained that participants were more interested in long-term training, more likely to continue training without a break for employment, and more likely to need to complete prerequisite courses. To address this, and meet their projections, some grantees increased the focus on short-term training.

Considerations for OFA and Future HPOG Grantees

Based on their experience mid-way through the grant period, grantees offered the following advice to OFA and future grantees around performance projections:

- OFA should remove the TANF population from the random assignment requirement to make it easier to enroll more TANF participants in the program;

- OFA should make PAGES data easier to access for grantees with multiple sites and host a training on PAGES before or after, rather than during, program start-up;

- OFA should streamline its approval process for recruitment materials and carryover funds;

- OFA should revise the FOA to include additional guidance about setting performance projections, tracking interim activities that do not fall within one of the seven performance measures, and the definition of basic skills education.

- OFA should provide advice to grantees about start-up activities and the potential for delays in program start-up, and grantees should consider delays due to program start-up or the college schedule when developing their projections.

- Grantees should collect the data needed to develop their performance projections as early as possible, use state departments of labor to obtain labor market data, consider demographic and TANF status when developing projections, and arrange for or build systems for collecting employment information.

- Grantees should develop a deep understanding of the populations they will serve under HPOG and the stakeholders and partners with whom they will work.

- Grantees should communicate with OFA about any deficiencies in their own programs and proactively identify solutions.

Based on the findings from this study, we recommend that OFA: (1) consider strategies to address challenges related to the enrollment of TANF recipients, and (2) advise grantees to take program start-up into account when developing their performance projections.

Appendix A. Grantee Selection Criteria

Criteria	Operationalization	Rationale
Tribal vs. non-tribal grantee	Choose at least one tribal grantee.	Tribal grantees might differ from non-tribal grantees in how they determine their five-year and annual performance goals.
Grantee with multiple sites vs. grantee with single site	Choose at least one grantee with multiple sites.	Grantees with multiple sites might differ from grantees with single sites in how they determine their five-year and annual performance goals.
Repeat vs. new grantee	*Repeat* grantees are those selected for both HPOG 1.0 and HPOG 2.0; *new* grantees are those selected for HPOG 2.0 only. Choose a similar number of new and repeat grantees.	Repeat grantees' prior experience with the HPOG Program might affect how they determine their five-year and annual performance goals.
Actual performance against first-year goals	Rank grantees by degree to which they overperformed or underperformed against their goals. Choose two or more grantees from the top quarter and two or more from the bottom quarter of performance rankings.	Explore reasons for under- and overperforming vs. goals to better inform strategic planning.
Number of projected training completions, controlling for grant amount.	Full five-year funding amount divided by five-year goals for training completions. Choose some programs with lower and some with higher costs per participant.	Basic decisions about how many individuals to serve per grant dollar might reflect underlying assumptions/decisions about long- vs. short-term training, level of pre-training assistance needed, level of supports needed, encouraging multiple trainings, and other programming choices.
Distribution of participants across short-term and long-term training.	Rank programs by the percentage of participants who have enrolled in short training courses (average length < 3 months). Choose some grantees with a higher proportion of participants choosing short-term training and some grantees with a lower proportion of participants choosing short-term training.	Participant training course choices might be reflected in grantees' strategies behind five-year goals and might or might not meet initial expectations about the number of participants projected to be served. In particular, it will be of interest to explore whether and how grantees make any adjustments to account for unexpectedly high or low numbers of those in short-term courses.

Appendix B. Grantee Selection Criteria for All Grantees

Grantee	Tribal Grantee	Multiple Sites	Repeat Grantee	Performance Against First-Year Results			Number of Projected Training Completions, Controlling for Grant Amount			Proportion of Participants In Shorter-Term and Longer-Term Training[b]		
				Highest	Middle	Lowest	Highest	Middle	Lowest	Highest	Middle	Lowest
Action for a Better Community, Inc.*				x					x	x		
Alamo Community College District			x		x			x				x
Buffalo and Erie County Workforce Development Consortium Inc.			x		x				x		x	
Cankdeska Cikana Community College*	x		x	x			x					x
Central Community College*		x	x		x				x		x	
Central Susquehanna Intermediate Unit			x		x			x			x	

