Better Choices:
Evidence-Based Policymaking Can Improve Florida’s Outcomes
February 2021
Developing and promoting bold, visionary public policy that will empower and uplift Floridians for generations to come.
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Florida is widely known as a low tax/low services state. Florida ranks 35th among the 50 states in the overall status of its children. It trails many other states in key social indicators such as health and education status of its residents. Due in part to the state’s reliance on tourism and services as key elements of its economy, Florida’s average wages are relatively low with residents earning 87.4% of the national average.

Florida does not levy an individual income tax, and its sales tax is applied only to goods with online sales untaxed unless the seller has a physical presence in the state. As a result, Florida’s revenues grow more slowly than the overall economy. When adjusted for inflation, Florida’s revenue collections are still below its pre-Great Recession peak, which was reached in Fiscal Year 2005-06. The COVID-19 pandemic is further straining state resources.

Since Florida is unlikely to raise new revenues to address its current and future challenges, the best path forward is to spend the state’s existing resources more strategically. Evidence-based policymaking techniques hold the potential for enabling Florida to accomplish this goal. These techniques – sometimes called the “Moneyball for Government” approach – use the best research and data on program results to guide policy and budget decisions, targeting resources to programs that work, and eliminating interventions that deliver poor results regardless of intentions. This information is now available from a growing network of research clearinghouses that rate the effectiveness of programs in many policy areas.

This report describes the components of evidenced-based policymaking and how it has been used in several states. It highlights examples of components of this approach used in Florida and makes recommendations of next steps for Florida to take advantage of these techniques including:

- compiling a comprehensive inventory of state programs
- requiring that agency programs be classified by their effectiveness
- giving preference for funding to programs that achieve high returns on investment dollars
- creating monitoring standards to assure programs are implemented with fidelity
- creating a central database of agency performance measures that can be used to issue agency report cards
In 2005, the LeRoy Collins Institute issued *Tough Choices: Shaping Florida's Future*, which examined the fiscal challenges Florida faced shortly before the onset of the Great Recession. The report reviewed expenditure trends in major policy areas (including education, poverty, public safety, transportation, and health care), the revenue sources available to the state and its local governments, and how characteristics of Florida’s economy were expected to impact its budget, including immigration, the growing retiree population, and its labor market. The report concluded that Florida was likely to experience tough choices in the coming years.

In 2014, the LeRoy Collins Institute re-examined these issues in a follow-up report, *Tougher Choices: Shaping Florida's Future*. This report concluded that Tough Choices had been too optimistic in its projections and that the effects of the Great Recession continued to reverberate in Florida. While population growth had resumed, automation hollowed out middle-class jobs in the state, leading to lower growth in per-capita income and workforce productivity than national averages. Additionally, due to falling educational attainment among Florida’s youth and reduced investments in the state’s educational system and infrastructure, these negative trends were likely to continue. The report concluded that Florida was likely to face even tougher choices in the future.

Six years after the publication of *Tougher Choices*, these challenges have continued. The state’s revenues have not recovered from the Great Recession. As shown in Exhibit 1 below, Florida’s general tax revenues – including own-source taxes, fees, and compulsory fees – fell by a full quarter at the bottom of the Great Recession, twice the average of other states. While most states’ revenues, when adjusted for inflation, had fully recovered by 2012, Florida’s tax collections in the first quarter of Fiscal Year 2019-20 remained 6.1% below the peak it reached in Fiscal Year 2005-06, 13 years earlier.

**Exhibit 1**

Florida's inflation-adjusted tax revenues remain below its revenue peak.


Florida’s future revenue outlooks are bleak. The August 2020 Revenue Estimating Conference predicted that the state’s general revenue collections fell by 9.9% in the Fiscal Year 2020-21 and will decline another 5.6% in Fiscal Year 2021-22, for a two-year shortfall of $5.4 billion. The potential to increase state revenues, never very high, will be further constrained by the 2018 Constitutional Amendment that requires that any increases in existing taxes and fees be approved by a 2/3 supermajority vote of the Florida House and Senate. While there is some potential for Florida to receive additional federal funding through Covid-19 stimulus bills, state agencies have been directed to prepare for 8.6% reductions to their Fiscal Year 2020-21 appropriations.

At the same time, Florida continues to experience significant social and economic challenges. The Anne E. Casey Foundation’s 2020 Kids Count report ranked Florida 35th among the 50 states in the status of its children, noting that 62% of the state’s 4th graders were not proficient in reading and 69% of 8th graders were not proficient in math. Additionally, 20% of Florida’s children lived in poverty, and 28% lived in families where parents lacked stable employment. Further, due in part to the state’s reliance on the tourism and services sectors as primary economic drivers, wages in the state are relatively low, with residents earning 87.4% of the national average. Reflecting the high percentage of retirees, Florida’s prime working-age population (ages 25-54) represented only 37.2% of the total population in December 2019.

This combination of a narrow tax base, a largely low skill/low wage economy, a large retiree population, and relatively poor educational performance will continue to create significant demands for public services. However, there is little potential for raising the revenues needed to support these services. Fortunately, there is a path forward that could help the state navigate these challenging conditions. Florida could join a growing number of other states and adopt an evidence-based approach to budgeting, targeting its limited resources to programs that research has shown to generate high returns on investment and eliminating those that fail to achieve desired results.
Evidence-based policymaking is sometimes called the “Moneyball for Government” approach because it focuses on using data to make more strategic budget and policy choices. It mirrors the approach depicted in *Moneyball, The Art of Winning an Unfair Game*, the 2004 *New York Times* bestseller, which tells the story of the Oakland Athletics’ success in using a highly analytical approach to manage its baseball team. By focusing on data showing each player’s impact on the team’s success in winning games, the franchise was highly successful despite having a much lower budget than other teams. “Moneyball for Government” uses this same empirical approach to select and manage the programs that deliver services to the public. It is a holistic technique that seeks to use the best available research and information on program results to guide decisions at all stages of the policy process and in each branch of government. It identifies what works, highlights gaps where evidence of program effectiveness is lacking, enables policymakers to use evidence to inform budget and policy decisions, and relies on systems to monitor implementation and measure key outcomes, using the information to continually improve program performance. By taking this approach, governments can... reduce wasteful spending... expand innovative programs... and strengthen accountability (Pew, 2014, 2).

**THE EVIDENCE-BASED POLICYMAKING POTENTIAL**

While policymakers across the political spectrum tend to agree that governments should fund only those programs that work, it has been challenging to separate the wheat – the effective programs – from the chaff. Advocates typically proclaim that all the programs they favor are highly effective and should be expanded. At the same time, agencies rarely report that a program fails to achieve its mission and should be eliminated.

Evidence-based policymaking recognizes that the best way to determine whether programs are effective is to conduct evaluations that assess clients before and after receiving services and compare these results to those of similar persons who have not received the services. These evaluations have shown that programs vary significantly in their effectiveness. Many interventions have little if any impact, some generate negative outcomes, and a third group is highly successful in attaining desired results. For example, a recent series of randomized control trials – the ‘gold standard’ of these studies – found that only a third of tested teen pregnancy programs achieved a positive impact on measured outcomes (Haskins & Joo, 2017). Similar studies have shown that juvenile offenders served by Scared Straight programs...
are more likely to commit new offenses than are youth who do not receive their services. However, rigorous evaluations have found that other programs, such as Nurse-Family Partnership, Cognitive Behavioral Therapy, and Functional Family Therapy, effectively achieve important outcomes such as improved birth outcomes, lower child maltreatment, and reduced juvenile crime.

