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FOR PRIMARY CARE

# Connecting Healthcare in Communities: Evaluation Framework

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## Overview

- About us
- Overview of evaluation approach
- Draft program logic (for discussion)
- Evaluation focus:
  - What are the main things you would like to achieve through CHIC
  - What are the main things you would like to learn from the evaluation
- Key issues for consideration in development of the evaluation framework (for discussion)
- Suggested approach to Statewide evaluation
- Statewide & local level evaluation
- Next steps



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## About us

- **Australian Institute for Primary Care (AIPC)**

- Within Faculty of Health Sciences, La Trobe University
- Program of applied research, evaluation, professional development, quality improvement and consultancy in primary health & community services
- Centres include the Centre for Health Systems Development (CHSD), Lincoln Centre for Ageing and Community Care Research, and the Centre for Quality in Health and Community Services
- Provides the national secretariat for the Quality Improvement Council



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## About us

- **Examples of work relating to health systems reform & development**

- Development of Primary Care Partnership (PCP) initial needs identification & care planning tools template
- Evaluation of PCP Strategy in Victoria
- Evaluation of the Early Intervention in Chronic Disease Initiative
- Population health approaches in small rural health services
- Evaluation and monitoring framework for the Australian Better Health Initiative
- Evaluation framework for the Aboriginal Health Promotion and Chronic Care Partnerships initiative
- Community- hospital interface project for DHS HARP



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## Evaluation proposal: our approach

- Use program logic
  - Program Logic is a way of scoping the activities, aims, objectives and goals of a program
  - Shows the links between the program's activities and the medium and longer term changes you predict will occur as a result of those activities
  - Allows you to test whether the activities result in the predicted changes
  - Assists in ongoing program planning
  - Is compatible with plan, do, study, act & action research approaches
  - Collecting evidence along the continuum (aims – objectives – goals) can provide a rigorous alternative to experimental methods



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## Evaluation proposal: our approach

- Program logic (ctd)
  - Provides a systematic framework for organising and interpreting information even when there are a number of different projects (such as the work of each Partnership Council) – this is because each PC is likely to have the same overall goals (such as improved health outcomes) and objectives (such as changes to health related behaviours, improved primary health care), even if they go about meeting those goals and objectives in different ways
  - This helps us work out how local and statewide evaluations can complement each other
  - The evaluation measures, methods and design are built up based on the practice described in the program logic



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## How program logic reflects program planning....

Planning	Evaluation
<b>Context/conditions/needs</b> •What is the problem/ issue or need? •What is the context in which the problem/issue or need occurs? •What factors might influence what can be achieved?	<b>Reflect on the influence of the context/ conditions</b> <i>Has the context, or our understanding of the context, in which the problem/issue occurs changed? How has the context or conditions influenced what you were able to achieve?</i>
<b>Goal</b> What would you like to achieve in the long term?	<b>Outcomes</b> To what extent did you achieve the long-term changes you were predicting?
<b>Objectives</b> What short- and medium-term changes do you need to achieve in order to obtain the long-term goal? Often these changes include: changes in risk factors, changes in the environment or changes in people's behaviour.	<b>Impacts</b> To what extent did you achieve the short- to medium-term changes described in our objectives? (
<b>Strategies, programs or activities</b> What strategies, programs or activities will you need to implement to bring about the changes you are aiming for?	<b>Process evaluation</b> <i>What have you done? Did you do what you said you would do? How well did you do the activities? Were you able to make the changes in the service system you planned (eg joint planning, coordination)</i>
<b>Inputs</b> What resources will you need to implement your strategies, programs or activities? (Include the resources you already have and the additional resources you will need to obtain.) What are the broader resources that will influence your program (eg policy commitments, training provided by other organisations).	<b>Describe the resources you used</b> <i>The resources (or inputs) available to you will influence your capacity to implement your activities and achieve your objectives and goals. In evaluation, inputs (or resources) are generally described and their effect on project achievements is reflected on. Documenting inputs will also enable you to work out what each project achievement cost.</i>

