

# Implementation and Evaluation of Alternative Workforce Models of Care

A Guiding Framework

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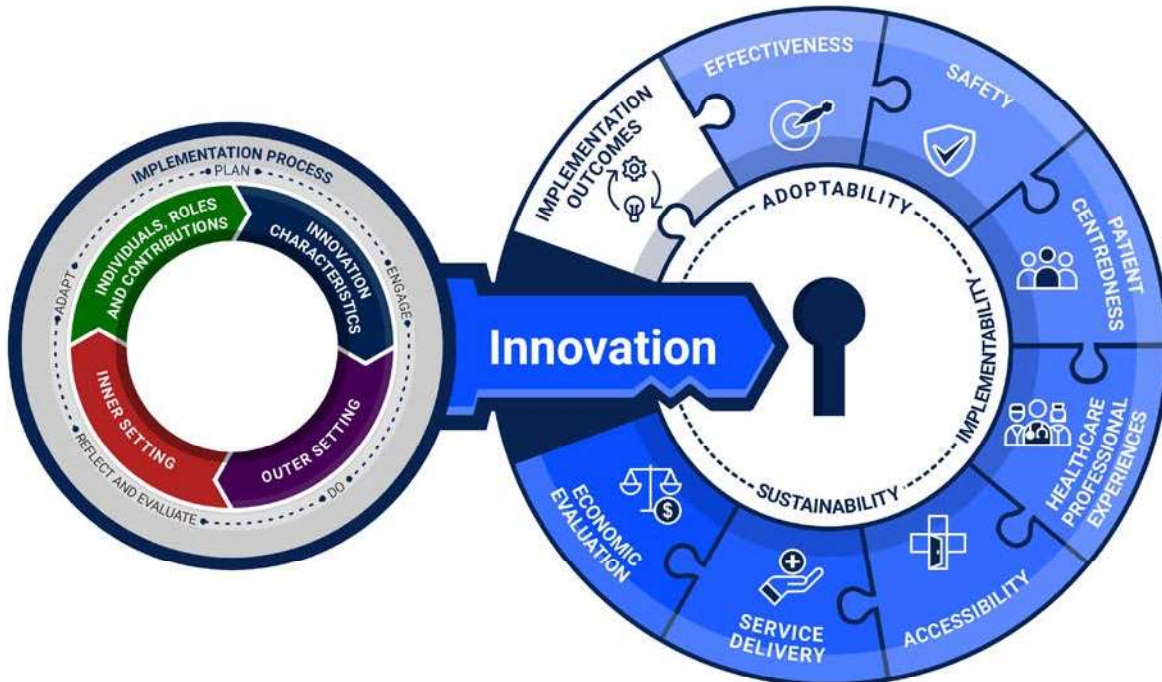
# Introduction

This guideline serves as a comprehensive resource for healthcare teams tasked with implementing and evaluating new models of care. It encompasses several essential components to ensure a thorough approach to both implementation and evaluation:

1. **Implementation Framework:** This framework provides a structured approach for implementing and evaluating new care models, guiding teams through each step of the process.
2. **Implementation Readiness Assessment Tool:** Included in this guideline is a tool to assess the readiness of the care model for implementation. By identifying potential barriers and areas needing further development, teams can proactively address challenges to ensure successful rollout.
3. **Evaluation Framework:** A systematic approach to evaluating the performance and outcomes of the new care models is outlined in this framework. It enables teams to collect meaningful data, assess impact, and identify areas for improvement.
4. **Guidance for Designing Evaluation Plans:** Detailed guidance is provided for developing robust evaluation plans, allowing teams to demonstrate the value of their care models and refine them based on evidence-based practices.

Understanding the contextual and individual factors influencing implementation is emphasised throughout the guideline. This includes considerations such as the characteristics of the care model, external influences, local context, stakeholder roles and the implementation process itself. By tailoring implementation strategies to specific environments and addressing potential barriers early on, teams increase the likelihood of successful adoption and sustainability.

