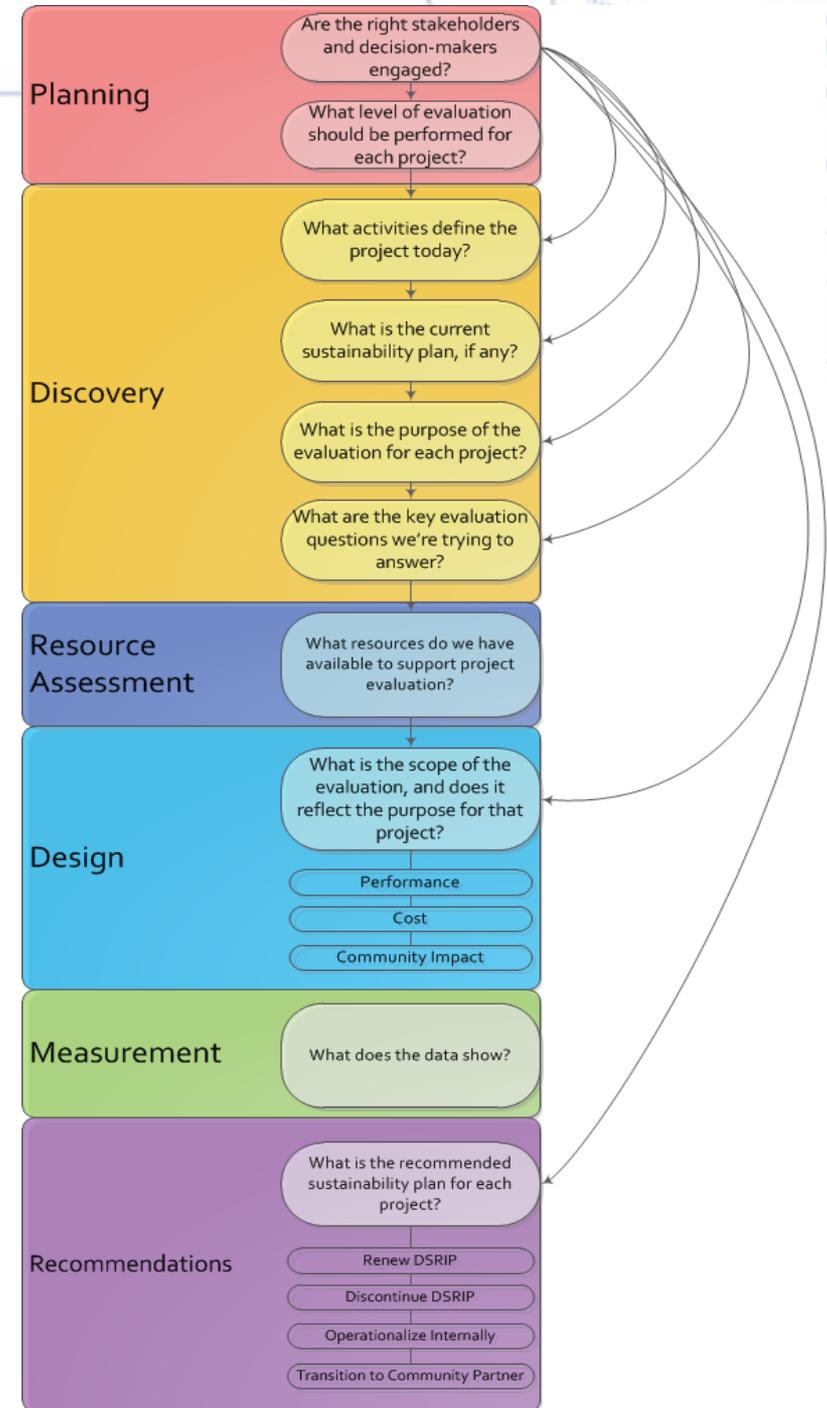
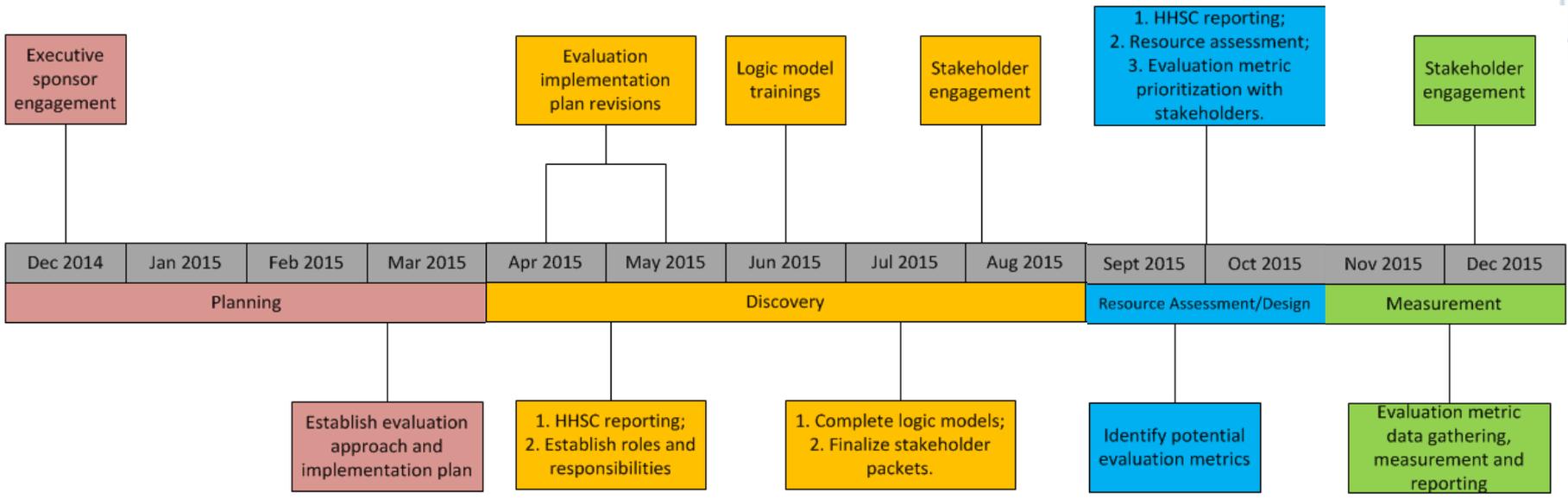


