

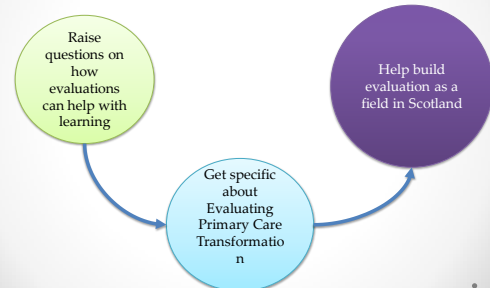
Some ideas on how evaluations can help with the transformation of primary care

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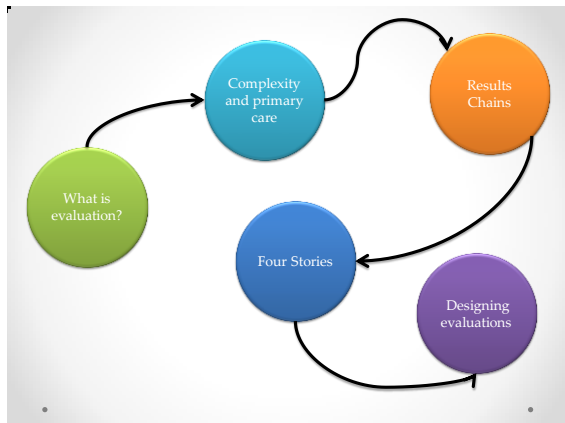
August 18th 2016
PRIMARY CARE TRANSFORMATION : LEARNING FROM
THE DEEP END AND ABROAD

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Goals of Presentation



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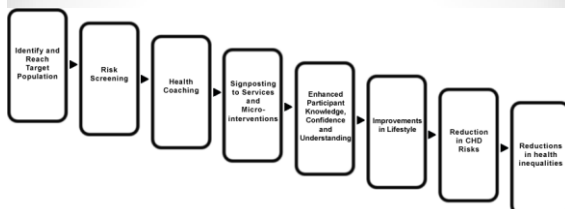
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What is evaluation? A useful but perhaps incomplete definition

- Evaluation is defined both as a means of **assessing performance** and to identify **alternative ways to deliver**
- "evaluation is the systematic collection and analysis of evidence on the outcomes of programs to make judgments about their **relevance**, performance and alternative ways to deliver them or to achieve the same results."

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An Example: Primary Prevention Have a Heart Paisley




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Purpose of evaluation


- Assessing merit and worth
 - Causal questions, RCT, observational studies
- Programme and organizational improvement
 - Formative evaluation
- Oversight and compliance
- **Knowledge development**
 - Neglected purpose of many evaluations

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Summative



Formative



Developmental



Features of complex interventions (Pawson et al., 2004)

- The intervention is a theory or theories
- The intervention involves the actions of people.
- The intervention consists of a chain of steps
- These chains of steps or processes are often not linear, and involve negotiation and feedback at each stage.
- Interventions are embedded in social systems and how they work is shaped by this context.
- Interventions are prone to modification as they are implemented.
- Interventions are open systems and change through learning as stakeholders come to understand them.

Thinking theoretically about programs and policies

- "Interventions are always based on a hypothesis that postulates *'If we deliver a program in this way or we manage services like so, then this will bring about some improved outcome'* ... *Interventions are always inserted into existing social systems that are thought to underpin and account for present problems.* Improvements in patterns of behavior, events or conditions are then generated, it is supposed, by bringing fresh inputs to that system in the hope of changing and re-balancing it"

o (Pawson et al., 2004, p.4).