The goal of this guideline is to equip healthcare teams with the tools and knowledge necessary to navigate the complexities of implementing and evaluating new care models. By doing so, teams can drive improvements in patient outcomes and enhance the efficiency of service delivery within healthcare settings.



# Implementation Framework

This framework designed to help teams understand the contextual and individual factors that influence the implementation and evaluation of new models of care.

Broadly the components are:

**The Innovation (the Key):** The proposed new model for delivering healthcare.

**Factors influencing implementation (the Guide):** Domains 1-5 are factors that drive and facilitate the implementation of a new model of care. Just like how a handle turns a key, these factors are essential for enabling effective implementation.

**Outcomes:** Capture the value or effectiveness of the new models of care, aligning with the evaluation domains. This addresses key questions:

Did the implementation occur effectively? (Implementation outcomes)

Were the objectives met? (Innovation outcomes)

The guide comprises six main domains, each containing its own subset of factors that impact implementation.

The six domains are:

1. **Innovation characteristics:** What sets the new idea apart?
2. **Outer setting:** What external factors influence its adoption?
3. **Inner setting:** How does the local organisational context affect implementation?
4. **Individuals:** How do the stakeholders influence the process?
5. **Implementation process:** How do you get it up and running effectively?
6. **Outcomes:** What are the end results?

The following sections provide a detailed description of the factors that influence implementation and evaluation of new models of care in health.

## 1. Innovation Characteristics

The innovation characteristics domain explores the distinguishing features that set a new idea or alternative model of care apart from current practices or interventions. A variety of characteristics that shape its effectiveness and sustainability.

### Key Attributes of Innovation

- **Evidence base:** The degree to which the innovation is supported by empirical research, clinical trials, or best practice guidelines. This serves as a foundation for addressing its reliability and potential impact.
- **Support and endorsement:** the endorsement and backing the innovation receives from key stakeholders, including professional organisations, policymakers, or opinion leaders, this endorsement signifies confidence in its values and relevance.
- **Advantages:** These are the perceived benefits or strengths of the innovation, including factors like accessibility, effectiveness, safety, cost-effectiveness, and benefits to stakeholders. Understanding these advantages sheds light on the potential value it brings to healthcare.
- **Disadvantages or uncertainties:** Potential drawbacks or limitations of the innovation, such as risks, implementation challenges, or unintended consequences. Identifying these uncertainties allows for proactive management and informed decision-making.

Understanding these attributes is crucial for assessing the innovation's compatibility with current practices and its potential to address healthcare needs effectively. It provides insights into the feasibility, acceptability, and sustainability of implementing the innovation in a specific context.

## 2. Exploring external factors in the outer setting

The outer setting domain investigates the external factors that shape the adoption of innovations. These factors are crucial for understanding the broader environment in which implementation occurs.

### Key Factors to Consider

- **Partnerships and connection networks:** The collaborative relationships and networks with external organisations, stakeholders, and community resources that can either support or hinder implementation efforts.
- **Policies and laws:** The impact of legislative and regulatory frameworks on healthcare practices. Policies and laws influence decisions related to reimbursement, quality standards, and legal requirements.
- **Financing:** Financial incentives, reimbursement models, and funding sources that impact the availability of resources for implementation and sustainability of innovations.
- **Performance management pressure:** The role of performance metrics and targets in shaping organisational priorities. Pressure to meet performance goals can influence decision-making regarding innovation adoption. Recognising these external influences, stakeholders can better navigate the implementation process and develop strategies for successful innovation adoption. Understanding the Outer Setting factors is key to overcoming challenges and leveraging opportunities in when implementing a new idea or model of care.

## 3. Exploring the inner setting factors

In this domain, we delve into how the local organisational context influences the implementation process. Various factors within the organisational environment play pivotal roles in shaping implementation efforts of new ideas or models of care.

### Key Factors in the Inner Setting:

- **Work Infrastructure:** This considers the physical and organisational infrastructure that supports daily operations. Adequate work infrastructure facilitates smooth implementation processes.
- **Relational Connections:** These are the relationships and connections among team members and stakeholders. Strong relational connections foster collaboration and teamwork essential for successful implementation.
- **Communication:** This considers the effectiveness of communication channels within the organisation. Clear and open communication promotes transparency and ensures all stakeholders are informed and engaged.

