Please find below the results of your literature search request.

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**Literature search results**

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**Search details**

Theoretical frameworks to evaluate social programmes, training programmes and change projects

**Resources searched**

NHS Evidence; National Library for Health; TRIP Database; Cochrane Library; CINAHL; EMBASE; HMIC; Health Business Elite; MEDLINE; Google Advanced Search

**Database search terms**

theor*; THEORY; exp THEORY; CONCEPTUAL FRAMEWORK; exp MODELS, THEORETICAL; exp NURSING MODELS, THEORETICAL; model*; framework*; evaluat*; EVALUATION; training; course*; education; exp EDUCATION; change; ORGANIZATIONAL CHANGE; ROLE CHANGE; JOB CHANGE; CHANGE MANAGEMENT; project*; SOCIAL CHANGE; social; societ*; COMMUNITY PROGRAMS; program*; initiative*; intervention

**Google search string**

("evaluation model" OR "evaluation framework") theoretical (((social OR community) programme) OR "training programme" OR "change project")

**Summary**

Quite lot on evaluation but comparatively little on the theoretical framework of evaluation, certainly in terms of guidance and published literature. However as we do not have access to social sciences’ databases, quite a few documents and articles of interest were found using Google Scholar and Advanced Search. As you weren’t looking for a particular framework or a specific programme or project, I am not able to summarise further.

**Guidelines**

**Cabinet Office**

Quality in qualitative evaluation: a framework for assessing research evidence 2003

The objective of the study was to develop a framework which would guide assessments of the quality of qualitative research evaluations.
Evidence-based reviews

None found.

Published research

1. Delivering the WISE (Whole Systems Informing Self-Management Engagement) training package in primary care: learning from formative evaluation.

**Author(s):** Kennedy, Anne, Chew Graham, Carolyn, Blakeman, Thomas

**Citation:** Implementation Science, 2010, vol./is. 5/7, 1748-5908 (29 January 2010)

**Publication Date:** 2010

**Abstract:** BACKGROUND: The W.I.S.E. (Whole System Informing Self-management Engagement) approach encompasses creating, finding, and implementing appropriate self-care support for people with long-term conditions. A training package for primary care to introduce the approach was developed and underwent formative evaluation. This entailed exploring the acceptability of the W.I.S.E. approach and its effectiveness in changing communication within consultations. The study aimed to refine the patient, practitioner, and patient level components of the W.I.S.E. approach and translate the principles of W.I.S.E. into an operational intervention deliverable through National Health Service training methods. METHODS: Normalisation Process Theory provided a framework for development of the intervention. Practices were recruited from an inner city primary care trust in NW England. All practice staff were expected to attend two afternoon training sessions. The training sessions were observed by members of the training team. Post-training audio recordings of consultations from each general practitioner and nurse in the practices were transcribed and read to provide a narrative overview of the incorporation of W.I.S.E. skills and tools into consultations. Face-to-face semi-structured interviews were conducted with staff post-training. RESULTS: Two practices out of 14 deemed eligible agreed to take part. Each practice attended two sessions, although a third session on consultation skills training was needed for one practice. Fifty-four post-training consultations were recorded from 15 clinicians. Two members of staff were interviewed at each practice. Significant elements of the training form and methods of delivery fitted contemporary practice. There were logistical problems in getting a whole practice to attend both sessions, and administrative staff founds some sections irrelevant. Clinicians reported problems incorporating some of the tools developed for W.I.S.E., and this was confirmed in the overview of consultations, with limited overt use of W.I.S.E. tools and missed opportunities to address patients’ self-management needs. CONCLUSIONS: The formative evaluation approach and attention to normalisation process theory allowed the training team to make adjustments to content and delivery and ensure appropriate staff attended each session. The content of the course was simplified and focussed more clearly on operationalising the W.I.S.E. approach. The patient arm of the approach was strengthened by raising expectations of a change in approach to self-care support by their practice. 2 figs 3 tables 39 refs. [Abstract]

**Source:** HMIC

Full Text:

Available in fulltext at BioMedCentral

Available in fulltext at National Library of Medicine

2. Realist evaluation as a framework for the assessment of teaching about the improvement of care.

**Author(s):** Ogrinc G, Batalden P

**Citation:** Journal of Nursing Education, 01 December 2009, vol./is. 48/12(661-667),
3. Commentary on “Realist evaluation as a framework for the assessment of teaching about the improvement of care”.

Author(s): Moore SM

Citation: Journal of Nursing Education, 01 December 2009, vol./is. 48/12(667-668), 01484834

Publication Date: 01 December 2009

Source: CINAHL

Full Text: Available in fulltext at EBSCO Host

4. Understanding the practical and theoretical development of social rehabilitation through action research.

Author(s): Portillo MC

Citation: Journal of Clinical Nursing, 15 January 2009, vol./is. 18/2(234-245), 09621067

Publication Date: 15 January 2009

Abstract: Aim. This paper aims to present and reflect on the process of practical and theoretical change in an action research project in which the issue of social rehabilitation was developed. Background. Action research is a useful method to change and advance practice. Consequently, grounded knowledge, which forms the basis of the practical change, is developed. 'Social rehabilitation' was the field of clinical practice which needed enhancement as the literature lacked nurse-led social rehabilitation programmes in the neurology field. Design. This was a cyclic action research project. Methods. The project took place in a highly specialised hospital in Spain and aimed to promote social life of neurological patients and relatives through the planning, implementation and evaluation of a nurse-led social rehabilitation programme based on individual needs. In this project, which lasted 30 months, multiple triangulation of sources and methods was applied. Thirty-seven nurses participated and 22 and 18 patients and their relatives constituted a baseline and an intervention group, respectively. Results. Several issues were carefully treated in this action research project to develop practical and theoretical knowledge about social rehabilitation: the validity and reliability of the project, the work organisation of the wards, the nurses' attitudes towards new care, the researcher-participant relationship and the controversial role of professionals in social rehabilitation. Conclusion. The nurses' emancipation in the process of practice change led to practical and theoretical assimilation of social rehabilitation. Intensive work on practitioners' attitudes and the provision of empirical evidence were key interventions to foster controversial roles and enhance services.

