How to Create a Program Description and Develop a Logic Model

Evaluation Learning Series

Topic #2

Evaluation Learning Series

Topics in the Series
The Importance of Engaging Stakeholders
How to Create a Program Description
Evaluation Questions
Evaluation Design & Indicators
Connecting the Dots: Methods and Analysis
Writing and Dissemination

Agenda

- Program Description
- Logic Models
- How to Create a Logic Model
- CDC Evaluation Framework Standards

Program Description

CDC Evaluation Framework

- Describes program theory
- Clarifies program's purpose
- Information about they way your program/intervention is intended to function
- Discuss how activities will affect the proposed public health outcomes

What is a program description?

- Required for every evaluation

- Shared understanding between program and stakeholders

- Provides clarity on: the need, target population, the causal relationship between activities and outcomes

Tips

- Describe the **program,** not the evaluation itself

- Program and stakeholders should agree on the program description
  - Sets the stage for identifying evaluation questions down the road

- Needs to be done before jumping into methods

Elements of a Program Description

- Need statement
- Goals and objectives
- Stage of development
- Target groups
- Activities and outcomes
- Logic model
- Context

Logic Models

What is a Logic Model?

- Graphic depiction of the relationship between activities and intended effects

- Don't have to start from scratch

- Other methods – reverse mapping, forward mapping

- Can be broad or specific

Elements of a Logic Model

How to Create a Logic Model

Step 1: Inputs

- Inputs: Think about all the resources that you have to put into your program
  - Before activities
- Not too broad or too specific
  - No direct identifiers

Examples of Inputs

- Dental Director, 1.0 FTE
  - Names are too specific
- Oral Health Program staff
  - Listing the secretary and accountant would be too specific
- Funding
  - Exact amount – too specific
- Stakeholders

Step 2: Identify Activities

- What your program intends to do in order to achieve goals
- Methods
  - Examine mission, vision, values
  - Forward mapping
  - Analyze inputs

Examples of Activities

- Develop strategic plan
- Implement policy plan
- Draft legislation to increase access to community water fluoridation
- Train sealant coordinators

Ineffective Activities

- Rent office space
- Increase number of students receiving sealants
- Advocate for water fluoridation

Step 3: Identify Outputs
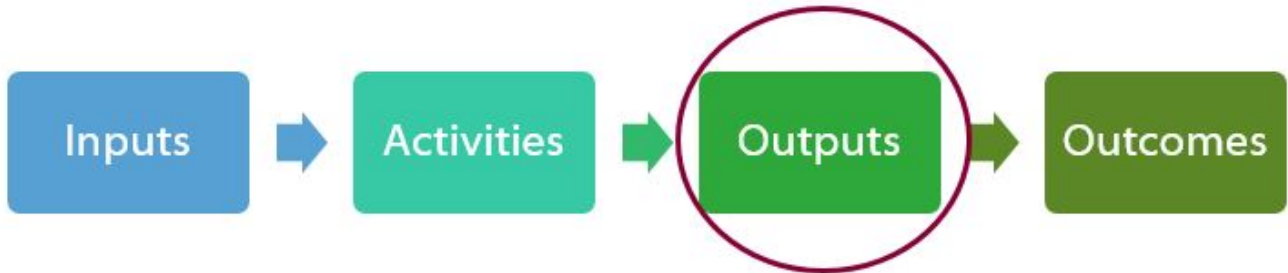
- Tangible products that are directly produced by activities

- Activities with quality measures; "upgraded" activities

- They are NOT the outcomes of activities

Examples of Outputs

- State Oral health Strategic Plan
- 15 new dental sealant coordinators completed trainings
- 75 parents attended educational sessions
- 3 legislative proposals drafted that increase community water fluoridation

Instead of

- New dental sealant coordinators trained
- Parents gain knowledge about sealants

Step 4: Outcomes

- Benefits for participants and intended results your program expects to see due to the activities
- Short-term, intermediate (if appropriate) and long-term outcomes
  - Increases in beliefs, attitudes, knowledge that stem from intended activities (**short-tem**)
  - Increases in incidence of persons who seek out health behaviors (i**ntermediate/long-term**)
  - Decreases in incidence of persons with disease/poor health outcome (**long-term**)

Examples of Outcomes

- Increased number of schools with competent dental sealant coordinators
- Parents have improve attitudes and knowledge towards their children receiving dental sealants
- Decreased incidence of caries among school-aged children

Ineffective outcomes

- Decreased number of caries
- More training implemented for trainers
- Continuing education on dental sealants

Discussion

- **What is an outcome? What is the difference between outputs and outcomes?**

Step 5: Elaborate

- **Activities**: Are more activities needed? Is more detail needed? Are they properly placed in order of occurrence?

- **Outputs**: What other data/information will I need to improve public health outcomes?