- **Organisational Culture:** This examines the prevailing values, beliefs, and norms within the organisation. Organisational culture shapes attitudes and behaviours, influencing how innovations are received and adopted.
- **Mission Alignment:** This evaluates the alignment of implementation efforts with the organisation's mission and goals. When implementation aligns with the broader mission, it enhances organisational commitment and support.
- **Available Resources:** This considers the availability of human, financial, and technological resources to support implementation activities for the new idea or model of care. Adequate resources are essential for overcoming implementation challenges and sustaining innovation adoption.
- **Access to Knowledge:** Assess the accessibility and dissemination of knowledge and information to implement the new idea or model of care within the organisation. Access to relevant knowledge enhances decision-making and fosters innovation adoption.

Understanding and leveraging these internal dynamics are critical for successful integration of innovations within the organisational context. By recognising the influence of these factors, stakeholders can develop strategies to overcome barriers and promote the effective implementation of innovations.

#### 4. Individuals in the Implementation Process

In this domain, we focus on the individuals involved in the implementation process. Stakeholders at various levels play crucial roles in driving effective implementation efforts.

##### Key Stakeholder Groups:

- **High-Level Leaders:** Individuals in the executive or senior management level who provide overarching vision, direction, and support for implementation efforts.
- **Mid-Level Leaders:** Managers and supervisors who oversee specific departments or units and play a pivotal role in translating organisational goals into actionable plans.
- **Opinion Leaders.** Influential individuals within the organisation whose opinions and actions sway the attitudes and behaviours of others, often serving as champions for innovation adoption.
- **Implementation Facilitators:** Subject matter experts or consultants who provide guidance, support, and resources to facilitate the implementation process.
- **Implementation Leads and Deliverers:** Individuals responsible for leading and executing specific aspects of the implementation plan, driving day-to-day activities and progress.
- **Implementation Support/Team Members:** Team members who contribute to the implementation process by providing additional support, expertise, and assistance in various capacities. e.g., data collection, clinic set up training, troubleshooting.
- **Innovation Recipients:** End users or beneficiaries of the innovation, including patients, clients, or other stakeholders who experience the direct impact of the new practices or interventions.
- Recognising the perspectives of these stakeholder groups, addressing their concerns, and fostering their engagement are key strategies for driving effective implementation. By involving stakeholders at every stage of the process, organisations can maximize buy-in, promote collaboration, and enhance the likelihood of successful innovation adoption.

#### 5. Exploring the Implementation Process

This domain explores the steps and strategies involved in getting a new idea or model of care up and running effectively within an organisation. A structured implementation process is essential for translating ideas into action and achieving desired outcomes.

##### Key Phases of the Implementation Process:

- **Planning:** The development of a comprehensive plan outlining the goals, strategies, resources, and timelines required for implementation. Effective planning sets the foundation for a successful rollout.



- **Engaging:** The process of involving stakeholders at all levels, including leadership, staff, and end users, to foster buy-in and support. Engagement ensures that everyone is informed, motivated, and committed to the implementation effort.
- **Doing:** The execution of the implementation plan by integrating the innovation into practice. This phase involves coordinating activities, managing resources, and addressing any issues that arise during the rollout.
- **Reflect and Evaluate:** The continuous monitoring and assessment of the implementation process to identify successes and areas for improvement. Collecting and analysing data helps to understand the impact of the innovation and make informed adjustments.
- **Adapting:** The process of making necessary adjustments based on feedback and evaluation findings. Adapting the implementation approach ensures that the innovation remains effective and sustainable over time.

A well-structured implementation process is vital for ensuring that innovations are effectively integrated into organisational practices. By following these key phases, organisations can achieve successful outcomes and sustain improvements over time.

## 6. Exploring Outcomes

The Outcomes domain examines the end results of implementing an innovation. This includes various aspects that determine the overall impact and sustainability of the innovation.