## Evaluation proposal: what will we do?

- Develop a program logic map
  - Review documentation
  - Discussion with the Statewide CHIC Partnership (8 February)
  - Forum with you today
- Identify key evaluation questions, indicators for the domains in the program logic map
- Identify existing & relevant data sources (if any)
- Develop data collection template with key evaluation questions & data sources
- Consider state-wide and local level evaluation activities
- Develop draft evaluation framework with recommendations about data collection tools and methods & circulate to Statewide CHIC for comment (mid-March)
- Consider whether proposed evaluation is deliverable within resource constraints
- Finalise evaluation framework & develop data collection tools (for discussion with Statewide CHIC) (end March)
- Provide final framework and tools (mid April)
- Begin implementing evaluation

## The CHIC Program Logic

- We would like to know today:
  - Does the program logic we are going to outline broadly describe the CHIC initiative?
  - Is there anything that is incorrect, missing or needs to be changed?

## The CHIC Program Logic

- The ultimate goals of CHIC are to contribute to:
  - Improving the health outcomes of people living in Queensland
  - Increased efficiency & effectiveness of the health system
- Outcomes related to these goals might include:
  - Improved health status
  - Improved quality of life
  - Reduced avoidable hospital admissions and presentations to EDs
  - Reduced inappropriate referrals to outpatient services
  - NB: These outcomes are likely to be longer term and outside the time frame of the evaluation

## Things that CHIC is trying to change that will lead to achieving goals (1)

- We know from the evidence/ or hypothesise that certain kinds of changes – or impacts are likely to lead to the outcomes we want
- Medium term changes (impacts)
  - Increased control over health and its determinants
  - Changes to health related behaviours, risk and protective factors
  - Changes to health service utilisation (better primary health care)
- Short-medium term changes (outputs/ early impacts)



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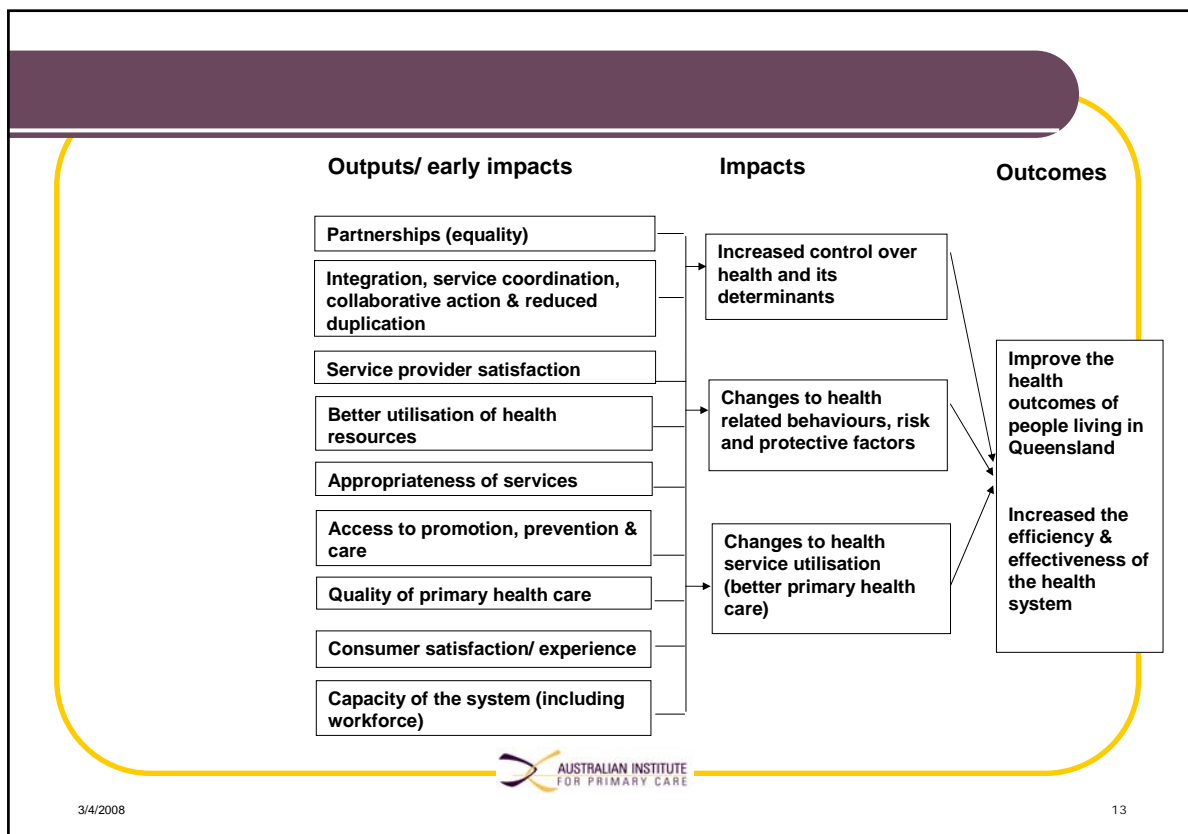
## Things that CHIC is trying to change that will lead to achieving goals (2)