Comprehensive information about which programs work and which do not is now available from a growing network of research clearinghouses. These entities review evaluation reports produced throughout the country (and in some cases, across the world), aggregate these studies’ findings, and rate the effectiveness of the examined programs. A recent study identified over 50 of these entities, including the U.S. Department of Education’s What Works Clearinghouse, the U.S. Justice Department’s Crimesolutions.gov, the University of Colorado’s Blueprints for Healthy Youth Development, the United Kingdom’s network of What Works Centres, and the Campbell and Cochrane Collaboratives of participating academics.

Each clearinghouse focuses on specified policy areas. For example, the What Works Clearinghouse assesses educational programs, Crimesolutions.gov rates criminal justice programs, and What Works in Children’s Social Care rates programs serving children and families. To further facilitate access to this information, the Pew Charitable Trust has established the Result First Clearinghouse Database, which enables users to use a single portal to search across nine major research clearinghouses to identify ratings for over 3,000 programs in the areas of adult and juvenile justice, child welfare, behavioral health, early and K-12 education, job training, and public health interventions.

Evidence-based policymaking is also supported by sophisticated benefit-cost analysis models that are now available to compute the return on investment that governments could achieve by funding alternative programs. For example, the Washington State Institute for Public Policy has developed a comprehensive model that uses the findings of rigorous evaluations and state-specific population and fiscal data to analyze and rank over 400 programs in multiple policy areas, including adult criminal justice, juvenile justice, mental health, drug abuse treatment, K-12 education, workforce, and public health.

COMPONENTS OF EVIDENCE-BASED POLICYMAKING

While “Moneyball for Government” focuses on using evidence to inform budget choices, it recognizes that effective management is also critical. As shown in Exhibit 2, the approach includes five key components that create a cycle in which evidence about program results is continuously generated and used to inform budget and policy choices, strengthen program operations, and enhance the outcomes delivered to the public.

Exhibit 2
Evidence-Based Policymaking Incorporates Five Key Components
These key components are explained below:

**Program assessment.** The first step towards evidence-based policymaking is determining whether current programs are likely to be effective. Because most governments lack a comprehensive list of the interventions they fund, this generally requires agencies to compile and report program inventories. Next, these programs should be categorized by the level of available data on their effectiveness (from the research clearinghouses and/or local evaluations), using standard ratings such as ‘effective’, ‘promising’, and ‘no effects’. When feasible, governments can also conduct benefit-cost analyses to identify which programs would generate the highest returns on the investment of taxpayer dollars.

**Budget development.** To enable policymakers to retain effective programs and eliminate ineffective ones, agencies should be required to report program assessment, benefit-cost analyses, and related information in their budget requests. To facilitate this process, legislators can establish policies that give priority to funding evidence-based programs and prohibit agencies from operating programs that evidence has shown to be ineffective.

**Implementation monitoring.** Even the best programs will fail to achieve desired results if they are poorly managed, fail to follow treatment protocols, or use bloated administrative procedures. Accordingly, policymakers should direct agencies to establish strong monitoring systems and use process improvement tools such as Lean and Six Sigma to ensure that programs are efficiently implemented.

**Outcome Reporting.** As President Reagan frequently quoted the old Russian proverb, it is important to ‘trust but verify’. Accordingly, governments should require agencies to report performance data that track the outputs and outcomes of major programs. Program managers and policymakers should regularly meet to review these data, track progress towards policy goals, and identify problematic trends that may require budget or policy changes.

**Targeted evaluation.** While evidence on program effectiveness is now available for many initiatives, others have never been rigorously examined. To subject all programs to the same level of scrutiny, policymakers should require that evaluations be conducted for new and untested programs within set time periods to determine if these activities are effective and warrant continued funding.

Each of these components is important to achieving better outcomes for residents. State leaders cannot effectively target limited resources if they lack information about what programs are receiving funds and whether these activities are achieving desired outcomes. Agencies must be capable of delivering evidence-based programs with requisite fidelity to treatment models and efficient administrative procedures. The results achieved by agencies and private contractors must be systematically tracked to provide accountability and identify problem areas needing corrective action. Finally, the governance system should support ongoing innovation but continually test whether new programs are improving the results achieved on the ground.
GOVERNMENTAL USE OF EVIDENCE-BASED POLICYMAKING

In recent years, both the federal government and a growing number of state and local governments have moved to embed evidence use in their policy and budget processes. Florida, however, has trailed in this area.

At the federal level, Congress, with bipartisan support, has enacted several laws that promote evidence use in policymaking. For example:

— The 2018 Family First Prevention Services Act directs funds to states that implement evidence-based mental health, substance abuse, and in-home parenting programs; authorized programs are listed in the Title IV-E Prevention Services Clearinghouse.

— The Foundations for Evidence-Based Policymaking Act of 2018 (Public Law 115-435) requires federal agencies to establish systematic plans for using evidence to address policy issues, promotes data sharing, mandates agencies to establish Chief Evaluation Officers, and requires annual reports to Congress and the Office of Management and Budget on progress towards these goals (Public Law 115-435).

— Several federal agencies have been directed to create research clearinghouses that curate evaluation findings and rate the effectiveness of programs in their areas of responsibility, including criminal justice, K-12 education, mental health, and child abuse prevention.

— Congress has also directed agencies to require rigorous outcome evaluations of programs funded through federal grants in areas such as teen pregnancy prevention.

Over half of the 50 states have carried out similar steps with the assistance of major philanthropic initiatives. The Results First Initiative, supported by the Pew Charitable Trusts, has provided technical assistance to over 25 states and ten local governments to enable them to create program inventories and target funding to evidence-based programs, including both ‘red’ and ‘blue’ states such as Minnesota, Mississippi, Texas, and Vermont. Many states and local governments have also implemented a customized version of the Washington State benefit-cost analysis model, enabling them to calculate and compare the return on investment they could achieve through evidence-based programs. These governments have also often taken steps to strengthen their program monitoring, outcome measurement, and program evaluation activities.

Results for America, which is supported by nine major foundations, similarly has helped governments advance evidence-based policymaking efforts, particularly in the areas of health care, education, and workforce development. For example, it has held a series of What Works Bootcamps to bring together state officials and national experts to discuss strategies for adopting evidence-based reforms and developing action plans. Results for America also supports local government efforts to carry out evidence-based reforms, and its What Works Cities initiative has helped 100 local governments benchmark their current practices and carry out evidence-related projects. Several Florida cities — Cape Coral, Lauderdale, Gainesville, Miami, Orlando, and West Palm Beach — have participated in the What Works Cities initiative.