### Implementation Outcomes:

- **Adoptability:** The ease with which the innovation can be adopted by users and integrated into existing practices.
- **Implementability:** The practicality and feasibility of implementing the innovation within the organisational context.
- **Sustainability:** The ability of the innovation to be maintained over time without diminishing effectiveness.

### Innovation Outcomes

- **Effectiveness:** The degree to which the innovation achieves its intended goals and produces desired health outcomes.
- **Safety:** The extent to which the innovation avoids causing harm to patients and contributes to their overall safety.
- **Patient-Centeredness:** The focus on providing care that respects and responds to individual patient preferences, needs, and values.
- **Healthcare Professional/System Experience:** The impact of the innovation on the experiences and satisfaction of healthcare professionals and the overall healthcare system.
- **Accessibility:** The extent to which the innovation is available and usable by all who need it, ensuring equitable access to care.
- **Service Delivery:** The efficiency and effectiveness of healthcare services provided as a result of implementing the innovation.
- **Economic Evaluation:** The analysis of the cost-effectiveness and financial impact of the innovation, including potential savings and resource utilization.

Evaluating these outcomes provides comprehensive insights into the innovation's performance, highlighting areas of success and opportunities for improvement. This evaluation is crucial for understanding the overall impact and sustainability of the innovation, informing future efforts and guiding continuous improvement.



# Implementation Readiness Assessment Tool

## About the assessment

This tool has been designed to assess the readiness and capacity for implementing and evaluating new healthcare initiatives. It considers various contextual and individual factors to facilitate successful implementation and evaluation of innovative models of care.

## Key Features

Applying implementation science frameworks adapted from primary research and existing evidence to inform a holistic assessment of implementation and evaluation readiness.

Project teams can assess implementation and evaluation capacity across six domains, gaining a broad understanding of readiness for implementation of proposed new models of care.

Understanding these factors helps project teams to identify strengths and areas for improvement, thereby enhancing the likelihood of successful implementation and evaluation.

## Assessment Details

The assessment consists of 30 questions and takes approximately 15 minutes to complete.

This can be completed individually or as a team.

## Applications of the Tool

This tool is versatile and applicable at any stage to support users in the implementation process, including:

- To plan by informing the strategic planning process
- To design models of care for implementation.
- To compare multiple models of care.
- To prepare and assess the readiness of a model of care for implementation.
- To grow and build capacity for implementation and evaluation.
- To fund by structuring funding decisions.
- To evaluate by informing the reasons behind the success or failure of new models of care.
- To scale or not, determining the trajectory of future of models of care (e.g., adopt, adapt, abandon, scale, and spread).

This tool can therefore facilitate ongoing improvement in healthcare implementation and evaluation and enables teams to make data-driven decisions throughout the project lifecycle.

## Structure of the Assessment Tool

The readiness assessment tool is divided into three sections:

### Part A: Background Information

- The teams provide details about the new care model, its objectives, the target population, and the implementation location.

### Part B: Factors Influencing Implementation

- Assesses individual and contextual factors crucial for successful implementation. This includes model characteristics, external influences, local context, stakeholder attributes and roles, the implementation process, and outcomes evaluation.

### Part C: Results

- Teams will calculate an average score across all domains and an overall average score:
  - **Score 1-2 (Red):** Indicates the model of care is not ready for implementation.

- **Score 3 (Amber):** Indicates the model of care is promising but requires further information and planning.
- **Score 4-5 (Green):** Indicates the model of care is ready for implementation based on the assessment of the six domains.

The information obtained from the assessment can be used by teams to develop action plans based on the collected data.

## Part A

### Project Details

- Project Name: [Enter Project Name Here]
- Problem Statement [Highlight the specific challenge or problem faced, its impact on relevant stakeholders, and existing approaches to address it]
- Project's Primary Objective: [Briefly describe the main goal or purpose of the project]
- Project's Secondary Objectives: [List any additional objectives or goals the project aims to achieve]
- Project Team: [Provide information about the team members involved in the project, including their roles and responsibilities]
- Program Location: [Specify the location(s) where the project will be implemented]
- Group or Population Who Will Benefit from the Program: [Identify the specific group or population that will benefit from the project]

## Part B

### Instructions for Completing the Assessment:

Project Teams are required to rate the new model of care across a range of context specific and individual factors that influence implementation across six domains.