Source: CINAHL

Full Text: Available in fulltext at Ovid

Available in fulltext at EBSCO Host

5. Evidence-based practice for advanced practice emergency nurses, part III: planning, implementing, and evaluating an evidence-based small test of change.

Author(s): Shapiro SE, Donaldson NA

Citation: Advanced Emergency Nursing Journal, 01 July 2008, vol./is. 30/3(222-232), 19314485
Publication Date: 01 July 2008

Abstract: In this article, we describe the steps involved in implementing an evidence-based practice change in an emergency department. Using the hypothetical case of changing from a 3-tier to a 5-tier triage system, we present an overview of change theory, microsystem analysis, and rapid cycle change. We then provide practical as well as theoretical suggestions for planning, implementing, and evaluating an evidence-based practice change. We also provide practical tools for conducting a gap analysis and creating a project plan that advanced practice emergency nurses will find useful as they take on this leadership role in their department.

Source: CINAHL

6. Assessing the performance of health technology assessment organizations: A framework

Author(s): Lafortune L., Farand L., Mondou I., Sicotte C., Battista R.

Citation: International Journal of Technology Assessment in Health Care, January 2008, vol./is. 24/1(76-86), 0266-4623/1471-6348 (Jan 2008)

Publication Date: January 2008

Abstract: In light of growing demands for public accountability, the broadening scope of health technology assessment organizations (HTAOs) activities and their increasing role in decision-making underscores the importance for them to demonstrate their performance. Based on Parson's social action theory, we propose a conceptual model that includes four functions an organization needs to balance to perform well: (i) goal attainment, (ii) production, (iii) adaptation to the environment, and (iv) culture and values maintenance. From a review of the HTA literature, we identify specific dimensions pertaining to the four functions and show how they relate to performance. We compare our model with evaluations reported in the scientific and gray literature to confirm its capacity to accommodate various evaluation designs, contexts of evaluation, and organizational models and perspectives. Our findings reveal the dimensions of performance most often assessed and other important ones that, hitherto, remain unexplored. The model provides a flexible and theoretically grounded tool to assess the performance of HTAOs. 2008 Cambridge University Press.

Source: EMBASE

7. Evaluating complex public health interventions: Theory, methods and scope of realist enquiry

Author(s): Connelly J.B.

Citation: Journal of Evaluation in Clinical Practice, December 2007, vol./is. 13/6(935-941), 1356-1294;1365-2753 (Dec 2007)

Publication Date: December 2007

Abstract: The standard models used in the study of complex public health interventions are inadequate. They adopt a simple empiricist theoretical foundation and attempt to graft onto an essentially open social system a contrived laboratory experimentation typically in the form of a randomized, controlled trial. By understanding the ontological and epistemological claims of critical realism, it is possible to transcend the methodological inadequacy of the standard model approach. Critical realism posits a substantive causal theory, an end to fact-value dualism, and a coherent and emancipatory model of social action; all of these features amount to a systematic and compelling account of public health practice and a coherent approach to evaluation of complex public health interventions. 2007 The Author.

Source: EMBASE

Full Text: Available in fulltext at EBSCO Host

8. Toward a model for field-testing patient decision-support technologies: a qualitative field-testing study
Abstract: BACKGROUND: Field-testing is a quality assurance criterion in the development of patient decision-support technologies (PDSTs), as identified in the consensus statement of the International Patient Decision Aids Standards Collaboration. We incorporated field-testing into the development of a Web-based, prostate-specific antigen PDST called Prosdex, which was commissioned as part of the UK Prostate Cancer Risk Management Programme. OBJECTIVES: The aim of this study was to develop a model for the future field-testing of PDSTs, based on the field-testing of Prosdex. Our objectives were (1) to explore the reactions of men to evolving prototypes of Prosdex, (2) to assess the effect of these responses on the development process, and (3) to develop a model for field-testing PDSTs based on the responses and their effect on the development process. METHODS: Semistructured interviews were conducted with the men after they had viewed evolving prototypes of Prosdex in their homes. The men were grouped according to the prototype viewed. Men between 40 and 75 years of age were recruited from two family practices in different parts of Wales, United Kingdom. In the interviews, the men were asked for their views on Prosdex, both as a whole and in relation to specific sections such as the introduction and video clips. Comments and technical issues that arose during the viewings were noted and fed back to the developers in order to produce subsequent prototypes.