Grantee	Tribal Grantee	Multiple Sites	Repeat Grantee	Performance Against First-Year Results			Number of Projected Training Completions, Controlling for Grant Amount			Proportion of Participants In Shorter-Term and Longer-Term Training[b]		
				Highest	Middle	Lowest	Highest	Middle	Lowest	Highest	Middle	Lowest
Chicago State University*						x	x			x		
Community Action Project of Tulsa County Inc.			x		x		x			x		
Community College of Allegheny County						x		x				x
Cook Inlet Tribal Council, Inc.	x		x	x			x			x		
Eastern Connecticut Workforce Investment Board, Inc.		x			x			x		x		
Edmonds Community College			x	x				x			x	
Goodwill Industries of the Valleys						x	x				x	
Great Plains Tribal Chairmen's Health Board	x				x			x			x	

Grantee	Tribal Grantee	Multiple Sites	Repeat Grantee	Performance Against First-Year Results			Number of Projected Training Completions, Controlling for Grant Amount			Proportion of Participants In Shorter-Term and Longer-Term Training[b]		
				Highest	Middle	Lowest	Highest	Middle	Lowest	Highest	Middle	Lowest
Hostos Community College/RF			x		x				x		x	
Kansas Department of Commerce*		x	x	x			x					x
Missouri Department of Social Services*		x				x			x		x	
Montefiore Medical Center					x				x	x		
Pima County Community College District			x	x				x				x
Rogue Community College District				x			x				x	
San Jacinto Community College District*						x			x	x		

Grantee	Tribal Grantee	Multiple Sites	Repeat Grantee	Performance Against First-Year Results			Number of Projected Training Completions, Controlling for Grant Amount			Proportion of Participants In Shorter-Term and Longer-Term Training[b]		
				Highest	Middle	Lowest	Highest	Middle	Lowest	Highest	Middle	Lowest
Schenectady County Community College			x		x				x	x		
South Carolina Department of Social Services			x		x			x				x
The WorkPlace			x			x		x			x	
Turtle Mountain Community College	x		x			x	x				x	
Ute Mountain Ute Tribe	x					x		x		x		
Volunteers of America Michigan*						x	x					x
Volunteers of America Texas						x		x				x
Workforce Development Council of Seattle - King County			x	x			x				x	

Grantee	Tribal Grantee	Multiple Sites	Repeat Grantee	Performance Against First-Year Results			Number of Projected Training Completions, Controlling for Grant Amount			Proportion of Participants In Shorter-Term and Longer-Term Training[b]		
				Highest	Middle	Lowest	Highest	Middle	Lowest	Highest	Middle	Lowest
Workforce Investment Board SDA-83, Inc.*			x	x			x					x
Worksystems, Inc.				x				x			x	
Zepf Center					x			x				x
Total	**5**	**4**	**17**	**10**	**12**	**10**	**10**	**12**	**10**	**10**	**12**	**10**

SOURCE: Year 1 Performance Progress Reports, from PAGES data
NOTES: An asterisk indicates the grantees interviewed for the special analysis.
[a]For the three non-binary criteria, if a grantee has an "x" in the "Highest" or "Lowest" columns, it ranked among the top ten or bottom ten grantees, respectively. If a grantee does not have an "x" in the "Highest" or "Lowest" columns, the grantee fell in the middle of the 32 grantees.
[b]For this criterion, grantees with an "x" in the "Highest" column have a high proportion of participants in short-term training, and grantees with an "x" in the "Lowest" column have a low proportion of participants in short-term training.

Appendix C. Grantee Topic Guide

As part of the HPOG federal evaluation, the Administration for Children and Families (ACF) has contracted with Abt Associates to conduct a descriptive study examining the development of HPOG grantees' performance goals. As part of the study, we are interviewing nine HPOG grantees. We are also interviewing staff at OFA. Combined information from these interviews, as well as data from all HPOG 2.0 grantees' Performance Progress Reports (PPRs), will inform a research paper on this subject. They study aims to provide transparency around goal setting to help guide interpretation of results and share insights that could help future applicants craft their performance goals.