The six domains are:

1. Innovation characteristics
2. Outer setting
3. Inner setting
4. Individuals
5. Implementation process
6. Outcomes

Please respond to as many items as possible. If you truly are truly unable to answer an item, you may select "NA."  
 Score each statement from 1-5, where 1 means strongly disagree and 5 means strongly agree.

<b>Innovation (model of care) characteristics</b>						
<b>No evidence = 1, Limited evidence = 2, Moderate evidence = 3, Strong evidence = 4, Extensive evidence = 5)</b>						
<b>There is evidence (literature, benchmarking) supporting the new model of care.</b>  <i>Also consider <a href="#">NHMRC evidence levels</a></i>	1	2	3	4	5	NA
<b>(No support/endorsement =1, Limited support/endorsement = 2, Moderate support/endorsement = 3, Strong support/endorsement =4, Full support/endorsement =5)</b>						
<b>The model of care has been developed then supported or endorsed by Executive.</b>	1	2	3	4	5	NA
<b>(Strongly disagree =1, Disagree = 2, Partially agree = 3, Agree =4, Strongly agree =5)</b>						
<b>Other solutions have been considered and this model of care offers advantages over alternatives.</b>  <i>Consider factors like accessibility, effectiveness, safety, cost, and benefits to stakeholders.</i>	1	2	3	4	5	NA
<b>Uncertainties about the model's benefits have been addressed.</b>  <i>Consider factors like accessibility, effectiveness, safety, cost, and stakeholder benefits.</i>	1	2	3	4	5	NA
<b>Implementation Readiness Assessment (Innovation characteristics)</b>						

Please respond to as many items as possible. If you truly are truly unable to answer an item, you may select "NA."

Score each statement from 1-5, where 1 means strongly disagree and 5 means strongly agree.

<b>Outer setting</b>						
<i>(Strongly disagree =1, Disagree = 2, Partially agree = 3, Agree =4, Strongly agree =5)</i>						
<b>The political environment and current strategy or policy priorities align with implementation of the new model of care.</b>	1	2	3	4	5	NA
<b>There are defined partnerships and networks to facilitate referral pathways, collaborative care, and continuity of care.</b>  <i>Consider interdisciplinary partnerships, hospital, community, and primary healthcare networks</i>	1	2	3	4	5	NA
<b>Implementation of the new model of care meets all the appropriate quality standards and regulatory requirements.</b>  <i>Consider aspects like scope of practice, credentialing and training</i>	1	2	3	4	5	NA
<b>Professional organisations and consumer groups support the model of care.</b>	1	2	3	4	5	NA
<i>(No funding =1, Limited funding= 2, Some funding = 3, Substantial funding =4, Full funding =5)</i>						
<b>Funding from external entities (e.g., grants, reimbursement) is available to implement and/or deliver the model of care.</b>	1	2	3	4	5	NA
<b>Implementation Readiness Assessment (Outer setting)</b>						

Please respond to as many items as possible. If you truly are truly unable to answer an item, you may select "NA."

Score each statement from 1-5, where 1 means strongly disagree and 5 means strongly agree.

<b>Inner setting (Local context)</b>						
<i>(Strongly disagree =1, Disagree = 2, Partially agree = 3, Agree =4, Strongly agree =5)</i>						
<b>The model of care is aligned with the organisation's strategic goals and objectives.</b>	1	2	3	4	5	NA
<b>There are defined tasks and responsibilities between individuals and teams.</b>	1	2	3	4	5	NA
<b>There are adequate resources (funding, staff, space, equipment, technology infrastructure) to safely implement the model of care.</b>	1	2	3	4	5	NA
<b>There is training, credentialling and clinical governance pathways for clinicians to implement the model of care.</b>	1	2	3	4	5	NA
<b>There are high-quality relationships, communication networks, and professional connections to support implementation of the care model.</b>	1	2	3	4	5	NA
<b>The working environment promotes collaboration, cohesion, with a shared sense of purpose to achieve common goals.</b>	1	2	3	4	5	NA
<b>Implementation Readiness Assessment (Inner setting: Local context)</b>						

Please respond to as many items as possible. If you truly are truly unable to answer an item, you may select "NA."