In recent years, both Results First and Results for America have issued nationwide assessments of states’ use of evidence-based policymaking. In 2017, Results First released a report that examined states’ efforts to use evidence in their behavioral, child welfare, adult criminal justice, and juvenile justice policy areas. The report concluded that Washington State, Utah, Minnesota, Connecticut, and Oregon were leading states in using evidence-based tools and processes to inform their policy and budget choices in each of these areas. **Florida was classified as taking some initial steps to use evidence, and the Department of Juvenile Justice was cited for creating a program inventory and systematically targeting funding to evidence-based juvenile justice programs.**

A 2019 report by Results for America similarly examined how states used evidence and data to strengthen management and budgeting. The study assessed states’ processes for strategic planning, using performance management and continuous improvement tools, data leadership and management, program evaluation, outcome data collection and reporting, use of evidence and cost-benefit analysis to target funding, innovation, and evidence use in grant programs and contracting. The study cited Colorado, Minnesota, Oregon, Utah, and Washington State as leading states that systematically used evidence, while Maryland, Nevada, and North Carolina were cited as ‘rising stars’ in evidence use. **Florida was noted for taking positive actions in four of the assessed areas.**
Florida and Evidence-Based Policymaking

To assess Florida’s use of evidence-based policymaking techniques, we examined its statewide policies, including relevant statutes, administrative code, and budget instructions. We focused our assessment on the five key elements of evidence-based policymaking – program assessment, budget development, implementation monitoring, outcome reporting, and targeted evaluation. We also analyzed evidence use in three of the state’s primary social service agencies – the Departments of Children and Families, Health, and Juvenile Justice.

**Florida’s Use of Evidence-Based Policymaking**

Overall, we determined that Florida has not established a comprehensive framework to guide and encourage the use of evidence in its budget and management processes. While agencies have taken positive steps in this direction, the state could do much more to ensure that its limited resources are used to deliver highly effective programs to its residents.

**Program assessment.** Florida has not compiled an inventory of state government programs, defined tiers of evidence, or assessed whether research indicates that current programs are effective and achieve high returns on the investment of taxpayer funds. As a result, the state lacks comprehensive information on the number, types, and effectiveness of the programs that agencies deliver to state residents.

Florida does collect some information that could be useful in developing such a program inventory. To help the state track the receipt of federal funds, section 216.103, F.S., requires agencies to maintain an inventory of those programs that are partially or fully funded from federal sources and to report this information to the Executive Office of the Governor and the Legislature upon request. Agencies are also required to record financial transactions in the FLAIR accounting system and to enter a program code for each expenditure. However, these codes are primarily used by agencies to track costs at a project or organizational unit level. For example, among the approximately 3,000 codes are listings for activities such as ‘rules’, ‘training’, ‘clerical’, and ‘planning’ rather than actual programs. As a result, neither of these processes generate a useful catalog of state programs.

While Florida law recognizes that evidence-based programs exist, it has not defined tiers of research evidence or established standard ratings such as effective, promising, or no effects. It also has not required agencies to assess whether their programs have been rated by the national research clearinghouses.
However, in three areas, legislation does recognize that evidence-based interventions can achieve desired outcomes.

Section 1001.215, F.S., requires the Just Read, Florida! Office to work with the Florida Center for Reading Research to identify scientifically researched and evidence-based reading instructional and intervention programs that improve reading performance.

Sections 409.1662, and 409.997, F.S. requires the Department of Children and Families to establish a results-oriented accountability program to monitor the performance of community-based care lead agencies and the subcontractors that provide foster care and adoption services to dependent children. The Department must annually review the providers’ performance, and one of the eight specified elements of this review is to examine the providers’ use of evidence-based, evidence-informed, promising, and innovative practices in recruitment, orientation, and preparation of appropriate adoptive families, matching children with families, supporting children during the adoption process, and providing post-adoptional support. The Department is to use these monitoring findings to inform development and maintenance of an inclusive, interactive, and evidence-supported program of quality improvement, which promotes individual skill building as well as organizational learning.

Section 1004.04, F.S., requires the Department of Education’s rules for uniform core curricula for the state-approved teacher preparation program to include consideration of scientifically researched and evidence-based reading instructional strategies that improve reading performance.

Florida has also made limited use of benefit-cost analyses to determine whether current programs deliver positive returns on investment. Section 288.0001, F.S., requires the Office of Economic and Demographic Research to periodically review the state’s economic development incentive and tourism promotion programs and report the direct, indirect, and induced gains in state revenues as a percentage of the state’s investment. However, these analyses are not required to be performed for other state policy areas.

Budget development. Florida has not established policies that give priority to funding evidence-based programs, and it does not prohibit agencies from operating programs that have been shown to achieve no or negative outcomes. The state does require agencies to submit some relevant information with their budget requests, although this information is often given relatively little attention.

Florida’s Legislative Budget Instructions for the Fiscal Year 2021-22 require agencies to justify their priority budget issues in Exhibit D-3A of their request. Exhibit D-3A is the most detailed level of the Legislative Budget Request and must include a written narrative that explains the justification and impacts of the requested funding. For proposed new programs or services, agencies must clearly articulate why the new program or service is necessary, what entity will perform the service, and why the state should address this need or concern. However, agencies are not required to report whether current or requested new programs are supported by effectiveness evidence or to provide performance metrics showing the outputs and outcomes attained by current programs. Performance measures are reported in the agencies’ Long-Range Program Plans, but these Plans are not incorporated into the budget request process.

Agencies are required to incorporate Schedule IX: Major Audit Findings and Recommendations in their budget requests. In this Schedule, agencies
summarize major findings and recommendations from audit reports issued by the Auditor General or the Chief Internal Auditor in the current and prior fiscal years. Additionally, if agencies are proposing to outsource or privatize a service currently provided by internal staff, they must provide a summary of the analyzed options along with five years of estimated costs and benefits of each analyzed option. Agencies are not required to report other evaluation studies cost-benefit analyses to support their Legislative Budget Requests.

**Implementation monitoring.** The state lacks statewide standards for program monitoring and has done little to build agency capacity to carry out program improvement efforts. This is a common situation for governments, as activities important for ensuring that programs are implemented as intended – including staff training and travel to conduct monitoring visits to program sites – are often among the first areas to be cut when budgets need to be reduced.

**Outcome reporting.** While Florida has a long history of requiring agencies to collect and report performance measures, this information receives little attention or use in the budget and policy process. In the 1990s, Florida adopted performance-based program budgeting and required agencies to develop and submit performance measures as part of their Legislative Budget Requests. Approved measures and performance standards were incorporated in the annual General Appropriations Act. However, the performance measures received little attention during the budget process, and in 2006, the measures were removed from the appropriations process. Instead, agencies were directed to report measures in their Long-Range Program Plans.

Sections 216.013 and 216.1877, F.S., requires all state agencies to maintain a comprehensive performance accountability system that must include approved output and outcome performance measures and standards. These measures are reported in each agency’s Long-Range Program Plan, which is intended to provide a framework for the agencies’ Legislative Budget Requests. The Plans must identify the agency mission, goals, and objectives; relevant trends and conditions; and the programs that will be used to implement state policy and achieve the goals and objectives. These programs are often broadly stated (e.g., “Food Safety and Quality” in the Department of Agriculture and Consumer Services, which includes the activities of multiple units within the agency), rather than listing the specific interventions that the agencies deliver to residents. The Plans must also identify standards for each measure, the prior year’s actual performance, and five-year projections for each measure.