RESULTS: A total of 27 men were interviewed, in five groups, according to the five prototypes of Prosdex that were developed. The two main themes from the interviews were the responses to the information provided in Prosdex and the responses to specific features of Prosdex. Within these themes, two of the most frequently encountered categories were detail of the information provided and balance between contrasting viewpoints. Criticisms were encountered, particularly with respect to navigation of the site. In addition, we found that participants made little use of the decision-making scale. The introduction of an interactive contents page to prototype 2 was the main change made to Prosdex as a result of the field-testing. Based on our findings, a model for the field-testing of PDSTs was developed, involving an exploratory field-testing stage between the planning stage and the development of the first prototype, and followed by the prototype field-testing stage, leading to the final PDST. CONCLUSIONS: In the field-testing of Prosdex, a Web-based prostate-specific antigen PDST, the responses of interviewed men were generally favorable. As a consequence of the responses, an interactive contents page was added to the site. We developed a model for the future field-testing of PDSTs, involving two stages: exploratory field-testing and prototype field-testing.

Source: EMBASE

Full Text:
Available in fulltext at National Library of Medicine


Citation: Tobacco Control, June 2006, vol./is. 15/SUPPL. 3(iii3-iii11), 0964-4563 (June 2006)

Publication Date: June 2006

Abstract: This paper describes the conceptual model that underlies the International Tobacco Control Policy Evaluation Project (ITC Project), whose mission is to measure the psychosocial and behavioural impact of key policies of the Framework Convention on Tobacco Control (FCTC) among adult smokers, and in some countries, among adult non-smokers and among youth. The evaluation framework utilises multiple country controls, a longitudinal design, and a pre-specified, theory-driven conceptual model to test hypotheses about the anticipated effects of specific policies. The ITC Project consists of parallel prospective cohort surveys of representative samples of adult smokers currently in nine countries (inhabited by over 45% of the world’s smokers), with other countries being added in the future. Collectively, the ITC Surveys constitute the first-ever international cohort study of tobacco use. The conceptual model of the ITC Project draws on the psychosocial and
health communication literature and assumes that tobacco control policies influence tobacco related behaviours through a causal chain of psychological events, with some variables more closely related to the policy itself (policy-specific variables) and other variables that are more downstream from the policy, which have been identified by health behaviour and social psychological theories as being important causal precursors of behaviour (psychosocial mediators). We discuss the objectives of the ITC Project and its potential for building the evidence base for the FCTC.

Source: EMBASE

Full Text:
Available in fulltext at Highwire Press
Available in fulltext at Highwire Press
Available in fulltext at National Library of Medicine

10. Decision-tree model of treatment-seeking behaviors after detecting symptoms by Korean stroke patients

Author(s): Oh H.S., Park H.A.

Citation: Taehan Kanho Hakhoe chi, June 2006, vol./is. 36/4(662-670), 1598-2874 (Jun 2006)

Publication Date: June 2006

Abstract: PURPOSE: This study was performed to develop and test a decision-tree model of treatment-seeking behaviors about when Korean patients visit a doctor after experiencing stroke symptoms. METHODS: The study used methodological triangulation. The model was developed based on qualitative data collected from in-depth interviews with 18 stroke patients. The model was tested using quantitative data collected from interviews and a structured questionnaire involving 150 stroke patients. The predictability of the decision-tree model was quantified as the proportion of participants who followed the pathway predicted by the model. RESULTS: Decision outcomes of the model were categorized into immediate and delayed treatment-seeking behavior. The model was influenced by lowered consciousness, social-group influences, perceived seriousness of symptoms, past history of hypertension or stroke, and barriers to hospital visits. The predictability of the model was found to be 90.7%. CONCLUSIONS: The results from this study can help healthcare personnel understand the education needs of stroke patients regarding treatment-seeking behaviors, and hence aid in the development of educational strategies for stroke patients.

Source: EMBASE

11. A new evaluation concept and its measurement: "Male sexual anticipating cognitions"

Author(s): Bonierbale M., Clement A., Loundou A., Simeoni M.-C., Barrau K., Hamidi K., Apter M.J., Lancon C., Auquier P.

Citation: Journal of Sexual Medicine, January 2006, vol./is. 3/1(96-103), 1743-6095;1743-6109 (Jan 2006)

Publication Date: January 2006

Abstract: Context. The development of sex-active drugs justifies the use of scales for evaluating changes induced by such forms of therapy. Among the tools available for evaluating erectile dysfunction (ED), the International Index of Erectile Function is the most widely used. Analysis of the scientific literature shows that these instruments remain primarily focused on functional aspects of ED. The vulnerability factors involved in ED are mainly based upon organic characteristics, e.g., age, cardiovascular diseases, or diabetes, but the psychological factors involved in the occurrence and maintenance of ED are less studied. Objective. This conclusion led us to develop a French self-administered instrument, based on patients' subjective sexual experiences, to evaluate "male sexual anticipating cognitions," using Apter's reversal theory as a framework. Design, Setting, and Patients. We present here the first stages of the development of this new instrument. We carried out semistructured, one-to-one interviews with patients with psychogenic ED and
patients with mixed ED. Eighteen one-to-one interviews were held in several urologic/andrologic and psychiatric sexologist services. Interviews were continued until the required information was obtained. Analyses of the content were performed to generate items for the new instrument. Results. Dimensions isolated were those of (a) sexual beliefs; (b) metamotivational modes; and (c) dysfunctional coping. Pools of items are currently being analyzed by 108 experts (psychologists, sexologists, andrologists, urologists) to determine if additional items are required. The acceptability and the comprehensiveness of this preliminary questionnaire will be tested by 320 patients in a multicentric study, to produce a shorter questionnaire featuring the most relevant items. Once validated, this multidimensional instrument could be used to assess treatment efficacy of mixed and psychogenic components of ED. 2005 International Society for Sexual Medicine.