Score each statement from 1-5, where 1 means strongly disagree and 5 means strongly agree.

<b>Individuals, roles, and characteristics</b>						
<i>Consider these questions with each stakeholder group in mind.</i>						
<i>(None =1, Few=2, Some=3, Many=4, All= 5;)</i>						
<b>Key stakeholders have been identified and their roles defined. (Click here for guidance)</b>	1	2	3	4	5	NA
<b>The stakeholders are interested, engaged, and see the benefits of the new model of care.</b>	1	2	3	4	5	NA
<b>Stakeholders have the knowledge and skills to fulfill their roles.</b>	1	2	3	4	5	NA
<b>Stakeholders have the availability and authority to fulfill their roles.</b>	1	2	3	4	5	NA
<b>The stakeholders are motivated and committed to implementing the model of care.</b>	1	2	3	4	5	NA
<b>Implementation Readiness Assessment (Individuals, roles and characteristics)</b>						

Please respond to as many items as possible. If you truly are truly unable to answer an item, you may select "NA."

Score each statement from 1-5, where 1 means strongly disagree and 5 means strongly agree.

<b>Implementation process</b>						
<i>(Strongly disagree =1, Disagree = 2, Partially agree = 3, Agree =4, Strongly agree =5)</i>						
In planning the team assessed needs, local context, tailored the approach, defined objectives, and identified necessary processes for the new model of care.	1	2	3	4	5	NA
There are plans to test and optimise the new model of care.	1	2	3	4	5	NA
There are plans for action based on reflection and evaluation. (e.g., adapt, adopt, abandon, scale and spread)	1	2	3	4	5	NA
There is documentation e.g., implementation plan to guide the implementation process.	1	2	3	4	5	NA
<b>Implementation Readiness Assessment (Implementation Process)</b>						



Please respond to as many items as possible. If you truly are truly unable to answer an item, you may select "NA."

Score each statement from 1-5, where 1 means strongly disagree and 5 means strongly agree.

<b>Outcomes and performance</b>						
<i>(Strongly disagree =1, Disagree = 2, Partially agree = 3, Agree =4, Strongly agree =5)</i>						
<b>The key objectives and deliverables of the new care model have been defined.</b>	1	2	3	4	5	NA
<b>There is a timeframe for planning, implementation, and evaluation of the new model of care.</b>	1	2	3	4	5	NA
<b>Outcome measures for the new model of care have been defined.</b>  <i>Consider both implementation and innovation outcomes</i>	1	2	3	4	5	NA
<b>The types and sources of information (data) for each outcome measure have been identified. e.g., health records, PREM/PROMS, surveys)</b>	1	2	3	4	5	NA
<b>A budget or resources have been allocated for performance evaluation.</b>	1	2	3	4	5	NA
<b>There is documentation, e.g., evaluation plan, to guide the evaluation process.</b>	1	2	3	4	5	NA
<b>Implementation Readiness Assessment (Outcomes and Performance)</b>						

## Part C: Readiness Assessment Scores

	Innovation Characteristics	Outer Setting	Inner setting	Individuals, roles and contributions	Implementation process	Outcomes and performance
1.						
2.						
3.						
4.						
5.						
6.						
Item						
<b>Domain Total:</b>						
<b>Average Domain Score:</b>						
<b>Overall Average Score:</b>						

Add up your scores in each column. Exclude 'NA'

Divide the domain total by the total number of items with a score. Exclude 'NA'

Average together all the domain scores

The assessment results can guide action plans for implementation. Domains with lower average scores indicate areas needing improvement in readiness for implementing the model of care. Identifying these areas allows targeted efforts to address potential barriers and enhance overall preparedness.