While all agencies submit Long-Range Program Plans each year to the Governor and Legislature, the Plans and their performance measures receive little attention during the budget process. Neither the Governor’s Office of Management and Budgeting nor the Legislature systematically reviews the performance data or issue reports summarizing the information and identifying positive or negative trends. Also, because the Plans are required to provide only a single year of performance data (the prior fiscal year), the reports do not enable readers to track long-term performance trends or identify problem areas requiring policy or budget action.

Some agencies maintain supplemental measures that are required by federal grant requirements or are used to track internal operations. However, there is no central state repository that aggregates these measures and agencies are not required to report these measures to the Florida Legislature or the Executive Office of the Governor.

**Targeted evaluation.** Florida has not established a policy requiring new or untested programs to undergo rigorous evaluations within specified
time periods to determine if they effectively achieve desired outcomes. The state has limited capacity to conduct such studies. Within the legislative branch, both the Office of Economic and Demographic Research and the Office of Program Policy Analysis and Government Accountability conduct policy research and oversight studies on topics selected by the Florida Legislature among their other duties. However, these units conduct few rigorous evaluations that assess program results. Within the executive branch, several agencies have research units that compile required data reports; these units do not regularly conduct rigorous outcome evaluation studies. While agencies on occasion contract with private consultants or universities to conduct these studies, such evaluations are rarely undertaken.

A CLOSER LOOK AT THREE FLORIDA AGENCIES

We took a deeper dive into three social services agencies to assess how they use evidence to inform their operations. The agencies are the Departments of Children and Families, Health and Juvenile Justice. We selected these agencies because there is a significant level of rigorous evidence available about the effectiveness of commonly used interventions within these policy areas.

Our review found that each of these agencies have taken positive steps, although these actions vary widely. The Department of Children and Families has enhanced oversight of its outsourced child welfare services system by creating a dashboard system that tracks information from its child service providers about the quality of care being provided to dependent children. The Department of Juvenile Justice has required its contracted probation and residential treatment providers to deliver evidence-based programs and has established a rigorous monitoring system to oversee these providers. The Department of Health has embraced a data-driven approach to planning and delivering public health services and has established a robust performance management system to guide its statewide activities. However, each of these agencies could take additional steps to ensure that state resources deliver effective services to Floridians.

The Department of Children and Families (DCF). The Department of Children and Families has taken positive steps in the program monitoring and outcome reporting elements. While DCF has many responsibilities, a primary focus is overseeing Florida’s highly decentralized child welfare system. In this system, DCF operates the Florida Abuse Registry which receives allegations of child abuse and neglect. Department staff investigates these complaints in most counties, while sheriff offices in seven counties conduct these investigations. The Department contracts with a network of Community-based Care Lead Agencies to provide in-home supervision, foster care, and adoption services to children determined to be at risk or who are ordered by the courts into state care due to substantiated abuse and neglect complaints. In turn, these Lead Agencies contract with a wide range of local organizations to provide case management, foster care, and adoption-related services to children in state care.

DCF has established a system to monitor the performance of the Community-Based Care Lead Agencies and subcontractors. This system collects and analyzes data from the Department’s information systems as well as ongoing quality assurance case file reviews. DCF publishes monthly indicator reports that track each Lead Agency’s performance on a wide range of output and outcome metrics, depicting whether the Lead Agencies performance is above or below established standards on each metric. These reports also track caseload, staffing, and case timeliness trends throughout the child welfare system. DCF also maintains a publicly
accessible online scorecard that tracks key performance metrics by region, lead agency, judicial circuit, and county.

Although Florida law requires DCF’s annual review of providers to examine the providers’ use of evidence-based, evidence-informed, promising, and innovative practices, its accountability system does not incorporate this element in the monthly indicator reports or the online scorecard. Stakeholders indicate that many local providers are small and lack the capability to deliver evidence-based programs. DCF also has not established a comprehensive inventory of programs delivered by the Lead Agencies and their subcontractors or assessed the extent to which these interventions are supported by evidence of effectiveness. The Department does not maintain the internal capacity to conduct rigorous evaluations of the programs delivered by its staff or providers, although it occasionally contracts with consulting firms and university staff to conduct such studies. Thus, DCF lacks assurance that its contracted providers are delivering high-quality programs that are delivering a high return on investment of taxpayer funds.

**The Florida Department of Health (DOH).** The Department has taken significant steps in the program monitoring and outcome tracking elements of evidence-based policymaking. DOH is highly focused on using data to direct its public health activities, and it has developed an exemplar performance management system. The Department operates through a State Health Office that sets statewide policy and county health departments that deliver local public health services. The county health departments are jointly funded by the Department and their respective county governments and have some discretion in tailoring programs and services to meet local needs.

DOH has developed a comprehensive inventory of its programs but has not defined tiers of evidence or categorized its programs by their level of effectiveness. The Department frequently directs funding to evidence-based interventions, in part because funding sources such as the U.S. Centers for Disease Control and Prevention often mandate this practice. The Department also regularly works with universities and other key research partners to assess Florida’s public health systems. These analyses evaluate the effectiveness of the state’s current policies, programs, and delivery systems, and examine how they could be modified to incorporate evidence-based practices and encourage healthful behaviors.

DOH has established a robust strategic planning and performance management system and emphasizes data-driven decision-making when designing and implementing new health interventions. Every five years, the Department works with key stakeholders to conduct a comprehensive state health assessment, which includes examining extensive disease and mortality data, population health conditions, and negative environmental conditions that affect public health. DOH uses this information to target its activities toward priority statewide health issues, establishing specific goals and objectives for each priority issue. The Department, each division, and each county health department establish strategic plans that incorporate relevant objectives from the statewide plans.

Progress towards state health objectives is continually assessed through the Department’s robust performance measurement system, which is overseen by the Division of Public Health Statistics and Performance Management and tracks 118 measures which assess key outputs and outcomes at both the State Health Office and county health department levels. All performance data and reports are posted on the Department’s Florida Health Performs website, which may be viewed by all staff. Additionally, key public health indicators are maintained in a publicly accessible
website, FLHealthCHARTS.com, which maintains over 3,000 public health statistics at the state and county levels.

To integrate performance data into its ongoing management activities, the DOH has established a network of Performance Management Councils that regularly review the system’s performance indicators. These Councils operate at the agency, division, and county health department levels and include both leadership and key program staff. The Councils meet regularly (quarterly or monthly) to assess progress towards and consider options for addressing identified challenges. The Councils also regularly assess major programs using logic models that show the linkage between resources, activities, outputs, and short- and long-term outcomes for priority populations. Council members consider the need to adjust strategic plans to reflect changes in state health conditions and resources, identify areas for further study, and any additional measures that programs should report.

To provide direction and oversight for program implementation, DOH has established program guidebooks and manuals to help ensure that local program activities are delivered with fidelity with program design. The state health office also monitors local health department implementation compliance with these operating procedures on a rotating quarterly and annual schedule. While DOH has minimal capacity to conduct program evaluations, it has developed a statewide Quality Improvement Plan that identifies needed improvements in Department activities. It has also trained a cadre of Performance Management/Quality Improvement Champions who lead quality improvement initiatives at the state and local level.