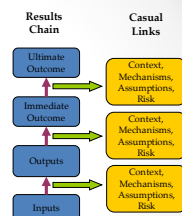
System Dynamic Approaches (Stermann, 2006)

- Constantly changing;
- Governed by feedback;
- Non-linear, History-dependent;
- Adaptive and evolving;
- Characterized by trade-offs;
- Policy resistance: *"The result is policy resistance, the tendency for interventions to be defeated by the system's response to the intervention itself."*

Elements of a Theory of Change

- Expands on results chains to articulate why the sequence of results is expected to occur through causal links

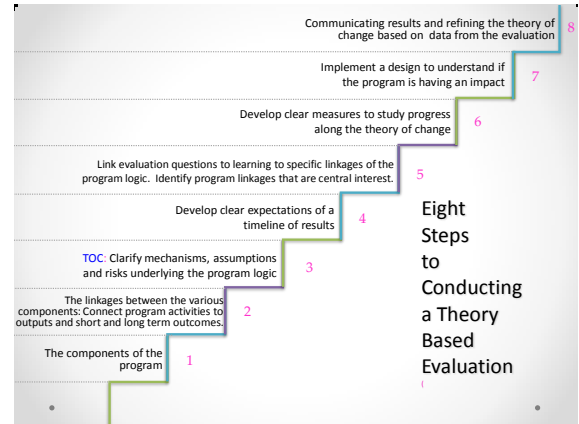
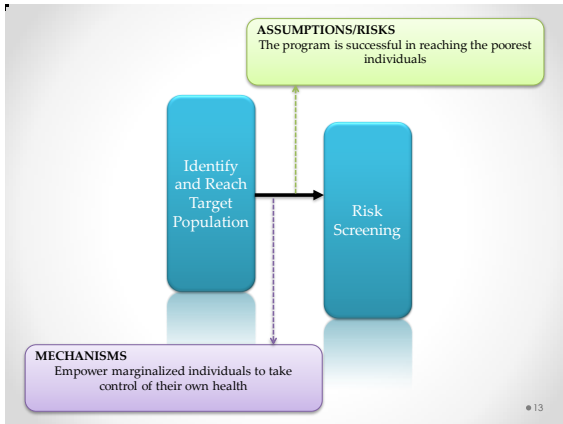
o The 'story' of what should 'happen' in the arrows that link boxes on a logic model



- Theories include the context, mechanisms, assumptions and risks that might support/hinder a step from 'working' as planned

Example 1: Addressing Health Inequities in Scotland





Towards an ecology of evidence

What types of evidence/learning can an evaluation help generate?

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Impact evaluation: The search for 'hard evidence'

- Unlike general evaluations, which can answer many types of questions, impact evaluations are structured around one particular type of question: What is the impact (or causal effect) of a program on an outcome of interest?
- This basic question incorporates an important causal dimension: we are interested only in the impact of the program, that is, the effect on outcomes that the program directly causes. An impact evaluation looks for the changes in outcome that are directly attributable to the program.

• Gerfler et al, 2007, World Bank Publication

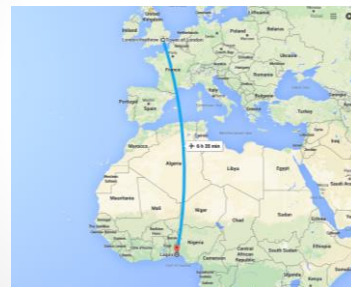
Why 'one' and 'only' may not cut it?

- "The "hard evidence" from the randomized evaluation has to be supplemented with lots of soft evidence before it becomes usable"

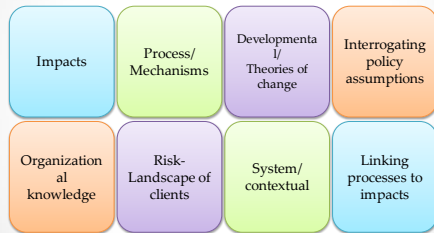
• (Rodrik, 2008)

SO WHAT IS THE PROBLEM HERE?