Your participation in the study is voluntary. No specific remarks or points of view will be attributed to any grantee or individual. Information collected in these interviews will be reported to ACF and the public in the aggregate only.

As described in the topic list we included in our initial email, we will ask about the development of goals for the following seven performance measures.

1. Number of *individuals* that will be **enrolled** in the overall HPOG program
2. Number of *TANF recipients* that will be **enrolled**
3. Number of individual participants that will *begin* **basic skills education**
4. Number of individual participants that will *complete* **basic skills education**
5. Number of participants that will *begin* any **healthcare occupational training**
6. Number of participants that will *complete* any **healthcare occupational training**
7. Number of individual participants that will obtain **employment in a healthcare occupation**

To start, we'll ask you about the *initial development* of your *five-year* and *first-year* performance goals as part of the HPOG application and award process. Then, we will ask about any *changes* you have made to your *annual* goals.

Do you have any questions before we get started?

Background

Before we talk about performance goals:

1. Please state your name(s), your role in [name of grantee's the HPOG program], and how long you have been involved in [name of HPOG program].

Initial Development of Performance Goals

Five-year goals

This set of questions asks about the *development* of your *five-year* goals.

1. What factors did you consider in the development of your *five-year* performance goals? For example, did you consider: training provider capacity, likely demand among the target population for specific types of healthcare training, your institution's experience with healthcare training or training for low-income individuals, your institution's support

service needs (i.e., services that are needed but not provided by your institution), capacity to serve a given number of individuals, educational skill level of your target population, local demand for healthcare workers, support service needs of your target population, percentage of short-term v. longer-term trainings, other factors?

    a. *Probe: For example, what role, if any, did the following factors play:*
        i. *Funding Opportunity Announcement (FOA)*
        ii. *Experience with recruitment for similar programs or populations*
        iii. *Other programs in the community serving the same population*
        iv. *Rates of student "turnover," including time and rates of course completion, choice of "short-term" v. "longer-term" training courses, part-time v. full-time students, dropout rates*
        v. *Local healthcare labor market demand*
        vi. *Past years' performance*
        vii. *Training provider capacity*
        viii. *Educational skill level of your target population*
        ix. *Support services needs of your target population*
        x. *Random assignment requirement (need to recruit more than to serve)*
        xi. *Other factors?*
    b. ***[INTERNAL NOTE: Ask only of returning grantees]*** Are these factors the same or different than the ones you considered under your first HPOG grant?
        i. *How so?*
        ii. *Why?*

2. What data sources did you use to develop your *five-year* goals? Were the data different for different performance measures? If so, how?
    a. *Probe: Did you use labor market information to develop goals?*
    b. Did you receive input from any stakeholders (e.g., local employers, trainers)?
    c. ***[INTERNAL NOTE: Ask only of returning grantees]*** Are these data sources the same or different than the ones you used under your first HPOG grant?
        i. *How so?*
        ii. *Why?*

3. When developing goals, did you start with one performance measure and then derive the other performance goals from these? For example, did you start with employment in a healthcare occupation and then work backwards from there? If you used this approach, in what order did you develop your goals for performance measures? If you did not use this approach, how did you develop your goals?
    a. ***[INTERNAL NOTE: Ask only of returning grantees]*** Is the approach you used the same or different than the one used under your first HPOG grant?
        i. *How so?*
        ii. *Why?*

4. Did you change your performance goals after discussions with OFA as part of HPOG grant award?

5. Are there any other factors or strategies that went into developing these goals that we haven't already talked about?
    a. ***[INTERNAL NOTE: Ask only of returning grantees]*** If so, did you use them under your first HPOG grant?

      b. *[INTERNAL NOTE: Ask only of returning grantees]* Are there other factors or strategies you used under your first HPOG grant that you did not use under your current grant?
          i. *Probe: If yes, please explain.*

6. Has your understanding of the performance goal metrics changed over time, since you initially developed your goals and as you began to use PAGES and operated your program under the HPOG grant?
      a. *[INTERNAL NOTE: Ask only of returning grantees]* In addition to developing benchmarks for new outcomes, did your understanding of metrics change between rounds 1 and 2 (i.e., between PRS and PAGES)?
          i. *How so?*
          ii. *Why?*

First-year goals

We will now ask the same set of questions about the development of your *first-year* performance goals to see if you adjusted any of your five-year approaches for the first-year of operations.