The Department of Juvenile Justice (DJJ). The Department has taken significant steps to direct funding towards evidence-based probation and residential treatment programs that serve juvenile offenders who have committed relatively serious criminal offenses. Most of DJJ’s resources are dedicated to these two program areas. The Department has not established policies to target its prevention resources to evidence-based programs, in part because many of these programs are relatively small and/or provide essential services such as runaway shelters.

DJJ requires all probation and residential treatment providers to offer programs from among those listed in its Sourcebook, which catalogs cognitive-behavioral curriculums and community-based family therapies that research has shown to be effective in reducing recidivism and addressing the criminogenic needs of juveniles. The Sourcebook categorizes these interventions into three tiers based on the level of empirical research that is available about their effectiveness. Evidence-Based Practices have been validated through randomized control trials, the highest level of evidence. Promising practices have a standard curriculum and are supported by empirical data, although this research does not meet the required level to qualify as an evidence-based practice. Practices with Demonstrated Effect, the lowest evidence tier, are based on general principles, strategies, and modalities consistent with those found to be effective by criminological, psychological, or other social science research but have not been tested using random assignment or control/comparison group evaluations. Residential and probation programs must generally meet the Evidence-Based Practice criteria.

To help ensure that providers maintain fidelity to the evidence-based treatment models, DJJ provides training and technical assistance to provider staff and conducts fidelity monitoring as needed. Regional staff also monitor providers for compliance with contract requirements using
an evidence-based risk assessment instrument developed by the Florida State School of Criminology. The frequency of this oversight is determined through a risk assessment process, with providers cited for compliance violations or poor outcomes subject to more frequent monitoring.

DJJ requires providers to regularly report performance data via an online portal, including outcome metrics such as new offenses committed during supervision, program completion rates, and post-treatment recidivism. It uses these data, together with criminal justice data, to compile an annual accountability report on all providers. The Department also maintains a Monthly Accountability Scorecard website that tracks juvenile arrest and civil citations across the state as well as admissions to detention, probation violations, judicial commitments to residential programs, and transfers of youth to the adult criminal justice system.

DJJ does not have an internal evaluation unit and relies on national research to identify program designs that effectively reduce recidivism. Its research staff conducted a benefit-cost analysis in 2017 showing the return on investment of alternative treatment programs using the Washington State Institute for Public Policy model, but never released a report on this study. This effort was discontinued after the change in gubernatorial administrations when new leadership had other priorities.
Best Practices for Evidence-based Policymaking and Leading State Examples

National research has identified many best practices for evidence-based policymaking that Florida could adopt to improve the outcomes it achieves for residents. These best practices and examples of the key components of evidence-based policymaking are discussed below.

**PROGRAM ASSESSMENT:**

A critical first step towards evidence-based policymaking is determining whether current programs are likely to achieve desired results. Research shows that many interventions have little impact, others can harm participants, and some are highly effective. Systematically analyzing current programs can enable policymakers to identify and retain effective programs and weed out ineffective ones. Best practices for this key component include the following steps.

**Best Practice: Define tiers of evidence.**
To guide the program assessment process, governments should establish clear criteria for classifying programs by their level of effectiveness. Establishing these definitions helps ensure that programs are judged consistently and provides a common language for discussions about effectiveness evidence.

The Pew Results First Initiative examined evidence definitions established by state laws and administrative policies and identified exemplar evidence definitions:

- **Evidence-based programs or practices** are those with a high level of research demonstrating their effectiveness,
such as multiple rigorous evaluations using randomized controlled trials and evaluations that incorporate strong comparison group designs, or a single large multisite randomized study. These programs typically have specified procedures that allow for successful replication.

 giỏi Promising programs or practices are those with a moderate level of research demonstrating their effectiveness, such as a single randomized controlled trial or a strong comparison group study.

いい Theory-based programs and practices have been tested using less rigorous research designs that do not meet the evidence-based or promising standards. These programs and practices typically have a well-constructed logic model or theory of change.

いい Programs lacking evidence of effectiveness have either not been tested with rigorous research designs or have been found ineffective by such research.

Best Practice: Classify programs by their level of evidence. Once program inventories are available and evidence definitions are established, staff can rate each program and assign it to the appropriate category, such as evidence-based, promising, theory-based, or lacking evidence of effectiveness. This analysis can consider both the evidence ratings available from evidence clearinghouses as well as in-state evaluation results and performance data.

For example, Minnesota’s Office of Management and Budget has inventoried state programs and categorized them by their level of evidence. It maintains this inventory in a searchable database (https://mn.gov/mmb/results-first/inventory/) that lists over 500 agency programs, their evidence ratings and service descriptions, and links to the research clearinghouses that were used to classify each programs’ effectiveness. This database enables policymakers, agency leaders, providers, and citizens to quickly review what programs the state is delivering and whether these activities are likely to achieve desired outcomes.

Best Practice: Analyze the benefits and costs of alternative programs. A growing number of states are conducting sophisticated analyses that compare programs’ return on investment, enabling policymakers to identify options that can generate ‘the biggest bang for the buck’.

Washington State is a national leader in this area. The Washington State Institute for Public Policy (WSIPP), a legislative research unit, has developed a cutting-edge analytical model that uses the findings of high-quality evaluations and state-specific population and cost data to calculate the potential returns on investment that the state could achieve by funding alternative evidence-based programs. The Institute regularly issues reports ranking of over 400 programs across 11 policy areas, including adult and juvenile justice, child welfare, Pre-K to 12th-grade education, children’s and adult mental health, substance abuse, health care, higher education, and workforce development to state cost and population. These reports estimate each programs’ costs and the benefits they would achieve for taxpayers, society, and program participants if implemented with fidelity. More information is available at https://www.wsipp.wa.gov/BenefitCost.
BUDGET DEVELOPMENT:

As a central goal of evidence-based policymaking is to inform policy and budget choices, governments should establish mechanisms for using ‘What Works’ data in their legislative processes. This can be done by requiring agencies to report performance information in their budget requests and establishing policies that give priority to funding evidence-based programs. Best practices for this key component include the following steps.

**Best Practice: Integrate performance data into the budget process.** Agencies should be required to report performance metrics (output and outcome measures) and other relevant information such as findings from evaluations and audits as part of their budget requests. This information should be presented in formats such as report cards that facilitate its use by busy policymakers and their staff. When appropriate, this information should also be presented and discussed in budget meetings.

**Colorado, Minnesota, and Mississippi** are exemplars in this area. **Colorado** requires state agencies to submit performance reports as part of their legislative budget request. Minnesota’s Management and Budget agency require agencies to justify requests for continued funding with performance data demonstrating that the program achieves desired results.

**Mississippi** has established a detailed screening process for funding requests, requiring agencies to document a program’s need, design, evidence of effectiveness, implementation and fidelity plan, and performance metrics. Staff review this documentation and make negative funding recommendations if sponsors do not provide sufficient answers to these questions.

This documentation requires agencies to address a series of questions, including: program premise, needs assessment, program description, research and evidence filter, implementation plan, fidelity plan and measurement and evaluation.