- The Lagos-London problem

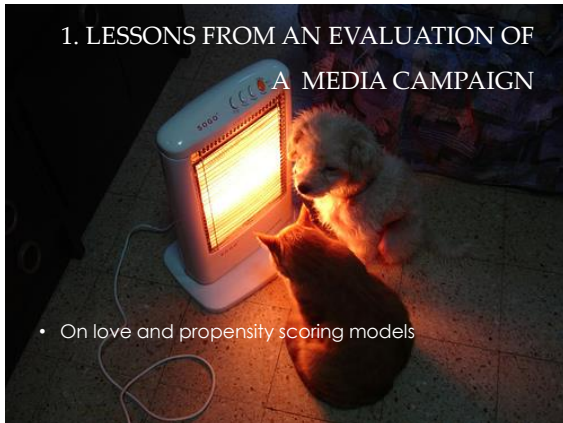


Learnings from evaluation



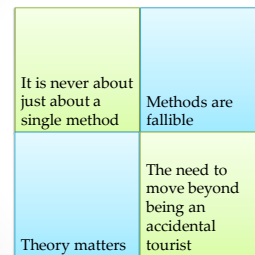
Some Stories of Evaluations

1. LESSONS FROM AN EVALUATION OF A MEDIA CAMPAIGN



- On love and propensity scoring models

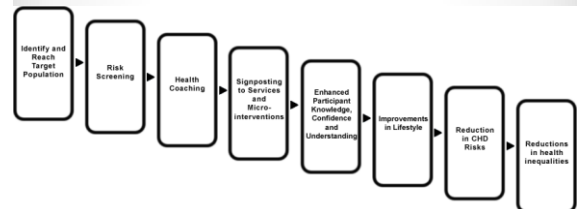
LESSONS



2. LESSONS FROM HAVE A HEART PAISLEY



AN EXAMPLE: PRIMARY PREVENTION HAVE A HEART PAISLEY



LESSONS

Adaptation matters	Going beyond protocols and experiments
Dynamics of interventions	Incompleteness of knowledge at the outset

3. LESSONS FROM DANCING WITH PARKINSON'S



LESSONS

Support structures matter	Mechanisms
Heterogeneity is not noise	Scaling up

4. EXPERIENCES WITH THE WHO



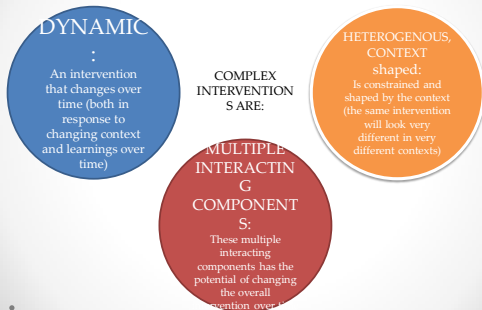
LESSONS

The importance of understanding the nature of connections	Issues of power
The attribution/contribution problem	The inequity problem

Towards an evaluation design for primary care transformation

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Working definition of complex interventions



What's so different about evaluating primary care interventions?

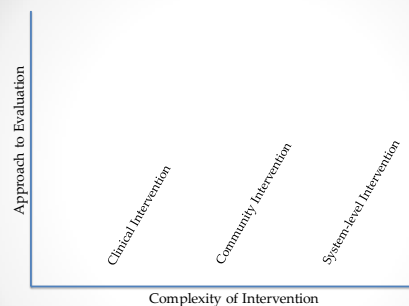
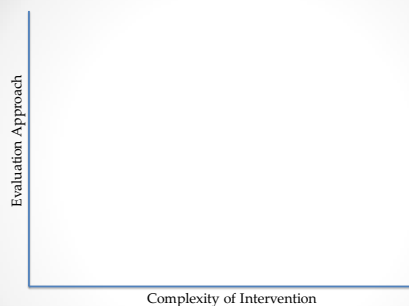
- Complexity of needs of individuals
- Complexity of the intervention
 - Multi-pronged components
 - Dynamics and changes over time
- Complexity of the setting
- Complexity of the pathways by which the intervention works

QUESTIONS TO DESCRIBE THE COMPLEXITY OF PRIMARY CARE INTERVENTIONS

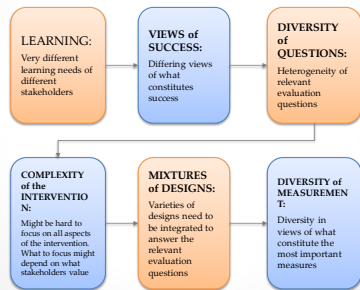
- How hard is it to describe?
- How hard is it to create?
- What is its degree of organization?