Source: EMBASE

12. A conceptual model for understanding effective coalitions involved in health promotion programing.

Author(s): Cramer ME, Atwood JR, Stoner JA

Citation: Public Health Nursing, 01 January 2006, vol./is. 23/1(67-73), 07371209

Publication Date: 01 January 2006

Abstract: Funding agencies are increasingly focused on community coalitions as effective entities for promoting public health programs. Yet, there has been no conceptual model for understanding how effective coalition infrastructure works to facilitate a learning environment, wherein coalition members and leaders receive ongoing training and technical assistance needed to accomplish their external programing goals. This article presents a conceptual model for measuring the internal effectiveness of coalitions [Internal Coalition Outcome Hierarchy (ICOH)]. The ICOH model served as the basis for development of the evaluation instrument, Internal Coalition Effectiveness, which measures internal coalition effectiveness based on achievement of organizational outcomes at each of the model's seven hierarchical levels. The ICOH conceptual model has broad application for public health nurses who are frequently called on to serve as evaluators for community coalitions engaged in health programing. The model has implications for evaluators to use in teaching coalition members and leaders about their internal strengths and areas for improvement, so that coalitions can develop more effective internal structures and thereby promote long-term sustainability.

Source: CINAHL

Full Text:
Available in fulltext at EBSCO Host


Author(s): Miner KR, Childers WK, Alperin M, Cioffi J, Hunt N

Citation: Public Health Reports, 02 July 2005, vol./is. 120/(9-15), 00333549

Publication Date: 02 July 2005

Source: CINAHL

Full Text:
Available in fulltext at EBSCO Host
Available in fulltext at National Library of Medicine

14. Realist review - a new method of systematic review designed for complex policy interventions

Author(s): Pawson, Ray, Greenhalgh, Trisha, Harvey, Gill, Walshe, Kieran

Citation: Journal of Health Services Research Policy, 2005, vol./is. 10/(S1:21-S1:34), 1355-8196 (July 1 2005)

Publication Date: 2005
Abstract: Evidence-based policy is a dominant theme in contemporary public services but the practical realities and challenges involved in using evidence in policy-making are formidable. Part of the problem is one of complexity. In health services and other public services, the authors are dealing with complex social interventions which act on complex social systems - things like league tables, performance measures, regulation and inspection, or funding reforms. These are not 'magic bullets' which will always hit their target, but programmes whose effects are crucially dependent on context and implementation. Traditional methods of review focus on measuring and reporting on programme effectiveness, often find that the evidence is mixed or conflicting, and provide little or no clue as to why the intervention worked or did not work when applied in different contexts or circumstances, deployed by different stakeholders, or used for different purposes. This paper offers a model of research synthesis which is designed to work with complex social interventions or programmes, and which is based on the emerging 'realist' approach to evaluation. It provides an explanatory analysis aimed at discerning what works for whom, in what circumstances, in what respects and how. The first step is to make explicit the programme theory (or theories) - the underlying assumptions about how an intervention is meant to work and what impacts it is expected to have. The authors then look for empirical evidence to populate this theoretical framework, supporting, contradicting or modifying the programme theories as it goes. The results of the review combine theoretical understanding and empirical evidence, and focus on explaining the relationship between the context in which the intervention is applied, the mechanisms by which it works and the outcomes which are produced. The aim is to enable decision-makers to reach a deeper understanding of the intervention and how it can be made to work most effectively. Realist review does not provide simple answers to complex questions. It will not tell policymakers or managers whether something works or not, but will provide the policy and practice community with the kind of rich, detailed and highly practical understanding of complex social interventions which is likely to be of much more use to them when planning and implementing programmes at a national, regional or local level. Cites 40 references.

Source: HMIC

Full Text:

Available in fulltext at EBSCO Host


Author(s): Pawson, Ray

Citation: Journal of Health Services Research and Policy, 2005, vol./is. 10/, 1135-58196 (July 2005 Suppl)

Publication Date: 2005

Abstract: Evidence-based policy is a dominant theme in contemporary public services but the practical realities and challenges involved in using evidence in policy-making are formidable. Part of the problem is one of complexity. In health services and other public services, we are dealing with complex social interventions which act on complex social systems - things like league tables, performance measures, regulation and inspection, or funding reforms. These are not 'magic bullets' which will always hit their target, but programmes whose effects are crucially dependent on context and implementation. Traditional methods of review focus on measuring and reporting on programme effectiveness, often find that the evidence is mixed or conflicting, and provide little or no clue as to why the intervention worked or did not work when applied in different contexts or circumstances, deployed by different stakeholders, or used for different purposes. This paper offers a model of research synthesis which is designed to work with complex social interventions or programmes, and which is based on the emerging 'realist' approach to evaluation. It provides an explanatory analysis aimed at discerning what works for whom, in what circumstances, in what respects and how. The first step is to make explicit the programme theory (or theories) - the underlying assumptions about how an intervention is meant to work and what impacts it is expected to have. We then look for empirical evidence to populate this theoretical framework, supporting, contradicting or modifying the programme theories as it goes. The results of the review combine theoretical understanding and empirical evidence, and focus on explaining the relationship between
the context in which the intervention is applied, the mechanisms by which it works and the outcomes which are produced. The aim is to enable decision-makers to reach a deeper understanding of the intervention and how it can be made to work most effectively. Realist review does not provide simple answers to complex questions. It will not tell policy-makers or managers whether something works or not, but will provide the policy and practice community with the kind of rich, detailed and highly practical understanding of complex social interventions which is likely to be of much more use to them when planning and implementing programmes at a national, regional or local level. 3 figs. 40 refs. [Abstract]