**Best Practice: Establish mandates and incentives that target funding to evidence-based programs.** This can be done through an appropriations screening process, statutory requirements, and performance-based contracts. Several states mandate that requests for new funding be justified with evidence showing that new programs are likely to be effective.

**Tennessee** and **Oregon** are exemplars in this area. Tennessee mandates that its Department of Children’s Services allocate 75% of appropriated funds to evidence-based programs; this requirement was phased in over five years. **Oregon** has similarly mandated that five social service agencies dedicate 75% of funds to evidence-based programs, with the mandatory percentage increasing every two years until the target was reached. In both states, agencies received technical assistance during the phase-in period to identify evidence-based program options.

IMPLEMENTATION MONITORING

Even the best programs will fail if they are poorly managed or use bloated administrative procedures. Accordingly, governments must ensure that agencies establish strong monitoring systems and use process improvement tools to ensure that programs are effectively and efficiently delivered. Best practices for this key component include the following steps.
Best Practice: Establish implementation guidelines and monitoring systems. Evidence-based programs will not be successful unless they are implemented with fidelity to their treatment protocols, such as ensuring that staff are adequately trained, appropriate clients are served, and intended treatment levels are provided. Accordingly, agencies should be required to establish implementation requirements, incorporate these standards into provider contracts, and conduct ongoing monitoring to ensure that field sites and contractors implement programs as intended.

Colorado, Pennsylvania, and Washington State are exemplars in this area. Colorado has established the Evidence-Based Practices Implementation for Capacity Center, which provides implementation support to state and local criminal justice programs. Pennsylvania has created Evidence-based Prevention and Intervention Support Centers that provide technical assistance to state and local organizations delivering a wide range of juvenile justice programs to improve implementation quality, promote program impact data collection and use, and foster long-term program sustainability. Washington State has mandated that agencies establish implementation standards and provides funding to support ongoing fidelity monitoring. It took these steps after making a significant investment in community-based functional family therapy, an evidence-based alternative to incarceration for juvenile offenders that research had shown to be highly effective in reducing recidivism. However, a subsequent evaluation found that these benefits were achieved only when providers implemented the program with fidelity — juveniles treated in these sites had a 38% reduction in recidivism, saving $10.69 for every dollar invested. In contrast, juvenile recidivism increased by 16.7% in sites where providers did not follow treatment protocols, resulting in the loss of $4.18 for every dollar invested.

Best Practice: Adopt business process improvement tools. Many government programs rely heavily on administrative processes, which can often be streamlined with the Lean and Six Sigma process improvement approaches widely used in the private sector. These techniques help agencies develop a culture of continuous improvement and reduce bureaucracy, improve customer service, and eliminate waste. Accordingly, governments should require agencies to train staff in these techniques and conduct regular business process reviews.

Colorado is an exemplar in this area and has created a Lean Academy that has trained over 3,000 state and local staff in using this business process improvement technique. Since 2011, these staff conducted over 800 projects that have streamlined administrative procedures, cut the time needed to complete tasks such as issuing permits, and reduced program costs.

OUTCOME REPORTING

As President Reagan frequently quoted the old Russian proverb, it is important to ‘trust but verify’. Accordingly, governments should require agencies to report the outputs and outcomes being achieved by their programs. This data allows managers to monitor key factors such as caseloads and completion rates and policymakers and the public to track progress towards policy goals and identify problems that may require budget and policy changes. Best practices for this key component include the following steps.

Best Practice: Require agencies to develop performance measurement systems that capture the agreed-upon output and outcome data. Evidence-based programs, when carefully implemented, are likely to achieve beneficial outcomes. However, this success is not automatic. Agencies should be required to
routinely measure both the outputs they are delivering (such as the number of children served and the percentage of clients who complete a drug treatment program) and the outcomes being achieved (such as the percentage of children who read at grade level and the percentage of clients who complete a drug treatment program and remain drug-free one year after leaving the program).

Almost all states, including Florida, require agencies to collect and report some performance data. However, these metrics are often very incomplete, omit key outcomes, and are of dubious validity and reliability. Accordingly, these metrics should be reviewed and approved by budget officials and policymakers to ensure that the data being collected meets these leaders’ needs. When incorporated into contracts, these metrics also help to hold private and non-profit providers accountable for meeting service level requirements and attaining desired results.

Good sources of potential measures include other governments, research clearinghouses, and national initiatives. For example, the Social Genome Project (https://www.brookings.edu/the-social-genome-project/) has identified a comprehensive set of key outcomes that children and youth should meet as they grow up to become successful adults. Governments can use these metrics to track whether children receiving social services are on track to become self-sufficient adults.

**Best Practice: Adopt user-friendly mechanisms for reporting performance data to policymakers and the public.**

Performance data is of little value if it cannot be located, is difficult to interpret, or is untimely. Governments can create easy-to-use reporting mechanisms such as performance dashboards and reports cards that enable managers and policymakers to compare current performance to established benchmarks.

Several states are exemplars in this area. New Mexico requires state agencies to report agreed-upon performance measures to the Legislative Finance Committee, which issues quarterly report cards comparing current performance to standards set by the Legislature, identifying problematic trends that the Legislature may wish to address in its policy and budget processes (more information is available on https://www.nmlegis.gov/entity/lfc/Agency_Report_Cards?Date=8%2f26%2f2020+12%3a00%3a00+AM).

Minnesota has developed a dashboard system that compares state performance to exemplar states. Virginia has established the Virginia Performs web portal, which collects and reports a wide range of performance data for all areas of state government. This system is managed by the bipartisan Council on Virginia’s Future, which is headed by the governor.

**Best Practice: Hold regular forums where program and leadership staff discuss performance trends and develop strategies for resolving problems.**

Many states have established learning forums where staff and leadership regularly meet to discuss performance data, identify problem areas, and discuss options for turning problem areas around. These sessions are often called “performance-stat” forums, building from the example of the New York Police Department which regularly brought together department leadership and precinct captains to discuss crime trends and craft solutions such as deploying officers to ‘hot spots’ where crime was regularly occurring. These data-driven sessions focus on specified goals, build a shared understanding of challenges, and encourage creative problem-solving.
Wisconsin and Washington State have innovative programs in this area. Wisconsin requires agencies to report quarterly performance data to the Governor’s Office, and staff of the Governor’s Office and Department of Administration meet semi-annually with the leadership of each state agency to discuss progress towards established goals. Washington State holds similar monthly sessions in which selected agencies meet with the governor’s staff (and sometimes the governor) to review performance measures, examine progress towards statewide goals, and discuss options for resolving problematic areas.

TARGETED EVALUATION

While “What Works” evidence is now available for many programs, governments continue to operate other interventions that have never been rigorously examined. To subject all programs to the same level of scrutiny, new and untested programs should be evaluated to determine if they are effective and warrant continued funding. Best practices for this key component include the following steps.

**Best Practice: Create administrative data warehouses to facilitate long-term outcome tracking.** A key factor affecting the cost of evaluation studies is the need to track clients (and comparison/control groups) over time to measure lasting outcomes. These costs can be dramatically reduced if clients can be tracked through agencies’ administrative data systems.