7. What factors did you consider in the development of your *first-year* performance goals? For example, in addition to any of the factors you considered for the five-year goals, what specific factors related to program start-up played an important role in your development of first-year goals?
      a. *Probe: For example, what role, if any, did the following factors play:*
          i. *Funding Opportunity Announcement (FOA)*
          ii. *Marketing and recruitment,*
          iii. *Developing contracts/agreements with training and support service providers,*
          iv. *Hiring and training staff,*
          v. *Developing space and other facilities,*
          vi. *[Non-tribal Grantees ONLY]: Start-up of the evaluation and random assignment, and/or*
          vii. *Other start-up factors*
8. What data sources did you use to develop your *first-year* goals? Were the data different for different performance measures? If so, how?
      a. *Probe: Did you use labor market information to develop goals?*
      b. Did you receive input from any stakeholders (e.g., local employers, trainers)?
      c. *[INTERNAL NOTE: Ask only of returning grantees]* Are these data sources the same or different than the ones you used under your first HPOG grant?
          i. *How so?*
          ii. *Why?*
9. When developing goals, did you start with one performance measure and then derive the other performance goals from these? For example, did you start with employment in a healthcare occupation and then work backwards from there? If you used this approach, in what order did you develop your goals for performance measures? If you did not use this approach, how did you develop your goals?

10. Did you change your performance goals after discussions with OFA as part of HPOG grant award?
11. Are there any other factors or strategies that went into developing these goals that we haven't already talked about?

Monitoring and Developing Annual Goals

This next section explores how you determined your *annual* performance goals. Please look at the table we sent in advance of the call; we also have it displayed on screen.

12. ***[INTERNAL NOTE: Ask only if any explanations provided in PPRs are unclear]*** For *[performance measure x]*, can you clarify the explanation from the PPRs for what you think may be the cause of any differences between your goals and actual results, both for grant years 1 (FY 2016) and 2 (FY 2017)? *[Interviewer instruction: Do this for each performance measure that requires clarification.]*
13. Did you monitor progress toward meeting *annual* goals? If so, how? (e.g., what data is used, what action steps do you take and how frequently?)
    a. Did you discuss progress with OFA?
14. Do you monitor progress toward meeting the *five-year* goals developed at the start of the project? If so, how? (e.g., what data is used, what action steps do you take and how frequently?)
15. Based on these data – and the monitoring process you described – did you (for grant year 2, FY 2017), or do you plan to (for grant year 3, FY 2018), make any adjustments in program activities? If so, please describe these changes.
16. Under what circumstances do you inform OFA about potential/likely issues related to meeting each of your seven performance goals?
17. Did you use performance measure data from grant year 1 (FY 2016) to inform goals for grant year 2 (FY 2017)? What about data from grant years 1 (FY 2016) and 2 (FY 2017) to inform goals for grant year 3 (FY 2018)? If so, in what ways did you use those data? Did the data change your goals; if yes, how so?
18. Did you use any other data sources to inform goals for grant years 2 (FY 2017) and 3 (FY 2018)?
19. Beyond data, what other factors or strategies did you consider or use to develop goals for grant years 2 (FY 2017) and 3 (FY 2018)? Did these differ from the strategies you used to develop first-year and five-year goals? Did these differ between grant years 2 and 3?
    a. *Probe: Did the following factors play a role?*
        i. *Funding Opportunity Announcement (FOA)*
        ii. *Experience with HPOG recruitment*
        iii. *Other programs in the community serving the same population*
        iv. *Rates of student "turnover," including, time and rates of course completion, choice of "short-term" v. "longer-term" training courses, part-time v. full-time students, dropout rates*
        v. *Local healthcare labor market demand*
        vi. *Past years' performance*
        vii. *Training provider capacity*
        viii. *Educational skill level of your target population*

      ix. Support services needs of your target population
      x. Random assignment requirement (need to recruit more than to serve)
      xi. Other factors?

  b. Did your interactions with OFA inform performance goals for grant years 2 (FY 2017) and 3 (FY 2018)? If so, in what ways?