Operationalizing Evaluation Strategy

1. Identify key:
 - Process phases;
 - Information required to move forward;
 - Decision points.
2. Develop living work plan;
3. Develop tools to support movement through work plan;
4. Engage your stakeholders across all phases.



Implementation Timeline

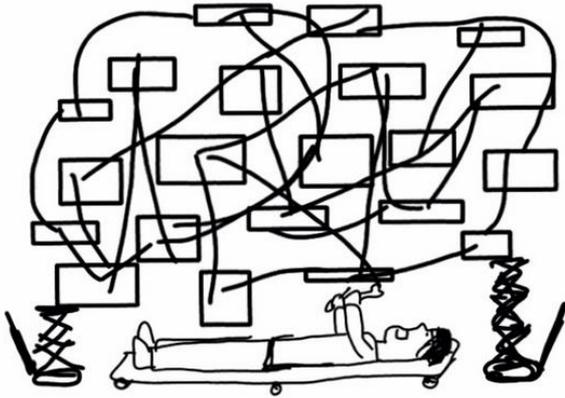


Leadership and Stakeholder Engagement



- Developed stakeholder packets to provide project summary information to all stakeholders, including:
 1. Executive summary;
 2. Logic model;
 3. Project slide summaries describing DSRIP metrics, MLIU%;
 4. Budget;
 5. Formal assessment and stakeholder feedback tools to drive discussion around sustainability planning.

At the logic model repair shop ...



So, I'm guessing this is for a comprehensive program-level intervention

freshspectrum.com

Mother Goose Logic

You're right, after thinking it through, I'm not sure how the one leads to the other