Source: HMIC

Full Text:
Available in fulltext at EBSCO Host


Author(s): Carroll, Marie

Citation: Social Policy and Society, 2005, vol./is. 4/4(393-401), 1474-7464 (October 2005)

Publication Date: 2005

Abstract: Discovering a theory of change for health promotion in small- and medium-sized enterprises highlights important lessons about how successful workplace health interventions work and the conditions conducive to positive outcomes for 'hard to reach groups'. In the evaluation of targeted health promotion initiatives carried out by the Workwell project in Sandwell, a theory of change has emerged that indicates the need for a sensitive understanding of the contexts of interventions and the importance of developing mechanisms appropriate to local conditions and stakeholder expectations. 15 refs. [Abstract]

Source: HMIC

17. Public participation in regional health policy: a theoretical framework.

Author(s): Thurston, Wilfeda E.

Citation: Health Policy, 2005, vol./is. 73/3(237-252), 0168-8510 (September 2005)

Publication Date: 2005

Abstract: How best to involve the public in local health policy development and decision-making is an ongoing challenge for health systems. In the current literature on this topic, there is discussion of the lack of rigorous evaluations upon which to draw generalisable conclusions about what public participation methods work best and for what kinds of outcomes. We believe that for evaluation research on public participation to build generalisable claims, some consistency in theoretical framework is needed. A major objective of the research reported on here was to develop such a theoretical framework for understanding public participation in the context of regionalised health governance. The overall research design followed the grounded theory tradition, and included five case studies of public participation initiatives in an urban regional health authority in Canada, as well as a postal survey of community organizations. This particular article describes the theoretical framework developed, with an emphasis on explaining the following major components of the framework: public participation initiatives as a process; policy making processes with a health region; social context as symbolic and political institutions; policy communities; and health of the population as the ultimate outcome of public participation. 1 fig. 1 table 69 refs. [Abstract]

Source: HMIC

18. Progress towards partnership?: the development of relations between primary care organisations and social services concerning older people’s services in the UK.

Author(s): Rummery, Kirstein

Citation: Social Policy and Society, 2004, vol./is. 3/1(33-42), 1474-7464 (January 2004)
**Abstract:** This paper will present evidence from the interim results of a large scale longitudinal project designed to track the development of partnership working between the new primary care organisations (Primary Care Groups and Trusts) entrusted with the commissioning and in some cases provision of health care, and local authority social services departments, regarding health and social care services for older people in the UK. Drawing on theoretical work concerning the role of partnership working in the governance of welfare, the author uses a framework originally devised by the Nuffield Centre for Health at the University of Leeds to analyse the interim data, and to draw conclusions about the feasibility of current policy pushes towards partnership working and service integration around health and social care for older people. 16 refs. [Abstract]

**Source:** HMIC

19. **Service evaluation and the service user: A pluralistic solution**

**Author(s):** Salmon N.

**Citation:** British Journal of Occupational Therapy, July 2003, vol./is. 66/7(311-317), 0308-0226 (01 Jul 2003)

**Publication Date:** July 2003

**Abstract:** User involvement is a key pillar in the temple of clinical governance. There are many potential ways in which the service users of health and social care may act in order to achieve positive and constructive change. Service evaluation, however, has not historically been one of these. This paper looks at a model of service evaluation that can offer an empowered voice to service users, enabling participation in service-level evaluation and development. The pluralistic model for evaluation has a subjectivist epistemology, which stands in contrast to the scientific evaluation methods normally seen in health and social care organisations. It attempts to give all the stakeholders of a service equal authority and explores all perspectives to create a measure of success that is relevant and meaningful at the local level. This paper evaluates the theory behind this model and explores the pros and cons of this approach through recent examples found in the literature. It is hoped that this article will generate further thought and debate on this important and timely subject.

**Source:** EMBASE

**Full Text:**
Available in print at Lincoln County Hospital Professional Library

20. **Methods for evaluation of small scale quality improvement projects.**

**Author(s):** Harvey G, Wensing M

**Citation:** Quality & Safety in Health Care, 01 June 2003, vol./is. 12/3(210-214), 14753898

**Publication Date:** 01 June 2003

**Abstract:** Evaluation is an integral component of quality improvement and there is much to be learned from the evaluation of small scale quality improvement initiatives at a local level. This type of evaluation is useful for a number of different reasons including monitoring the impact of local projects, identifying and dealing with issues as they arise within a project, comparing local projects to draw lessons, and collecting more detailed information as part of a bigger evaluation project. Focused audits and developmental studies can be used for evaluation within projects, while methods such as multiple case studies and process evaluations can be used to draw generalised lessons from local experiences and to provide examples of successful projects. Evaluations of small scale quality improvement projects help those involved in improvement initiatives to optimise their choice of interventions and use of resources. Important information to add to the knowledge base of quality improvement in health care can be derived by undertaking formal evaluation of local projects, particularly in relation to building theory around the processes of implementation and increasing understanding of the complex change processes involved.