20. Has your understanding of any of the seven performance measures changed over time?
21. Thinking about your interactions with OFA:
  a. What worked well and why?
  b. What did not work well and why?
  c. What would improve those interactions in the future?
  d. Would it be helpful to you if the Funding Opportunity Announcement (FOA) contained additional or different information or guidance?

Do you have any advice for other HPOG grantees about how best to develop useful, accurate performance goals? And how best to monitor and adjust these goals, as needed?

Appendix D. OFA Topic Guide

As you know, as part of the HPOG Next Gen project, the Administration for Children and Families (ACF) has contracted with Abt Associates to conduct a study examining the development of HPOG grantees' performance goals. As part of the study, we are interviewing nine HPOG grantees. We are also interviewing staff at OFA. These interviews, as well as data in grantees' Performance Progress Reports (PPRs) will inform a final paper on this subject. The study aims to provide transparency around goal setting to help guide interpretation of results and share insights that could help future applicants craft their performance goals. The study aims to better understand grantee goal-setting for HPOG 2.0 benchmarks to provide transparency around goal setting and to share insights that could help future applicants craft their performance goals.

Your participation in the study is voluntary. No specific remarks or points of view will be attributed to any individual.

We will ask about the development of goals for the following seven performance measures:

1. Number of *individuals* that will be **enrolled** in the overall HPOG program
2. Number of *TANF recipients* that will be **enrolled**
3. Number of individual participants that will *begin* **basic skills education**
4. Number of individual participants that will *complete* **basic skills education**
5. Number of participants that will *begin* any **healthcare occupational training**
6. Number of participants that will *complete* any **healthcare occupational training**
7. Number of individual participants that will obtain **employment in a healthcare occupation**

To start, we'll ask about you about the *initial development* of your grantees' *five-year* performance goals. Then, we will ask you about the development and monitoring of *annual* goals. Finally, we'll end with a few questions about your experience working with grantees.

Do you have any questions before we get started?

Background

Before we talk about performance goals:

1. Please state your name(s), the names of the grantees you work with, and how long you have been working with HPOG grantees.

Development of Five-Year Performance Goals

1. *[INTERNAL NOTE: Ask this question only of Kim Stupica-Dobbs]* How did you negotiate *five-year* performance goals with your grantee(s) for each of the seven performance measures? What was done during the grant application period and what was done after award?
   a. What internal and external factors were used?
   b. Were any data used?
   c. How does the process compare to the one used in HPOG 1.0?

2. How do you monitor your grantees' progress toward meeting these *five-year* goals?

Development and Monitoring of Annual Performance Goals

3. Please describe how your typical ongoing interaction with grantees happens. Does this vary widely, depending on the grantee?
4. How do you negotiate *annual* performance goals for each of the seven performance measures?
   a. Do you use data from PPRs? If so, how?
   b. What kinds of technical assistance do you provide to grantees?
   c. Has the process changed from one year to the next?
   d. ***[INTERNAL NOTE: Only ask this question of Kim Stupica-Dobbs]*** How does the process compare to the one used in HPOG 1.0?
5. How do you monitor progress toward meeting these *annual* goals?
   a. In what ways and how often do you check grantees' progress toward goals?
   b. Typically, do you or do grantees first communicate about performance issues?
   c. What explanations do grantees provide for under-/overperforming their annual goals?
   d. Do you investigate these explanations? If so, how?
   e. Did you advise grantees to make any adjustments in program activities? If so, please describe these changes.

Working with Grantees

6. Thinking about your interactions with grantees:
   a. What worked well and why?
   b. What did not work well and why?
   c. Do your discussions with grantees vary from one grantee to the next? If so, how?