Let’s Beat Diabetes

Evaluation

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LBD Information Sharing Workshop
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Evaluating Let’s Beat Diabetes

Goal:
To create a learning environment in which multiple individuals and organisations can learn off each other, and from successes and challenges, to continuously improve quality.

Seeking:
• An overarching Evaluation Framework
• Develop a programme theory to understand and model the causal relationships within Let’s Beat Diabetes plan
• A system-wide Continuous Learning Approach
• Effective and frequent Dissemination Processes for passing evaluation findings onto community, stakeholders and interested parties
The LBD Evaluation Framework

**ENGAGE STAKEHOLDERS**
Engage all stakeholders, including community & cultural, throughout the evaluation process.

**USE & SHARE LESSONS LEARNED**
Feedback of lessons learned to all stakeholders.

**JUSTIFY CONCLUSIONS**
Relate findings to research & community view.

**GATHER CREDIBLE EVIDENCE**
Collect data that is credible to theorists, policy-makers, providers & participants.

**CULTURAL RESPONSIVENESS**
TPK² &MPIA² evaluation guidelines

Standards of Utility, Feasibility Propriety, Validity

**DESCRIBE THE PROGRAMME**
Develop a Programme Logic

**FOCUS EVALUATION DESIGN**
Development of overall design & specific individual action area designs that feed into evaluation plan.

Collaboration & Feedback
Evaluation Aims and Objectives

- Develop a baseline evaluation of the population of Counties Manukau.
- Identify a set of population level Key Performance Indicators.
- Evaluate the success of LBD at the population-level by measuring change in each of these indicators.
- Provide an overview of the outputs and immediate outcomes from all the Action Areas.
- Evaluate a number of specific programmes or interventions through focused studies.
- Evaluate the processes involved in the implementation of LBD including the enablers.
Evaluation Methods

- Five year contract

- Evaluation adopts a mixed methods approach to reflect the complex nature of LBD and includes:
  - Population level monitoring
  - A generic evaluation
  - Focussed studies
Population Monitoring: June 2005 to Feb 2007

• Current literature and data sets were used to inform:
  – A literature review of the epidemiology of Type II diabetes in New Zealand.
  – A study using the Mortality Collection and National Minimum Data Set to more accurately estimate the rate of diabetes-related deaths in New Zealand, and in each DHB area.
  – A study using the Labs Data to estimate the level of Type II diabetes screening and monitoring activity in New Zealand, and in each DHB area.
Generic Evaluation: Key Data Sources

- Documentary analysis of PSG and Action Area meeting minutes, programme resources and other circulated material used to demonstrate progress towards KPIs and overall goals of LBD.

- In-depth interviews with LBD management, Action Area and initiative leaders.

- Self-completion questionnaires with AA and initiative leaders (included organisational development, collaboration and sustainability scales).
LBD Focussed Studies

• In 2006, the LBD focused studies included:
  – A process evaluation of the Maori initiative.
  – The re-development of Templeton Park.
  – The Low Sugar Trial initiative at McDonald’s.
  – The Community Nutrition Project.

• For 2007 the planned focused studies include:
  – The Kai Lelei programme for Pacific Early Childhood Education centres.
  – The integration of primary and secondary care for diabetes with pregnancy.
  – The Healthy Kai programme.
  – A process evaluation of the Schools Accord.
  – Phase 1 of the Social Marketing Campaign.
  – The Otara Health Active Families programme.
Key Findings: Impact

• The programme continued to increase its reach across the communities of Counties Manukau and this was reflected in the:
  • Increased reach into communities and organizations from 2005
  • Increase in indirect intervention
  • Increase in the number of activities
  • New programmes developed
  • A number of programme plans ready to implement
Collaboration and Partnership

- The evidence suggested that the LBD programme had:
  - An improved coordinated approach to seeing solutions.
  - Increased integration across sectors.
  - Made increasing progress towards a strengths based solution process in Counties Manukau.
Organisational Development and Sustainability

• Increasing the organisational development of the LBD was achieved through:
  – Increased programme planning
  – Increased resources
  – Increased workforce capacity
  – Increased evaluation activity

• In support of programme sustainability the LBD programme had:
  – Increased evaluation activities
  – Increased infrastructures across projects
Developing a Learning Environment

• Progress towards establishing a learning environment was reflected through:
  – Increased understanding of the philosophy underpinning LBD.
  – A greater desire to learn from one another and increased dialogue.

• Through collaboration with the SoPH the LBD programme had:
  – Increased awareness of the worth of evaluation.
  – Increased LBD engagement in evaluation.
## KPI framework & indicators

<table>
<thead>
<tr>
<th>At risk Population</th>
<th>1 yr Qualitative Assessment of programme</th>
<th>2-5 yr Uptake (as consequence of /dependent on 1yr)</th>
<th>5+ yr Intermediate (as consequence of /dependent on 1yr &amp; 2yr)</th>
<th>20 yr Long term</th>
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</thead>
<tbody>
<tr>
<td>Achievement of actions in LBD annual plan</td>
<td>✆Knowledge and Attitudes</td>
<td>✆Physical Activity</td>
<td>✆Obesity (Adult)</td>
<td></td>
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<tr>
<td></td>
<td>✆Participation in LBD</td>
<td>✆Obesity (Childhood)</td>
<td>✆Other CV risk factors</td>
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<tr>
<td></td>
<td>✆Screening for Diabetes</td>
<td>✆Nutrition</td>
<td>✆CVD mortality</td>
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<td></td>
<td></td>
<td>✆Screening for Diabetes</td>
<td>✆New case of Diabetes</td>
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<thead>
<tr>
<th>Diabetics</th>
<th>Achievement of actions in LBD annual plan</th>
<th>Participation in organised management programmes</th>
<th>Intermediate outcomes</th>
<th>New case of Diabetes</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>➤Screening for Complications</td>
<td>➤Complications of diabetes</td>
<td>➤Diabetes Related Mortality</td>
<td>➤Diabetes Related Mortality</td>
</tr>
</tbody>
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Thank you.