- **Outcomes**: Does your model end with short term outcomes? Are there any intermediate outcomes before we get to "improved oral health outcomes"?
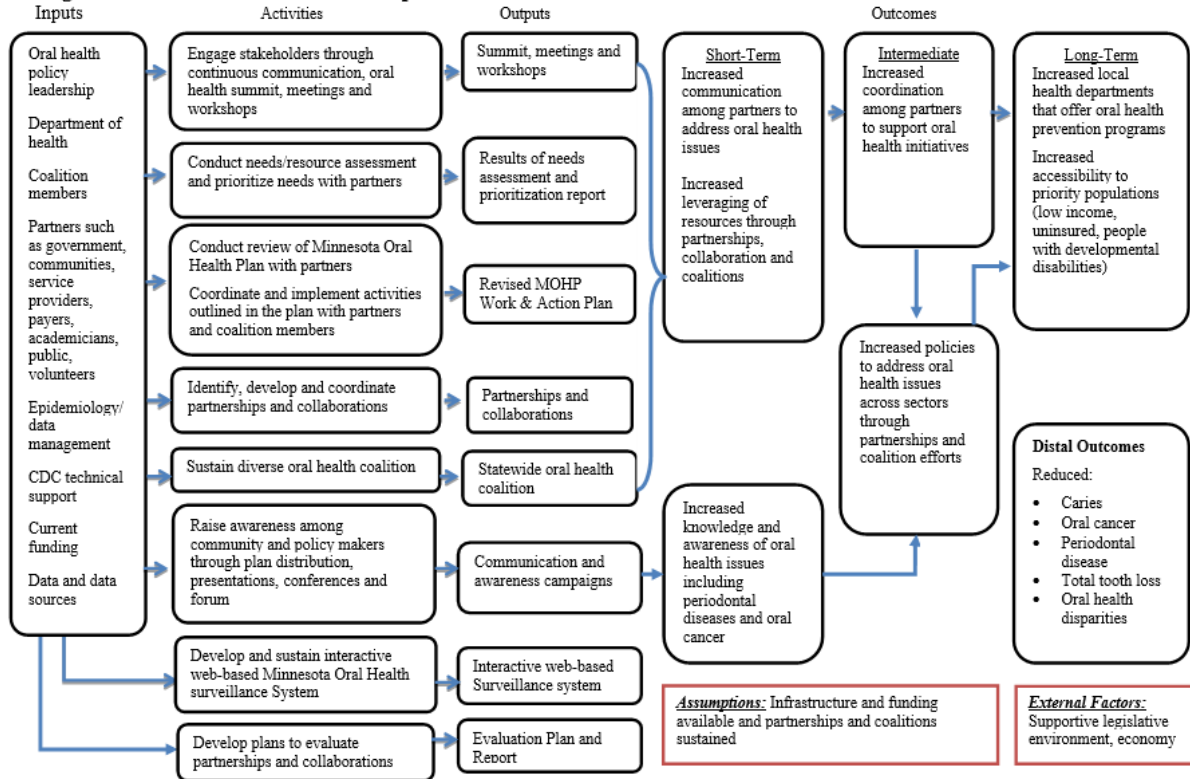
Arrows

- Show the relationship between activities and outcomes
- You can draw arrows from:
  - One activity to another
  - One outcome to another
  - An activity to an outcome

Example Logic Model

Logic Model Focus Area 1: Partnerships

Inputs	Activities	Outputs	Outcomes		

Inputs

Oral health policy leadership

Department of health

Coalition members

Partners such as government, communities, service providers, payers, academicians, public, volunteers

Epidemiology/ data management

CDC technical support

Current funding

Data and data sources

Activities

Engage stakeholders through continuous communication, oral health summit, meetings and workshops

Conduct needs/resource assessment and prioritize needs with partners

Conduct review of Minnesota Oral Health Plan with partners

Coordinate and implement activities outlined in the plan with partners and coalition members

Identify, develop and coordinate partnerships and collaborations

Sustain diverse oral health coalition

Raise awareness among community and policy makers through plan distribution, presentations, conferences and forum

Develop and sustain interactive web-based Minnesota Oral Health surveillance System

Develop plans to evaluate partnerships and collaborations

Outputs

Summit, meetings and workshops

Results of needs assessment and prioritization report

Revised MOHP Work & Action Plan

Partnerships and collaborations

Statewide oral health coalition

Communication and awareness campaigns

Interactive web-based Surveillance system

Evaluation Plan and Report

Outcomes

Short-Term
Increased communication among partners to address oral health issues

Increased leveraging of resources through partnerships, collaboration and coalitions

Intermediate
Increased coordination among partners to support oral health initiatives

Long-Term
Increased local health departments that offer oral health prevention programs

Increased accessibility to priority populations (low income, uninsured, people with developmental disabilities)

Increased policies to address oral health issues across sectors through partnerships and coalition efforts

Increased knowledge and awareness of oral health issues including periodontal diseases and oral cancer

Distal Outcomes
Reduced:
- Caries
- Oral cancer
- Periodontal disease
- Total tooth loss
- Oral health disparities

Assumptions: Infrastructure and funding available and partnerships and coalitions sustained

External Factors: Supportive legislative environment, economy

CDC Evaluation Framework Standards

Program Descriptions and the 4 Standards

Utility

- Is the level of detail appropriate or is there too much/little detail?
- Is the program description intelligible to those who need to use it to make evaluation planning?
- How will evaluation results be used?

Feasibility

- How much impact is reasonable to expect?
- How much time, money, expertise are available?

Program Description and the 4 Standards

- **Propriety**
  - Is the evaluation complete and fair in assessing all aspects of the program, including strengths and weaknesses?
  - Does the program description include enough detail to examine both strengths and weaknesses, and unintended as well as intended outcomes?

- **Accuracy**
  - Is the description comprehensive?
  - Have you documented the context of the program so that likely influences on the program can be identified?

End of Topic #2: How to Create a Program Description and Develop a Logic Model