**Source:** CINAHL

**Full Text:**
21. Developing and testing a model to predict outcomes of organizational change.

Author(s): Gustafson DH, Sainfort F, Eichler M, Adams L, Bisognano M, Steudel H

Citation: Health Services Research, 01 April 2003, vol./is. 38/2(751-776), 00179124

Publication Date: 01 April 2003

Abstract: OBJECTIVE: To test the effectiveness of a Bayesian model employing subjective probability estimates for predicting success and failure of health care improvement projects. DATA SOURCES: Experts' subjective assessment data for model development and independent retrospective data on 221 healthcare improvement projects in the United States, Canada, and The Netherlands collected between 1996 and 2000 for validation. METHODS: A panel of theoretical and practical experts and literature in organizational change were used to identify factors predicting the outcome of improvement efforts. A Bayesian model was developed to estimate probability of successful change using subjective estimates of likelihood ratios and prior odds elicited from the panel of experts. A subsequent retrospective empirical analysis of change efforts in 198 health care organizations was performed to validate the model. Logistic regression and ROC analysis were used to evaluate the model's performance using three alternative definitions of success. DATA COLLECTION: For the model development, experts' subjective assessments were elicited using an integrative group process. For the validation study, a staff person intimately involved in each improvement project responded to a written survey asking questions about model factors and project outcomes. RESULTS: Logistic regression chi-square statistics and areas under the ROC curve demonstrated a high level of model performance in predicting success. Chi-square statistics were significant at the 0.001 level and areas under the ROC curve were greater than 0.84. CONCLUSIONS: A subjective Bayesian model was effective in predicting the outcome of actual improvement projects. Additional prospective evaluations as well as testing the impact of this model as an intervention are warranted.

Source: CINAHL

Full Text:

Available in fulltext at EBSCO Host
Available in fulltext at National Library of Medicine


Author(s): Whitehead D

Citation: Journal of Advanced Nursing, 01 March 2003, vol./is. 41/5(490-498), 03092402

Publication Date: 01 March 2003

Abstract: Aims. To investigate the place and validity of effective process in evaluating health promotion practice in nursing and, in doing so, develop a specific model for this purpose. Background/rationale. The failure of many nurses to provide successful health promotional programmes is underpinned by a distinct lack of evaluation research activity. Without this type of activity, health-related nursing practice remains limited in its scope and nature. This article seeks to redress this situation by proposing a specific evaluation model that assists the nurse in their attempts to include evaluative research activity in future health promotion practice. Method. This article draws on existing literature to develop an evolving theoretical perspective for health promotion practice in nursing. The proposed model was developed from this perspective. Conclusion. Evaluation is an essential activity for any health promotion programme. Failure to include it in practice ensures that attempts to conduct health promotion are usually rendered ineffective and unsuccessful. Evaluation
models are valuable tools that nurses can incorporate routinely into existing frameworks of practice, alongside other models of health education/health promotion, such as planning models. The development of this model is intended to enable nurses to review their current practice and offer a further framework for those who wish to extend their current health promotion repertoire.

Source: CINAHL

Full Text:
Available in fulltext at EBSCO Host
Available in print at Grantham Hospital Staff Library
Available in print at Pilgrim Hospital Staff Library


Author(s): Lafferty CK, Mahoney CA
Citation: Health Promotion Practice, 01 January 2003, vol./is. 4/1(31-44), 15248399
Publication Date: 01 January 2003
Abstract: This article describes a model and design for evaluating a comprehensive community health promotion initiative. The theoretically based model was designed by the authors to evaluate a countywide initiative based on developmental assets, a framework for healthy youth development promoted by the Search Institute in Minneapolis, Minnesota. The model includes the components of a typical logic model and incorporates concepts proposed by diffusion of innovations, social cognitive theory, and Search Institute's conceptual model for community change. The model highlights the priorities of local stakeholders and directs evaluation activities in multiple community sectors over time. The evaluation design is presented according to the Centers for Disease Control and Prevention framework for program evaluation in public health.

Source: CINAHL

24. Evaluating the impact of organizational learning initiatives.

Author(s): McCallum M, Curran-Smith J, Wojnar D, Williamson S
Citation: Journal for Nurses in Staff Development, 01 July 2002, vol./is. 18/4(177-184), 10987886
Publication Date: 01 July 2002
Abstract: This article describes the process used to develop an evaluation model for organizational learning in a healthcare environment. This model moves away from the traditional focus on learner satisfaction and places greater emphasis on performance and impact evaluation. The evaluation model is grounded in the work of Kirkpatrick (1998) and Phillips (1991) and can be applied to a variety of programs. Using a highly practical approach, the model enables educators to determine the most appropriate level of evaluation for a learning opportunity and to identify effective and efficient strategies. This model could be readily adopted by healthcare organizations interested in enhancing the evaluation of the learning initiatives.

Source: CINAHL


Author(s): Sherrick CS
Citation: SSM, 01 April 2002, vol./is. 8/2(51-56), 10798269
Publication Date: 01 April 2002
Source: CINAHL
26. **Partnership working in public policy provision: a framework for evaluation.**

**Author(s):** Asthana, Sheena, Halliday, Joyce, Richardson, Sue  
**Citation:** Social Policy and Administration, 2002, vol./is. 36/7(780-795), 0144-5596 (December 2002)  
**Publication Date:** 2002  
**Abstract:** Partnership working has emerged as a key feature of New Labour’s approach to social policy. However, although the theoretical benefits of partnership have been well rehearsed, agencies charged with fostering partnerships lack ‘evidence’ about how best to proceed in bringing about organisational change. This paper describes the development and implementation of a practical approach to capturing the strategies that can be used to establish, strengthen and sustain local partnerships. To this end, it presents a conceptual framework for the evaluation of partnership working and demonstrates the application of the framework to an investigation of partnership working in Cornwall and Isles of Scilly, and Plymouth health action zones.  
1 fig. 33 refs. [Abstract]  
**Source:** HMIC

27. **Learning from theory-driven evaluations across local Health Action Zone initiatives in Nottingham: using or losing?**