- We know from the evidence/ or hypothesise that certain kinds of changes – or impacts are likely to lead to the outcomes we want
- Short-medium term changes (outputs/ early impacts)
  - Establish sustainable & equal partnerships between all interested primary health care providers in the catchment
  - Improve integration, service coordination, collaborative action & reduced duplication
  - Increase service provider satisfaction/ experience
  - Better utilise health resources (including workforce)
  - Increase the appropriateness of services
  - Improve access to promotion, prevention & care (especially for vulnerable populations)
  - Improve the quality of primary health care
  - Increase consumer satisfaction/ experience with the health system
  - Increase the capacity of the system (including workforce)




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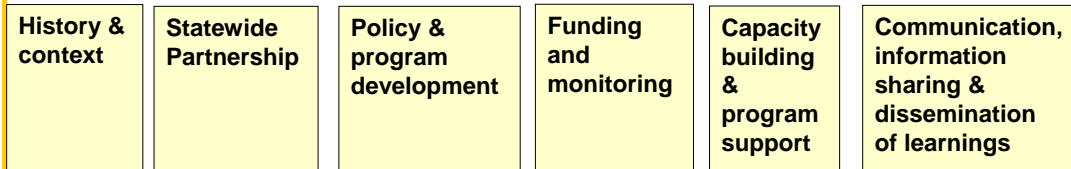
## Discussion

- Are these the main medium and longer term changes you would expect to occur as a result of your CHIC work?
- Is anything missing?

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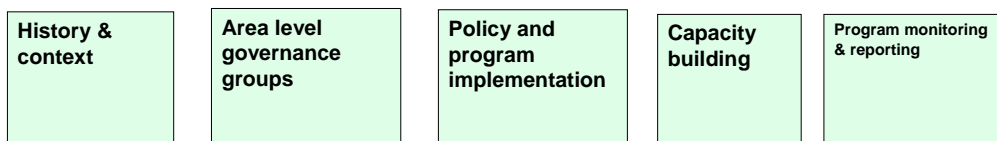
## How will CHIC get there?

### Level 1: Statewide systems development



## How will CHIC get there?

### Level 2: Area level implementation & support



## Discussion

- Are these the main things you understand will occur at the Statewide and Area levels?
- Is anything missing?

## How with CHIC get there?

### Level 3: Local systems & organisational development (should be sustainable)

- *collaborative approaches to planning and delivery*
- *capacity to appropriately address local health needs*

**History  
&  
context**

**Partnership  
formation &  
development**

**Joint planning for local  
service delivery in  
primary & community  
health**

**Service  
linkages and  
integration**

**Organisational  
development for, &  
maintenance of,  
accessible &  
responsive  
practice**

**Capacity building  
& workforce  
development**

**Monitoring,  
review &  
evaluation**

## How will CHIC get there?

### Level 4 Local programs & activities

#### Delivery of good practice shared primary health care services

- *Integrated Health promotion & illness prevention*
- *Chronic & complex care*
- *Early childhood health*
- *Community mental health*
- *Drug & alcohol services*

#### Delivery of good practice shared primary health care services

- *Interventions based on evidence*
- *Population groups at highest risk targeted (recruitment & prioritisation criteria developed)*
- *Consumers engaged*
- *Primary, secondary, tertiary prevention & treatment addressed (& links between these established)*
- *Providers understand & utilise service coordination practices, protocols, processes, tools, systems & care pathways*
- *Multidisciplinary teams/ cross service strategies developed*