freshspectrum.com

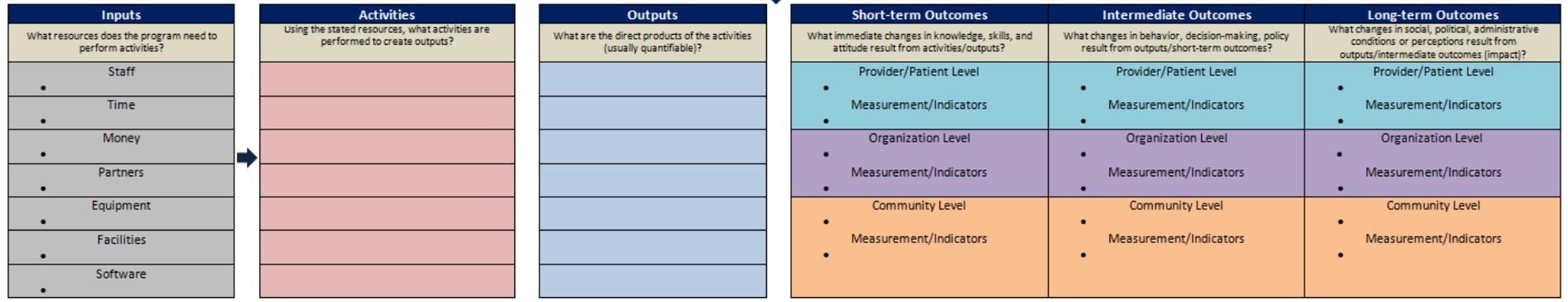


Logic Models

1. Find a template online that works for you or create your own;
2. Ensure the template is in a user-friendly format;
3. Conduct at least one training to ensure definitions/process are clear;
4. Person or team with greatest knowledge of project details should be responsible for logic model completion;
5. Logic model should fit on one page.

Seton Healthcare Family

[Project Title]								
Regional Vision	Create a coordinated healthcare system where good health is achievable for all people across the region.							
DSRIP Goals	Improve individual experience of care Improve health of populations Reduce per capita cost of care							
DSRIP Objectives	Improve care quality	Improve patient health status	Improve patient experience	Improve care coordination	Improve care cost-effectiveness	Increase access to care	Improve population health	Improve system infrastructure
Project Goal								



Constraints What challenges exist to limit operations and/or the production of outcomes? •	External Factors What factors external to the project influence operations and/or the production of outcomes? •
---	--

Breaking Down Logic Models



Palliative Care								
Regional Vision	Create a coordinated healthcare system where good health is achievable for all people across the region.							
DSRIP Goals	1. Improve individual experience of care 2. Improve health of populations 3.Reduce per capita cost of care							
DSRIP Objectives	Improve care quality	Improve patient health status	Improve patient experience	Improve care coordination	Improve care cost-effectiveness	Increase access to care	Improve population health	Improve system infrastructure
Project Goal	To create a new palliative care (PC) program devoted to providing palliative care to patients through a serious illness that may be chronic, terminal or acutely devastating.							

1. **Regional Vision:** specific to your RHP
2. **DSRIP Goals:** triple aim
3. **DSRIP Objectives:** from HHSC 1115 waiver website
4. **Project Goal:** specific to your project; could be a SMART goal.

Breaking Down Logic Models



Inputs
What resources does the program need to perform activities?
<p style="text-align: center;">Staff</p> <ul style="list-style-type: none"> • Medical Director (.1 FTE) • Project Manager (.6 FTE) • Clinic Physician (1 FTE) • APRNs (2 FTEs) • LCSW (1 FTE) • Department Assistant (.5 FTE)
<p style="text-align: center;">Time</p> <ul style="list-style-type: none"> • Monday-Friday, 8am-5pm
<p style="text-align: center;">Money</p>
<p style="text-align: center;">Partners</p> <ul style="list-style-type: none"> • Internal Medicine/Hospitalists and residents • Critical Care • Cancer Care Collaborative • CommunityCare- Blackstock
<p style="text-align: center;">Facilities</p> <ul style="list-style-type: none"> • Inpatient Services: UMCB, • Outpatient Services: Shivers Cancer Center, CommunityCare at Blackstock, Cancer Care Collaborative and Seton Heart Specialty Care & Transplant Center
<p style="text-align: center;">Equipment</p> <ul style="list-style-type: none"> • Administrative space, family meeting space, outpatient space Printers, desks, phones, office supplies
<p style="text-align: center;">Software</p> <p>COMPASS/Cerner, REDCap</p>

Inputs

- What resources are required to perform activities?
 - Staff
 - Time
 - Money
 - Partners
 - Facilities
 - Equipment
 - Software

- Focus on what you think is important.
 - Don't drive yourself crazy with too much detail!