**South Carolina** and **Florida** are exemplars in this area. South Carolina has created an integrated data warehouse that links client records across multiple agencies, enabling researchers to track clients’ interactions with the state’s child welfare, health, education, criminal justice, and economic security programs. This has dramatically reduced the expense of evaluation studies and has enabled research to provide more comprehensive assessments of client outcomes. Florida has established the K-20 Education Data Warehouse, maintained by the Florida Department of Education, which tracks the educational performance of all students who attend the state’s public schools and universities as well as their later workforce earnings.

**Best Practice: Require pilot projects to undergo rigorous evaluations.** Governments frequently establish pilot projects to test a policy approach. However, these projects often continue for many years and are sometimes expanded without their effectiveness ever being tested. Governments require new programs to be evaluated within a specified time (such as five years) to qualify for continued funding.

The appendix of this report describes in more detail the Evidence-Based Policy approaches in three states: Colorado, New Mexico, and Washington.
Summary and Recommendations –
Next Steps for Florida

As predicted by the LeRoy Collins’ Institute's Tough Choices and Tougher Choices reports, Florida continues to face a significant challenge in meeting the needs of a rapidly growing and highly diverse state. Florida trails many other states in key social and economic indicators such as its rate of childhood poverty, the health and educational status of its residents, and the average wages paid to workers. Further, the state is highly vulnerable to environmental threats such as hurricanes and sea-level rise.

Florida’s ability to address these problems through public policy is constrained by its long history as a low tax/low services state. Florida’s government relies on a narrow base for revenues – it has no income tax and sales taxes are collected only on goods purchased from sellers with a physical presence in the state. When adjusted for inflation, Florida’s tax collections have not recovered from the Great Recession, and the Covid-19 pandemic is projected to further reduce its revenues by $5.4 billion. Given constitutional and political constraints, it is highly unlikely that Florida will increase taxes to expand public services.

How then, can Florida address its pressing challenges? The best path forward is to spend the state’s existing resources more strategically, and evidence-based policymaking techniques hold the potential for enabling state leaders to accomplish this goal. This “Moneyball for Government” approach is being successfully used by many states to target resources toward programs and services that high-quality research has shown to generate positive outcomes and strong returns on the investment of tax dollars. Exemplar states are reporting substantial benefits, including improved educational outcomes, reduced crime, and strengthened accountability.

While some Florida agencies are taking positive steps in this direction, the state government has lagged in using evidence-based policymaking approaches. Florida lacks a comprehensive list of its programs and has limited assurance that these interventions are effective. Program monitoring is often underfunded, performance data receives little attention, and the state has limited capacity to evaluate programs to determine whether they are effective.

Florida can move forward by making better use of evidence to inform its budget and management processes. Specifically, it should consider the following actions:

**Compile a comprehensive inventory of state programs.** This could be done by modifying Section 216.013, F.S., to require agencies to report program listings in their Long-Range Program Plans, providing a uniform definition of a ‘program’ so agencies will report this information consistently.
Require a central entity, such as the Executive Office of the Governor, the Joint Legislative Budget Commission, and/or the Office of Program Policy Analysis and Government Accountability to classify agency programs by their evidence of effectiveness. To facilitate this process, the state should establish standard definitions for evidence in either statute (Chapter 216, F.S.) or Legislative Budget Request Instructions. These definitions should incorporate exemplar definitions of evidence tiers used by other states and the Department of Juvenile Justice such as evidence-based, promising, and theory-based.

Assign responsibility to an entity to implement and customize a nationally recognized benefit-cost analysis model such as that developed by WSIPP and publish reports estimating the return on investment that Florida is achieving and/or could achieve through alternative evidence-based programs. This responsibility could be assigned to the Office of Economic and Demographic Research and/or a consortia of state universities.

Establish a policy, in either Section 216, F.S., or Legislative Budget Request Instructions, giving preference to funding evidence-based programs that achieve high returns on the investment of taxpayer dollars similar to that used by the Department of Juvenile Justice. Where feasible, agencies should be required to increase the percentage of funds allocated to evidence-based programs over time. This policy should require pilot programs to undergo rigorous evaluations within 5 years to determine whether they are achieving intended goals and are worthy of continued funding.

“Taking these steps would enable Florida’s leaders to make better choices towards building the state’s future.”
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Appendix: State Profiles of Colorado, New Mexico and Washington

States that have embraced evidence-based policymaking, including Colorado, New Mexico, and Washington State, have reported achieving significant benefits through the approach, including cost savings, service improvements, and improved outcomes for state residents. Each of these states built their systems over time and at a relatively low cost. Profiles of these leading states are below.

COLORADO

Colorado has implemented several evidence-based policy initiatives. These include inventorying current programs and targeting funding to evidence-based interventions, using the Lean process improvement approach to increase efficiency and reduce costs, establishing a robust strategic planning and performance system, and building the state’s capacity to conduct rigorous outcome evaluations. These efforts were initially led by the Governor’s Office and have gained significant legislative support over time. These steps have successfully informed state policy and budget decisions, targeting resources to evidence-based interventions, streamlining agency operations, and improving customer service.

In 2014, Colorado began to inventory its current programs in selected policy areas, assess the level of evidence for each program’s effectiveness, and conduct benefit-cost analyses that compare the return on investment each would generate. Colorado has used this approach to analyze its adult criminal justice, juvenile justice, child welfare, behavioral health, and prevention programs. The state has made significant program and policy changes based on these analyses. For example, after determining that its correctional education and treatment programs for high-need, high-risk offenders had poor performance and generated negative returns on investment, the state redirected funding to an evidence-based cognitive behavioral therapy program. Also, the state used the approach to select and implement the Communities That Care initiative in its county-level juvenile justice programs; this comprehensive, evidence-based approach has been shown to be effective in treating youth substance use. Colorado also has required agencies to justify budget requests for new programs with research demonstrating the programs’ effectiveness, benefit-cost summaries,
and plans to test the programs’ effectiveness through rigorous research methods. In fiscal 2020-21, the state strengthened this requirement by creating an evidence continuum to help agencies assess the evidence supporting their requests, and it increased the required information on performance measurement and implementation.

To improve its implementation monitoring efforts, Colorado created the Performance Management Academy, which has trained over 3,000 employees in using Lean continuous process improvement techniques to streamline services and reduce costs. This effort has achieved results such as cutting the average wait time for driver’s licenses from 40 to 20 minutes; reducing the time needed to process pharmacist licenses from 188 to 14 days; increasing the percentage of oil and gas complaints addressed within 30 days from 22% to 70%. To help ensure that evidence-based programs are implemented with needed fidelity to treatment models, Colorado established the Evidence-Based Practices Implementation for Capacity Center, which provides training and technical assistance for state and local criminal justice programs.

Colorado also established a strategic planning and performance management system to clarify agency goals and track critical outputs and outcomes. This system is governed by the State Measurement for Accountable, Responsive, and Transparent (SMART) Government Act, which provides broad parameters for the process, including planning, management, data collection and reporting, and evaluation activities. To track progress towards state goals and provide public accountability, Colorado uses a performance dashboard that measures the state’s success in achieving these goals.

Finally, to build its capacity to carry out rigorous evaluations, the state created the Colorado Evaluation and Action Lab, located within the University of Denver. The Lab works with agencies to plan and carry out evaluation studies, including randomized control trials, incorporate data collection activities within new programs to support future studies, and provide research support to state and local government agencies.

