COMMUNITIES CARE LEARNING COMMUNITY: PROGRAM EVALUATION

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PRESENTATION TOPICS

• Introduction
• Logic models
• Evaluation approach
• Evaluation plans
INTRODUCTIONS

NYAM’s **Center for Evaluation and Applied Research** aims to advance community wellbeing by

- Collecting and analyzing data that can be used by organizations to plan, assess and strengthen programs focused on health and wellbeing,
- Incorporating community & participant perspectives into decision-making
- Documenting and disseminating information on strategies to address the structural, social, economic, and environmental factors that impact health
- Providing technical assistance to organizations and institutions to build their capacity to improve their programs and respond to community needs.
**Program Logic Model**

**Inputs**
- WNY populations
  - Caregivers of older adults
  - Older adults
- Service providers & other WNY organizations
  - Organizational staff & programs focused on older adults
  - Organizational staff & programs able to partner
- Leadership team resources
  - Guidance & coordination
  - Creative problem solving (CPS)
  - Funding for pilots
  - Evaluation

**Activities**
- Pilot project planning and development
  - CPS workshops & technical assistance (TA)
  - Partnering & collaboration
  - Proposal development
  - Development of workplans & evaluation plans
- Pilot project implementation
  - Hiring & training staff
  - Outreach & recruitment of caregivers
  - Service delivery
  - Participate in learning community
  - Monitoring, quality assurance & quality improvement
- Oversight & support
  - Facilitation of learning community
  - TA & oversight regarding project implementation
  - Linkages to external stakeholders & resources
  - Evaluation & reporting

**Outputs**
- Pilot projects
  - Project proposals
  - Comprehensive workplans, evaluation & sustainability plans
  - Launch & ongoing implementation of three funded pilot projects
  - Caregiver engagement, participation, & retention in pilot projects
  - Participant data, reports & other documentation of program activities
  - Reports to funders and other stakeholders
- Pilot project support
  - Learning community calls & supporting documentation
  - Enhancements to implementation plans
  - Information disseminated to outside stakeholders
  - Evaluation reports

**Outcomes**
- **Short term**
  - Individual level
    - Reduced caregiver burden
    - Improved caregiver & recipient quality of life
    - Improved self-efficacy
    - Increased knowledge regarding services
    - Enhanced social support
  - Organizational level
    - Enhanced knowledge regarding caregiver needs & priorities
    - Improved & expanded respite programming
    - Mechanisms for sustainability
    - Improved CPS capacity
  - Community level
    - Expanded & improved respite programming
    - Greater collaboration across agencies & sectors

- **Long term**
  - Individual level
    - Improved caregiver physical & mental health
    - Reduced health care & home-based services & costs
  - Organizational level
    - Organizations & providers knowledgeable, capable & supportive of respite need & opportunities
  - Community level
    - Systems and infrastructure to fully support respite services in rural WNY
    - Increased aging in place

**Communities Care Goal:** To support the development and implementation of innovative respite activities for caregivers of older adults in rural counties of western New York State (NYS), including Allegany, Cattaraugus, Chautauqua, Erie and Wyoming

**Assumptions:**
1. Caregiver receptivity to respite programming
2. Flexibility in project implementation during COVID-19 pandemic
3. Continued interest in and work toward project sustainability
# Logic Model → Process → Evaluation

## Focus on:
- Implementation
- Engagement
- Participation
- Retention
- Satisfaction

### Inputs

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### Activities

#### Pilot Project Planning and Development

- CPS workshops & technical assistance (TA)
- Partnering & collaboration
- Proposal development
- Development of workplans & evaluation plans

#### Pilot Project Implementation

- Hiring & training staff
- Outreach & recruitment of caregivers
- Service delivery
- Participate in learning community
- Monitoring, quality assurance & quality improvement

#### Oversight & Support

- Facilitation of learning community
- TA & oversight regarding project implementation
- Linkages to external stakeholders & resources
- Evaluation & reporting

### Outputs

#### Pilot Projects

- Project proposals
- Comprehensive workplans, evaluation & sustainability plans
- Launch & ongoing implementation of three funded pilot projects
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- Participant data, reports & other documentation of program activities
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#### Pilot Project Support

- Learning community calls & supporting documentation
- Enhancements to implementation plans
- Information disseminated to outside stakeholders
# Logic Model → Outcome and Impact Evaluation

## Outcomes/Impacts

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| Individual  | • Reduced caregiver burden  
               • Improved caregiver & recipient quality of life  
               • Improved self-efficacy  
               • Increased knowledge regarding services  
               • Enhanced social support | • Improved caregiver physical & mental health  
               • Reduced health care & home-based services & costs |
| Organizational | • Enhanced knowledge regarding caregiver needs & priorities  
                     • Improved & expanded respite programming  
                     • Mechanisms for sustainability  
                     • Improved CPS capacity | • Organizations & providers knowledgeable, capable & supportive of respite need & opportunities |
| Community   | • Expanded & improved respite programming  
               • Greater collaboration across agencies & sectors | • Systems and infrastructure to fully support respite services in rural WNY  
               • Increased aging in place |

Focus on change and improvement:
- Individual (e.g. well-being)
- Organization (e.g., capacity)
- Community (e.g., systems)
EVALUATION APPROACH (BRIEF OVERVIEW)

1. Multi-level (consistent with logic model) and multiple methods
2. Common measures and data elements across programs, where feasible (e.g., Caregiver Intensity Index)
3. Focus on unique attributes, as well (e.g., arts focus)
4. Longitudinal
5. Multiple goals:
   - Quality assurance/improvement
   - ARCH Respite Certification
   - Documentation of feasibility and outcomes to support sustainability, expansion and/or replication
6. Careful attention to data collection burden
EVALUATION PLAN (NEXT STEP)

Components of Written Plan

1. Brief narrative summary of pilot project and evaluation
2. Process and outcome evaluation questions
   - What do we want to learn from the evaluation?
3. Evaluation methods: Data collection (source and process) and data management
   - Including indicators, descriptors
   - Data analysis, including different data types and sources
4. Reporting and dissemination
5. Protection of participants/“human subjects”
6. Timeline/workplan
EVALUATION PLAN, CONTINUED

• Process and outcome evaluation questions (very important!)
• Some sample questions:
  1. Is there increased access to and use of respite programs among caregivers of older adults?
  2. To what extent and in what ways have there been changes in caregiver health outcomes, including physical and mental health, health-related quality of life, and health care use?
  3. To what extent were there changes to, and expansions of, community collaborations and linkages to support caregivers of older adults?
Evaluation methods (also very important!)

- Consider quality and utility
- How will it be collected, cleaned and managed?
- What skills and resources are needed for analysis?

Protection of participants/human subjects

- Issues: voluntary participation, confidentiality of data collection
- HIPAA, Institutional Review Boards
Questions & Comments
For more information:

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