Interpretation	
<b>Score 1-2</b>	The model of care is not ready for implementation.
<b>Score 3</b>	The model of care is promising but requires further information or planning.
<b>Score 4-5</b>	The model of care is ready for implementation or requires only minor modifications.

## Evaluation Framework

The evaluation framework for alternative workforce models of care is designed to guide teams in developing and refining evaluation plans and strategies for their care models. Whether the goal is to improve existing strategies or to create new models of care, this framework enhances the understanding of healthcare evaluation and supports the development of effective evaluation plans.

This framework integrates with the Framework for Implementation and Evaluation of Healthcare Models of Care, providing a comprehensive approach to performance and evaluation across eight critical domains. It is a tool for expanding evaluation outcomes and ensuring a thorough analysis of a care model's effectiveness.

### Identifying domains for evaluation

While the framework encourages exploration of all eight domains, it recognises the necessity for flexibility in application. Teams are encouraged to prioritize performance evaluation areas that align with the unique objectives of their projects.

The eight domains encompassed by the framework include:

- **Implementation Outcomes:** Assessing the implementation, adoption, and sustainability of the care model.
- **Effectiveness:** Measuring the clinical and health outcomes achieved by the care model.
- **Safety:** Evaluating the extent to which the care model minimizes risks and harms to patients.
- **Patient-Centeredness:** Understanding patient satisfaction, engagement, and quality of life.
- **Healthcare Professional Experiences:** Gauging the impact on the experiences and satisfaction of healthcare professionals.
- **Accessibility:** Examining the availability and ease of access to the care model for the target population.
- **Service Delivery:** Assessing the efficiency and quality of service delivery processes.
- **Economic Evaluation:** Analysing the cost-effectiveness and financial impact of the care model.

The table below highlights key questions within each evaluation domain and provides example performance indicators to guide your assessment process. This structured approach ensures that all relevant aspects of the care model are thoroughly evaluated, enabling teams to make informed decisions and drive continuous improvement.

Evaluations Domains	Definitions
Adoption	<p><b>Key questions:</b> To what extent have stakeholders adopted the innovation or care model, and what factors influenced their decision?</p> <p><b>Example measures:</b> Observation of uptake, stakeholder interviews, administrative data, and user engagement scales.</p>
Implementation	<p><b>Key questions:</b> How effectively has the innovation been put into practice, and what challenges have been encountered?</p> <p><b>Example measures:</b> Evidence of implementation through observation, stakeholder interviews, administrative data, assessment of organisational readiness, and fit into existing workflows and systems.</p>
Sustainability	<p><b>Key questions:</b> How sustainable is the innovation or care model within the organisation, and what factors contribute to or hinder its long-term maintenance?</p> <p><b>Example measures:</b> Long-term outcomes, resource allocation beyond initial stages.</p>
Effectiveness	<p><b>Key questions:</b> To what extent does the healthcare innovation or service achieve its intended purpose and desired outcomes?</p> <p><b>Example measures:</b> Health status, quality of life, recovery rates, or improvement in health conditions.</p>
Safety	<p><b>Key questions:</b> How effectively does the healthcare innovation or service prevent harm to patients or improve safety during delivery of care delivery?</p> <p><b>Example measures:</b> Diagnostic accuracy, error rates, and occurrence of adverse events.</p>
Patient-centredness	<p><b>Key questions:</b> To what extent does the healthcare innovation or service involve patients in decisions and tailor care to their preferences?</p> <p><b>Example measures:</b> Patient experience, satisfaction, continuity of care.</p>
Healthcare profession/system experience	<p><b>Key question:</b> What has been the experience of healthcare professionals with the innovation?</p> <p><b>Example measures:</b> Perceptions and experiences of healthcare professionals</p>
Accessibility	<p><b>Key questions:</b> How has the innovation or care model impacted patients' access to needed care and services?</p> <p><b>Example measures:</b> Timeliness of care, including diagnosis and treatment.</p>
Service delivery (Activity)	<p><b>Key questions:</b> What actions, processes, and metrics are involved in delivering the innovation or service?</p> <p><b>Example measures:</b> Patient volume, service frequency, and discharge rates.</p>
Economic evaluation	<p><b>Key questions:</b> How has the healthcare innovation or service impacted resource use, cost-effectiveness, and efficiency?</p> <p><b>Example measures:</b> Cost-minimisation, cost-effectiveness, treatment costs.</p>