Breaking Down Logic Models



Activities	Outputs
Using the stated resources, what activities are performed to create outputs?	What are the direct products of the activities (usually quantifiable)?
Provide training to primary care and specialty practice physicians, nurses and case managers regarding palliative care concepts	Number of training/educational sessions
Provide patient and family/caregiver consults (including assessments and education)	Number of palliative care consults Satisfaction survey responses
Provide symptom management (pain, nausea, mood changes, etc.)	Number of PC patients with symptom management
Provide family/caregiver support to help prevent "caregiver syndrome"	Number of patients with documentation of family meetings
Ensure documentation of treatment preferences for life-sustaining treatments	Number of patients with documentation of treatment preferences
Coordination of care	Number of patients with coordinated care



Activities

- Using the stated resources, what activities are performed to create (measurable) outputs?
- What activities are performed to support the project goal?
- Exclude administrative activities that have no outputs relevant to your intended outcomes
- Activities that drive the same output should be grouped

Outputs

- What are the direct, measurable products of the activities?
- What quantifiable products demonstrate that you completed your activities?

Breaking Down Logic Models



Short-term Outcomes
What immediate changes in knowledge, skills, and attitude result from activities/outputs?
<p><u>Provider/Patient Level</u></p> <ul style="list-style-type: none"> Increased provider knowledge of palliative care services Increased education on the benefits of palliative care among providers Increased patient awareness of the availability of palliative care services Increased patient/family education regarding palliative care service offerings Increased patient/family engagement in decision-making process <p><u>Measurement/Indicators</u></p> <ul style="list-style-type: none"> Number of provider training/educational sessions Provider survey (pre/post) Annual competency Patient/family survey
<p><u>Organization Level</u></p> <ul style="list-style-type: none"> Increased awareness of acute psycho-social-spiritual needs in given population Increased provider awareness of the palliative care service line as a resource for comprehensive treatment planning Improved access to timely palliative care treatment <p><u>Measurement/Indicators</u></p> <ul style="list-style-type: none"> Pre-/post-training survey
<p><u>Community Level</u></p> <ul style="list-style-type: none"> Maintain presence in outpatient setting for Palliative Care. <p><u>Measurement/Indicators</u></p> <ul style="list-style-type: none"> Maintain or increase number of patients for outpatient clinics.

Short-term Outcomes

- What immediate changes in knowledge, skill, attitude or motivation result from your defined outputs?

Intermediate Outcomes

- What changes in behavior or decision-making result from your defined short-term outcomes?

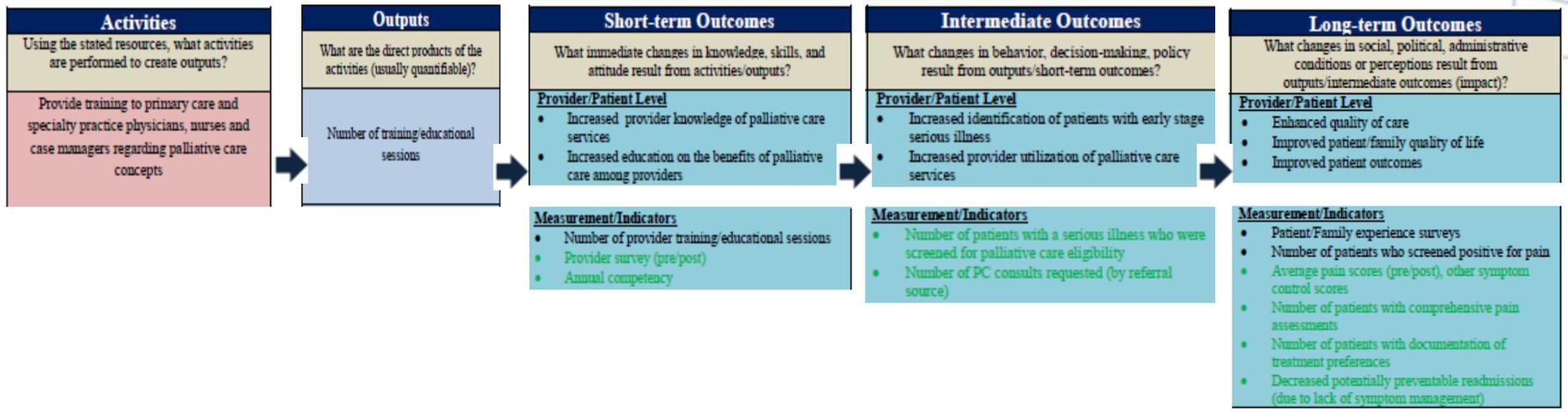
Long-term Outcomes

- What changes in social, political, administrative conditions or perceptions result from intermediate outcomes?
- What is the impact of your project?



Breaking Down Logic Models

Example of how the components relate:



Next Steps

