State Birth Defects Program Cooperative Agreements

**IF**

*We do…*

**THEN**

*Changes in knowledge, attitudes, behaviors, practices & policies within systems & individuals can be produced*

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**Surveillance**
- For enhanced assessment
  - Data collection
  - Data analysis
  - Database linkages
  - Data dissemination

**Capacity Development**
- For public health action
  - Identify & engage key internal & external partners for planning & implementation action

**Prevention & Referral**
- For improved outcomes
  - Develop data driven prevention & referral plans & disseminate through partner channels

**Evaluation**
- For on-going improvement
  - On-going evaluation of activities, processes & outputs for improvement

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**Activities**
- Measurable, sustainable, improved birth defects surveillance methodology
- Effective transfer of surveillance information for intervention uses
- Outreach campaigns with prevention messages & activities
- Coordinated intervention channels to link children & families to services
- Continuous quality improvement

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**Outcomes**
- Improved birth defects surveillance
- Improved birth outcomes
- Improved quality of life
- Improved health outcomes

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**Conceptual Logic Model**

**Short term**
- Changes in knowledge & attitudes

**Intermediate**
- Changes in behaviors & practices

**Impact**
- Improved health outcomes
State Birth Defects Program Logic Model and Process Indicators

**Activities**

### Surveillance
- Establish/enhance state-based birth defects surveillance system

### Capacity Development
- Build birth defects capacity through infrastructure & partnership collaboration

### Prevention
- Outreach to target audiences with prevention activities

### Referral
- Enhance referral process for early linkage to services

**Outputs**

- Data collection
- Data analysis
  - Monitor & detect trends in birth defects
- Database linkages
  - Link to state databases
- Data dissemination
  - Timely dissemination of data for utilization

**Indicators** - Develop & integrate evaluation measures into the key activities
- Quality and timely data are produced and disseminated
- Quality assurance for completeness of data tested through on-going improvement efforts using statistical methods
- Matrix identifying capacity building objectives, strategies & partner list is developed and approved
- Data driven prevention & referral plans are developed through partnership engagement
- On-going partner meetings take place to exchange progress information and make mid-course modifications
- Data driven list identifying at-risk populations is developed to guide prevention efforts
- Appropriate prevention partners are engaged & a plan to reach target audiences is developed
- Targeted audiences are reached using appropriate prevention/intervention strategies
- Referral protocols are tested for effectiveness & timeliness
- Baseline data are available to indicate changes in # of referrals & # of persons receiving early intervention & special education services
- Timely referral to services is evidenced
- Gaps in referrals are identified using appropriate methods (i.e. qualitative research – focus groups)

**Outcomes**

- Measurable, sustainable, improved birth defects surveillance methodology
- Effective transfer of surveillance information for public health uses
- Outreach campaigns with prevention messages & activities
- Coordinated intervention channels for linking children & families to services
- Continuous quality improvement

- Improved birth defects surveillance
- Data-driven strategies applied
- Improved dissemination of accurate & timely information to organizations, agencies & individuals
- Increased early identification and linkage to services
- Data informs policy decisions
- Prevention of birth defects
- Improved birth outcomes
- Improved quality of life