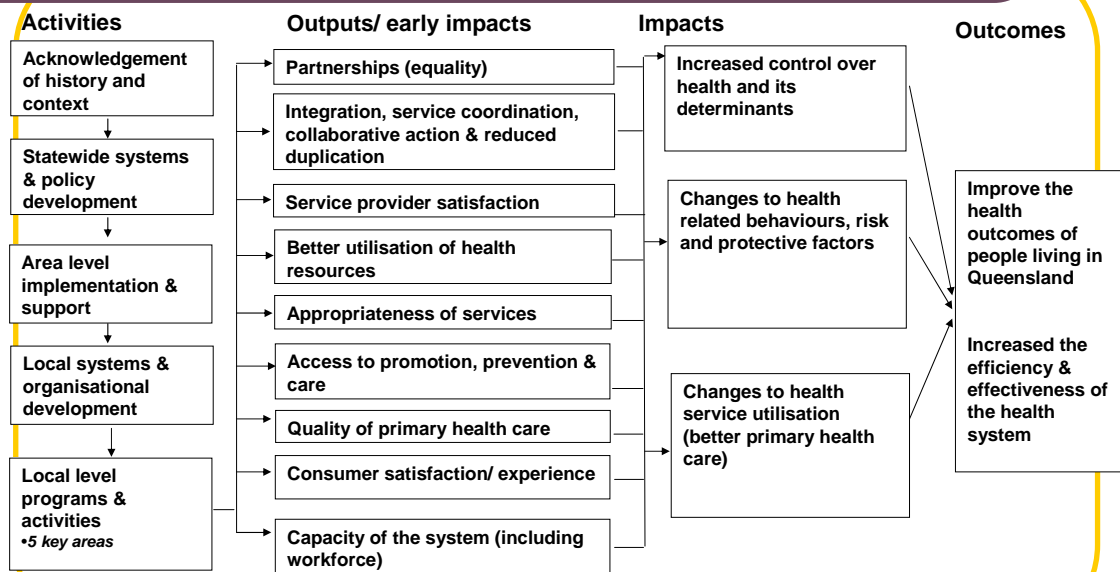
#### Programs & services provided

Appropriate & seamless non-clinical & clinical care provided

## Discussion

- If you look at the local systems development and the local programs & activities, does the map broadly represent the work you will be doing?
- Is there anything missing?

## Summary of the CHIC program logic



Contextual issues: Eg: potential change in primary care landscape, other overlapping programs running concurrently, existing partnerships, geography, local area service capacity

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## Group discussion

- The map shows that there are many things that you are trying to achieve through CHIC.
  - What are the main things you would like to achieve?
- What are the main things you would like to learn from the evaluation?

## Context & issues

- There will be a range of things that will influence the development of partnership councils. These might include:
  - Pre-existing partnerships & collaborations
  - Number & capacity of services in the District
- We will need to build these into the evaluation
- What are the main types of issues about the context you think will influence how partnership councils develop & the work they are able to do?

## Existing data

What data do you/ organisations in your PC already collect in relation to CHIC early impacts?

Partnerships	
Integration, service coordination, collaborative action & reduced duplication	
Service provider satisfaction	
Better utilisation of health resources	
Appropriateness of services	
Access to promotion, prevention & care	
Quality of primary health care	
Consumer satisfaction/ experience	
Capacity of the system (including workforce)	

## Suggested statewide evaluation method & tools

- Next step – develop evaluation questions & indicators based on program logic map
- Based on previous experience suggest that evaluation occur at four levels:
  - Statewide and area levels (through Key Stakeholder interviews & existing data)
  - CHIC Partnerships (through a Partnership Survey/Workshop & existing data)
  - Participating agencies (through an on-line and/or paper based survey & existing data)
  - Consumers of the health services involved in the CHIC initiative (suggest that these data be collected by PCs and provided to Statewide evaluation using tools/ questions provided).
- Multiple data sources allows for ‘triangulation’ which increases the strength of the evidence
- Will allow for examination of relationships between, for example:
  - Policy & program development & the effectiveness of CHIC program implementation
  - Partnership arrangements (and the systems work done to support collaboration) and agency level change
  - Agency level change and consumer experience of the health system



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## Partnership Survey/ Workshop