## Selection of measures or performance indicators

To address each question, it is essential to identify and gather appropriate measures or indicators. An indicator specifies the meaning of a dimension and can be classified as an input, output, outcome, or impact indicator. Indicators should be clearly defined, observable, measurable, and practical to collect. Often, using multiple indicators is necessary to ensure the validity of the findings.

## Baseline and target data

Baseline and target data are critical components of effective program evaluation and implementation. They provide the foundation for measuring progress, identifying areas for improvement, and demonstrating the impact of efforts.

Baseline data represents the initial set of information collected before a program or intervention begins. This data serves as a reference point, allowing for the measurement of changes and the assessment of progress over time.

Target data, on the other hand, defines the specific goals or outcomes that a program aims to achieve within a certain timeframe. Establishing clear targets helps in setting realistic expectations and provides a benchmark against which progress can be measured.

## Data sources and collection methods

Identifying appropriate data sources and employing effective data collection methods are crucial for obtaining reliable and valid information for evaluation and implementation. The choice of data sources and collection methods significantly impacts the quality and accuracy of the data, which, in turn, influences the conclusions drawn from the evaluation. Evaluators should consider factors such as the evaluation objectives, available resources, and the need for data validity and reliability when designing their data collection strategy.

Data sources, which are the origins of the data used for evaluation, can be broadly categorised into primary and secondary sources. Primary data is directly gathered by evaluators from the field, offering firsthand insights, while secondary data is obtained from other sources and is repurposed for evaluation purposes.

Data collection methods depend on the type of data needed, the sources of data, and the resources available. Effective data collection methods include surveys, questionnaires, interviews, observations, document reviews, and administrative data, official records and reports and published research. Selecting the right combination of data sources and collection methods is critical for obtaining comprehensive and accurate information, ensuring that the evaluation is robust and reliable.

## Timelines

Establishing clear and realistic timelines is essential for guiding the evaluation process from planning to implementation, analysis, and follow-up. Adhering to these timelines ensures that evaluations are conducted efficiently, findings are communicated effectively, and recommendations lead to meaningful action and impact.

## Establishing priority levels for evaluation measures

Assigning priority levels to evaluation measures is essential for efficient resource allocation and effective evaluation planning. Consider key criteria such as significance, feasibility, urgency, and stakeholder interest, and categorise measures into low, medium, and high priority levels.

Regular review and adjustment of these priorities ensure alignment with changing program needs and stakeholder feedback. This systematic approach enables evaluators to focus resources on critical areas, maximize the impact of evaluation efforts, and facilitate informed decision-making for program improvement.

## Responsibility for evaluation

Assigning responsibility for evaluation is essential to ensure accountability and effective oversight throughout the evaluation process. Key stakeholders involved in the program or intervention being evaluated should be identified and engaged from the outset to ensure their perspectives are considered.

Table 2 provides a guide to designing your evaluation map.

## Design your Evaluation Plan

### Part A: Project Details

- **Project Name:** [Enter Project Name Here]
- **Target Patient or Consumer Group/s:** [Identify the specific group or population that will benefit from the project]
- **Primary Objective:** [Briefly describe the main goal or purpose of the project]
- **Secondary Objectives:** [List any additional objectives or goals the project aims to achieve]
- **Project/Evaluation Team:** [Provide information about the team members involved in the project, including their roles and responsibilities]
- **Program Location:** [Specify the location(s) where the project will be implemented]

### Evaluation considerations:

- **Purpose of evaluation** [How will you use findings?]
- **Evaluation questions** [Enter Here]
- **Target audience(s)** [Who and how will you share findings?]
- **Evaluation budget and/or resources** [Enter Here]