**Author(s):** Coppel, Dara  
**Citation:** , 2002  
**Publication Date:** 2002  
**Abstract:** This chapter aims to show how successful Nottingham Health Action Zone (HAZ) has been in harnessing maximum learning into core policy activities. Contextual information is presented on Nottingham HAZ, and this is backed up with details of central Government initiatives. The chapter concentrates on the approach taken by Nottingham HAZ regarding the usefulness of its provision of evidence. Reference is made to the theories of change evaluation framework. Outcomes are described in relation to local service decision making and how these results are utilised in influencing policy matters. The author affirms the valuable role played by Nottingham HAZ regarding its influence on local health services. However, there is no indication that Nottingham HAZ is yet in a position to answer all emerging questions on this debate. Cites numerous references.  
**Source:** HMIC

28. **Evaluating community-level projects: comparing theories of change and participatory approaches**

**Author(s):** Springett, Jane, Young, Angela  
**Citation:** , 2002  
**Publication Date:** 2002  
**Abstract:** This chapter indicates a response to the differing approaches adopted by the Merseyside Health Action Zone (MHAZ) and the Community Programme of Manchester Salford and Trafford Health Action Zone (MaSTHAZ). The approaches differ in that MHAZ uses a theory of change (ToC) framework, whereas MaSTHAZ adopts a participatory action research approach to building project-level evaluation. Both approaches are described in detail. The researchers draw various conclusions including the fact that when theories of change are determined by projects, the focus relates to the remit of the HAZ agenda which centres on the wellbeing and quality of life. The researchers also state that the best type of evaluation is one that facilitates groups to take control. Cites numerous references.  
**Source:** HMIC

29. **Evaluation of the QALY model for analysis of cost-effectiveness of eating training after stroke.**

**Author(s):** Jacobsson C, Lindholm L, Engström B, Norberg A
Abstract: New methods developed and insights gained in research are of increasing significance in health care and the question is which services and methods are to be implemented. If eating training after stroke is to be implemented it must be given priority in relation to other measures. Otherwise there is a risk that patients with eating difficulties after stroke will be fed by personnel or permanently receive nourishment via tube. This may lead to expensive measures or costs for the tube feeding as well as costs for the personnel needed for feeding, and patients’ well-being will be reduced if they do not have the opportunity to eat as independently as possible. Economic analyses should not guide the priorities to be made, but can be one of several bases for resource allocation. The estimation of cost-effectiveness must, however, be made by means of a method which in its ethical foundation is in line with nursing and the Swedish Government Bill for guiding priorities in health care. The aim of this paper is to discuss the ethical foundation of nursing care and the ethical principles proposed by the Swedish Government Bill for guiding priorities in health care and the model of Quality Adjusted Life Years (QALYs) related to eating training after stroke. The findings showed that there was a considerable difference in the ways health and health maximization were discussed in the QALY model and in specific nursing care. There are two aspects underpinning the QALY model that are not in line with either the ethical foundations of nursing or the principles proposed by the Swedish Government Bill for guiding priorities in health care. However, a new method called Equity Adjusted Life Years (EQALYs) can be a tool for evaluation in specific nursing care. Cost per EQALY is based on a compromise between initial severity of disease and treatment effect that is very close to the distribution rule applied in specific nursing care. In conclusion it is obvious that cost per EQALY, a balance between health maximization and severity of disease and treatment effects, can be a tool for the evaluation of eating training after stroke.

Source: CINAHL

Full Text:
Available in fulltext at EBSCO Host
Available in print at Lincoln County Hospital Professional Library

30. Integrating theory and practice: conceptual frameworks of the CEFP.

Author(s): Preskill H, Compton DW, Baizerman M, Smith IE

Citation: Cancer Practice, 02 March 2001, vol./is. 9/(0-), 10654704

Publication Date: 02 March 2001

Abstract: In this article, we describe how different conceptual frameworks contributed to the design, development, and implementation of the Collaborative Evaluation Fellows Project (CEFP). These frameworks are the following: utilization-focused evaluation (Patton, 1997); evaluative inquiry for learning in organizations (Preskill & Torres, 1999); and collaboration for a change (Himmelman, 1994). In addition, we explain how The Program Evaluation Standards (Joint Committee on Standards for Educational Evaluation, 1994) provided criteria for implementing and assessing the evaluation studies conducted through the CEFP. We conclude the article with examples of how the CEFP has changed the way American Cancer Society staff members and volunteers think about and conduct evaluations.

Source: CINAHL

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Critical Public Health, 2001, vol./is. 11/2(111-127), 0952-2271 (June 2001)

Abstract: Capacity building has been a topic in health promotion literature for several years. Similar constructs that preceded it include community development and community empowerment. More recent constructs, notably social capital and social cohesion, make roughly similar claims on the same social space. This space essentially describes elements of peoples' day-to-day relationships, conditioned and constrained by economic and political practices, that are important determinants of the quality of their lives, and of communities' healthy functioning. In this paper, we discuss capacity building as health promotion means (its instrumental value to other goals) and end (constitutive of the type of human development health promotion espouses). We describe three different uses of the term capacity building and distinguish community capacity indicators from two other types pertinent to health promotion program evaluation: population health indicators, and program-specific indicators. We review seven theoretical and empirical models of community capacity, which provide a total of nine separate capacity domains. A second article in this series takes up issues of community capacity use and measurement in health promotion planning and evaluation.