- Self-assessment survey tool plus site visit to discuss/ ensure consistency
- Constructed to enable PCs to reflect on/assess their work in relation to implementing the key elements in the CHIC program logic map:
  - History & context
  - Partnership formation & development
  - Joint planning for local service delivery
  - Service linkages & integration
  - Organisational development
  - Capacity building
  - Monitoring, review & evaluation
  - Delivery of good practice shared primary health care
  - CHIC outputs/early impacts
  - Also section to allow comment on statewide & area level activity
- Closed and open ended questions (including barriers & issues)
- Three site visits over four years so that change can be measured over time
- Site visit will also be used to provide evaluation findings (as they become available) and to discuss local evaluations
- Each Partnership will be provided with a copy of their completed survey



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## Agency survey

- To ask agencies to rate & comment on:
  - History & context (eg prior collaboration & capacity to participate in partnerships)
  - Agency commitment to & role in PC
  - Agency achievements in relation to the elements in the CHIC program logic map (eg organisational development for accessible & responsive practice)
  - Assessment of the extent to which having CHIC has assisted the agency make improvements in relation to CHIC aims, objectives and goals (eg service linkages & integration)
  - Self-assessment of the agency's achievements in relation to working in Partnership with other agencies
- Closed & open ended questions
- To ask agencies to provide any data collected at the local level about CHIC outputs/early impacts
- Mail survey with reply paid envelope, three times over four years (at the same time as the Partnership survey)
- Each agency should keep a copy of their completed survey

## Consumer survey/focus group questions

- To identify consumer experience in relation to the service system.
- Proposal that we will provide surveys and/or focus group questions and ask PCs and member agencies to administer these.
- Suggest once at baseline and once at time of last site visit

Any questions/ comments about the suggested Statewide evaluation?

## Statewide & local level evaluation

- Statewide evaluation could focus on:
  - Partnership, & local system levels (information from the evaluation on partnership and local systems could be provided to each partnership so they do not have to evaluate these aspects of CHIC unless they want to provide a more detailed story)
  - Collection of data on common activities of all Partnerships that can then be aggregated to a statewide level
  - Collection of data useful for statewide level activities such as influencing policy & program development
  - ?? Probably not report data at the statewide level that identified individual Partnerships unless permission is given for this

## Statewide & local level evaluation

- Local level evaluations then could:
  - Develop a case study of the local work & the local service models
  - Collect data based on the specific model/s developed – but focusing on the CHIC outputs/ early impacts
  - Collect data that is useful at the local level (eg for tracking progress, quality improvement, reporting to the community, advocacy)
  - Include feedback from local communities (if possible)
  - Provide summaries of these data to the statewide evaluation

## How might you evaluate at the local level?

- Local programs and activities should be developed in order to meet the CHIC aims, objectives & goals
- Therefore local programs & activities should be aiming to achieve at least one of the CHIC outputs/ early impacts or CHIC impacts.
- In the early phases of establishing your partnership a lot of the work might be developmental
  - Evaluation 'process oriented' and/or action research
  - Plan-do-study-act
- Later you may have a well developed model which you can describe & would like to track the achievements over time.
- The details of these achievements will be specific to the local program or activity, but the outputs/impacts will be related to CHIC outputs/impacts for example:
  - Increasing access to child & maternal health services for a specific population
  - Improving the appropriateness of a mental health service
  - Increasing the capacity of the local drug & alcohol workforce
  - Developing chronic disease programs that aim to work with consumers to make lifestyle changes (ie aiming to achieve changes to health related behaviours)
- Local level evaluations could tell the story about local programs & activities
- It may be possible to develop tools to assist with local level evaluations & for some of the data collected through local level evaluation to be provided in summary form to the Statewide evaluation
- We will discuss local level evaluation with each PC at the site visit for the Partnership workshop

## Suggested approach to linking statewide & local level evaluation

- Do you have any comments, questions or suggestions?

## Next steps

- **Revise & finalise program logic map (based on your feedback today)**
- **Identify key evaluation questions, indicators for the domains in the program logic map**
- **Identify existing & relevant data sources (if any)**
- **Develop data collection template with key evaluation questions & data sources**
- **Develop draft evaluation framework with recommendations about data collection tools and methods**
- **Consider whether proposed evaluation is deliverable within resource constraints**
- **Finalise evaluation framework & develop data collection tools (for discussion with Statewide CHIC) (end March)**
- **Provide final framework and tools (mid April)**
- **Begin implementing evaluation**
- ***How would you like to provide input into/ comment on the evaluation framework?***

Any questions?



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Thanks for your participation today



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