What makes an intervention complex? What are the implications for evaluation design?

A hypothesis: Idealized views of 'best' or even 'appropriate' evaluation approaches might depend on the complexity of the intervention



WHY DOES DIVERSITY MATTER IN DESIGNING EVALUATION?



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THE LOGIC OF AN EVOLUTIONARY STRATEGY

- Box et al (1978, p. 303):
- ... *the best time to design an experiment is after it is finished, the converse is that the worst time is the beginning, when least is known.* If the entire experiment was designed at the outset, the following would have to be assumed as known: (1) which variables were the most important, (2) over what ranges the variables should be studied... The experimenter is least able to answer such questions at the outset of an investigation but gradually becomes more able to do so as a program evolves. (p. 303)

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An example of an evaluation of integrated care in Toronto

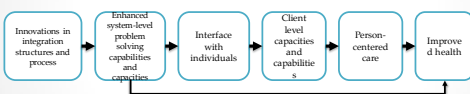
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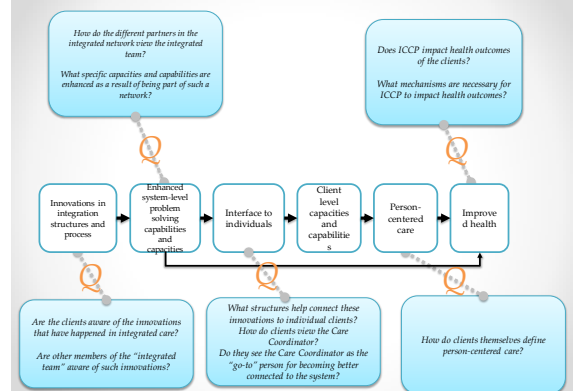
Integrated Care for Complex Populations

- Medication Management
- Independent Living
- Coordination & Navigation
- Smooth Transitions
- Medical Support & Self-care
- Activation & Socialization
- Rapid Response in the Community

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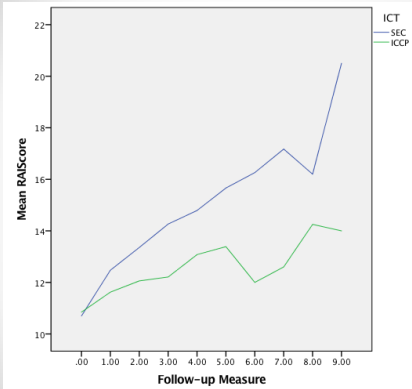


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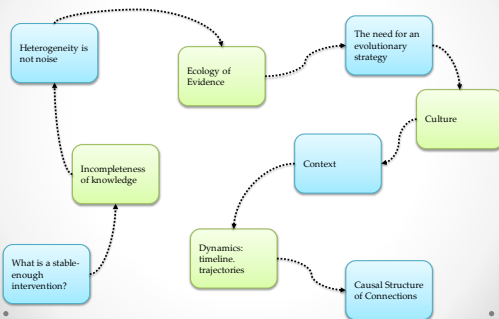


The RAI-HC

- Resident Assessment Instrument for Home Care (RAI-HC) assessments
- Sub-scales
 - Method of Assigning Priority Levels (MAPLe),
 - Activities of Daily Living (ADL)
 - Instrumental Activities of Daily Living (IADL),
 - Cognitive Performance Scale (CPS)
 - Changes in Health, End-Stage Diseases and Signs and Symptoms (CHES).



LOOKING FORWARD



Building evaluation as a field

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Capacity Building

Models of Causation
(Successionist vs.
Generative Models
of Causation)

Integrating
Knowledge
Translation with
evaluation

Developmental
evaluation in
Complex
Dynamic
Settings

Ecology of
Evidence

Program Theory
and
Incompleteness

Time Horizons
and Functional
forms

Spread, Scaling
up and
Generalization

Portfolio of
designs
and approaches

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