NEW MEXICO

New Mexico has established a robust evidence-based governance system that incorporates many key components of the approach. The impetus for this continuing effort, as noted by a senior state official, has been that “New Mexico is a poor state that generally ranks close to the bottom in nationwide comparisons of social indicators. We do not have much money and need to make sure that we spend our limited resources wisely and get the best possible return on investment.” This reform effort has been led by the New Mexico Legislature and began in 1999, when the Accountability in Government Act was passed, which was revised and strengthened in 2004. The Act created a system in which all agencies must establish performance measurement systems and granted them greater budget flexibility in exchange for strong legislative oversight. Agencies are required to identify strategic priorities, inventory current programs, report agreed-upon performance metrics quarterly, and incorporate this information in annual budget requests.

The state’s Legislative Finance Committee coordinates the use of the evidence-based policymaking tools within the legislative process. Its staff analyzes the performance data reported by agencies and publishes quarterly report cards on each state agency assessing its progress against designated benchmarks (see an example on pages 41-42). Committee staff also conducts rigorous evaluations of state programs at the direction of legislators and have implemented a customized version of the benefit-cost analysis model developed by the Washington State Institute for Public Policy.
This has enabled Committee staff to provide members with detailed estimates of the return on investment that the state could achieve through funding evidence-based programs. For example, a recent analysis concluded that by targeting fifty percent of the state’s juvenile justice and mental health treatment appropriations towards evidence-based programs, taxpayers would receive $20 million in social benefits such as reduced crime and would avoid spending $15 million in future incarceration costs, thus producing a net benefit of $35 million. To incorporate this information into the legislative process, the Committee holds regular hearings on agency performance, and it considers this information when making its appropriations decisions.

New Mexico has also adopted several evidence-based policymaking mechanisms to bring ‘what works’ information into the legislative process. The Legislative Finance Committee publishes an annual statewide policy analysis report that is given to all legislators; this report uses performance metrics, evaluation findings, and other oversight data to analyze the state’s progress in each major policy area and identify issues the Legislature may wish to consider in its annual session. To enhance the use of evidence in the budget process, the 2019 Legislature enacted the Evidence and Research-Based Funding Requests Act, which extended the Accountability in Government Act and required agencies to prioritize evidence-based programs and report the extent to which funding is allocated to programs that meet specified evidence criteria. The state has used this approach to allocate over $500 million to evidence-based programs across the state.

While much of this activity has been centered in the legislative branch, New Mexico has taken steps to bring executive branch officials into this oversight process. The state is currently implementing a performance-stat reform in which both legislative and executive branch officials jointly meet to discuss data collected from these reporting mechanisms and consider potential solutions to identified performance problems.

This comprehensive approach to using evidence has achieved significant improvements to the state’s performance outcomes. For example, a policy priority in New Mexico has been to improve educational outcomes for low-income students. The state’s performance measurement system showed that these students often fail to graduate from high school. To explore the reasons for this problem, the Committee’s evaluators did a series of studies that found that low-income students frequently entered the school system with significant deficits in educational skills and were up to two years behind when entering school; while these students made reasonable progress after entering school, they never caught up with other students and thus were at a high risk of dropping out before graduating from high school. To identify evidence-based programs that the state could use to address this problem, the committee staff reviewed national research on early intervention programs. As noted by the Deputy Director of the Committee,

“Our review of the evidence indicated that educationally-rich pre-kindergarten preparation programs could be highly effective in helping low-income students improve their skills and the Legislature began making significant investments in these programs. To determine whether these programs were succeeding in closing the performance gap, we did follow-up studies which followed students who attended preschool programs through third grade. These evaluations showed that preschool was only effective in helping students
catch up when kids attended high-quality programs. To address this problem, the Legislature established a quality rating system for preschool programs and has shifted funding to high-rated preschools that offered educationally rich programs. (Sallee, 2020).

New Mexico’s experience shows that a comprehensive approach to evidence-based policymaking can effectively address complex problems. The state has used strategic planning to clarify key policy objectives, evidence-based interventions to pursue these objectives, implementation oversight to ensure that programs are implemented as intended, performance measurement and reporting to track progress, and rigorous evaluations to identify the causes of performance problems and recommend corrective action steps. Each reform has supplemented the others, and the system has helped ensure that the state uses the best available evidence and a highly disciplined approach to improve its policy outcomes.

New Mexico’s experience also demonstrates that establishing an evidence-informed governance system requires leadership commitment and does not happen overnight. The state has developed this system over a period of many years, and the Legislative Finance Committee has provided ongoing training to educate legislators and agency officials about evidence, performance measurement, and evaluation. While the state continues to experience challenges such as rural poverty and poor public health outcomes among low-income groups, it has made tangible progress in addressing these problems by adopting evidence-based approaches.

WASHINGTON STATE

Washington State has long been a leader in evidence-based policymaking and has taken steps to systematically assess its current programs, inform its policy and budget decisions through benefit-cost analyses, monitor program fidelity and outcomes, and conduct ongoing evaluations. These actions have been led by both the legislative and executive branches.

Washington State has established formal definitions of tiers of evidence and has compiled inventories of behavioral health, criminal justice, juvenile justice, and child welfare programs that meet the evidence requirements of each tier. These definitions and inventories were developed by the Washington State Institute for Public Policy (WSIPP) and the University of Washington’s Evidence-Based Practice Institute and are updated annually. The state requires its social service agencies to target funding to evidence-based programs and training whenever these interventions are available. This requirement has been phased in, with a target to increase the percentage of funding dedicated to evidence- and research-based programs by 7.5% per year.

To inform state policy and budget decisions, WSIPP has developed a nationally recognized benefit-cost analysis model that uses the findings of high-quality evaluations and state-specific population and cost data to calculate the potential returns on investment that the state could achieve by funding alternative evidence-based programs. WSIPP regularly issues reports ranking over 400 programs across 11 policy areas, including adult and juvenile justice, child welfare, Pre-K to 12th-grade education, children’s and adult mental health, substance abuse, health care, higher education, and workforce development. These reports may be accessed at https://www.wsipp.wa.gov/BenefitCost. WSIPP also regularly
conducts outcome evaluations that assess the effectiveness of state government programs, with these studies initiated by the Institute's Board which includes legislators, executive branch officials, and university representatives.

To support implementation monitoring, Washington State established the Evidence-Based Policy Institute at the University of Washington to provide training and technical assistance to behavioral health providers on evidence-based practices. The state also has developed program quality assurance manuals that provide detailed standards for treatment, provider oversight and selection, and are designed to ensure that programs maintain adherence to evidence-based models. The Legislature has built funding for implementation oversight into the base funding for social service programs to ensure that provider oversight is not sacrificed when budget reductions must be made.

Washington State also established a robust performance measurement system. The Results Washington database tracks over 190 performance measures and issues monthly progress reports on key outcomes such as reducing poverty and improving health outcomes. Results Washington also conducts monthly Results Reviews in which agency leaders and Governor's Office staff meet in public forums to discuss agencies' current performance, barriers to improved performance, and strategies for addressing these barriers.
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