Source: HMIC

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Available in print at Louth County Hospital Medical Library
Available in print at Pilgrim Hospital Staff Library

32. Evaluation in health promotion: principles and perspectives

Author(s): Rootman, Irving, Goodstadt, Michael, Hyndman, Brian, McQueen, David V, Potvin, Louise, Springett, Jane, Ziglio, Erio

Citation: Copenhagen - Scherfigsvej 8, DK-2100: World Health Organization Regional Office for Europe, 2001 (xxvi, 533p)

Publication Date: 2001

Abstract: Policy-makers, professionals of all kinds and the general public increasingly recognize social and economic factors as important determinants of health. Because health promotion approaches address these factors, they can play an increasingly valuable role in protecting and improving health. At the same time, funding sources increasingly demand evidence that initiatives give value for money. Health promotion initiatives need effective evaluation to realize their potential: both to prove their value as investments and to increase their effectiveness in achieving their aims. To help meet this need, the WHO European Working Group on Health Promotion Evaluation examined the current range of qualitative and quantitative evaluation methods to provide guidance to policy-makers and practitioners. This book is the result. It comprises an extensive compilation and discussion of the theory, methodologies and practice of evaluating health promotion initiatives in Europe and the Americas. The book takes three perspectives in examining the issues. It includes a retrospective examination of the evolution of health promotion evaluation. this provides the context for assessing and understanding the current state of evaluations of initiatives addressing settings, policies and systems for promoting health. Finally, the chapter authors and the Working Group as a whole make many recommendations for improvement that provide a look into the future. This book shows how a health promotion approach offers a comprehensive framework for planning and implementing interventions that can effectively address today's major health-related problems. the authors describe how good evaluations assist initiatives in achieving their goals, provide a wealth of guidance on how to undertake them and call for greater investment in the evaluation of health promotion. References cited throughout. [Book abstract]

Source: HMIC

33. The benefits to young people experiencing psychosis, and their families, of an early intervention programme, evaluating a service from the consumers’ and the
providers' perspectives

Author(s): Fisher, Angela, Savin Baden, Maggi

Citation: British Journal of Occupational Therapy, 2001, vol./is. 64/2(58-65), 0308-0226 (Feb 2001)

Publication Date: 2001

Abstract: The new agenda for mental health services, driven by the National Service Framework for Mental Health, places emphasis on social inclusion, the promotion of mental health, the provision of needs-led services and the development of partnerships with users, carers and the wider community. The evaluation focused on an occupational therapy initiative that embraced this agenda and which was targeted at young people, aged between 16 and 25 years, who were experiencing or who had recently experienced psychosis. The programme, known as 'TIME', integrated the provision of evidence-based psychosocial therapies, namely early intervention, family intervention, cognitive therapy and cognitive-behavioural therapy, and occupational therapy. It was evaluated by gaining the perspectives of all the key stakeholders, that is, both consumers and providers of the programme. Although TIME was valued by the service users, the findings indicated discrepancies between the embedded values and norms of the health care systems and those espoused by theorists and policy. Thus, if services that strive to embrace the values and standards laid down in the National Service Framework for Mental Health are to succeed, these important issues will need to be addressed and specific consideration given to the underpinning values essential to the delivery of user-led services. Cites numerous references. [Journal abstract]

Source: HMIC

Full Text:
Available in print at Lincoln County Hospital Professional Library

34. Assessing community change at multiple levels: the genesis of an evaluation framework for the California Healthy Cities Project.

Author(s): Kegler MC, Twiss JM, Look V

Citation: Health Education & Behavior, 01 December 2000, vol./is. 27/6(760-779), 10901981

Publication Date: 01 December 2000

Abstract: More than 40 cities have participated in the California Healthy Cities Project since its inception in 1988. Because Healthy Cities efforts are community driven, these cities address diverse health and social issues using a wide variety of strategies. This complexity, in addition to the usual difficulties associated with evaluating community interventions, creates many challenges for evaluation. Given the community building and process orientation of Healthy Cities, it may be most appropriate to measure intermediate community changes that have been linked to health outcomes in previous research or, at a minimum, theoretically. The California Healthy Cities evaluation framework conceptualizes change at five levels: individual, civic participation, organizational, interorganizational, and community. The framework, developed collaboratively with Healthy Cities participants, attempts to synthesize current thinking and practice on evaluation of community projects by applying concepts from community capacity/competence, social ecology, and urban planning.

Source: CINAHL

35. Theory and practice: applying the ecological model to formative research for a WIC training program in New York State.

Author(s): Newes-Adeyi G, Helitzer DL, Caulfield LE, Bronner Y

Citation: Health Education Research, 01 June 2000, vol./is. 15/3(283-291), 02681153

Publication Date: 01 June 2000

Abstract: This article discusses the application of the ecological model to formative research in a practical setting of a training program developed for the Child Growth
Monitoring Project of the New York State WIC program. The ecological model was selected to guide the formative research because it offered a concrete framework to account for the reciprocal interaction of behavior and environment. This model describes five levels of influence on behavior: individual, interpersonal, organizational, community and policy. Because we knew from the start that the intervention would focus on training, we focused our efforts on collecting data at those ecological levels that we considered potentially amenable to change through a training program--individual (WIC providers and clients), interpersonal (provider-client interaction) and organizational (physical layout of WIC sites and sequence of activities). However, our experiences both with the training program and the post-training evaluation, using ecological theory, indicated the fallacy of failing to apply the ecological model consistently throughout the formative research. Therefore, for maximum effect when using the ecological model, it is recommended that the whole model be applied at all stages of formative research: development, implementation and evaluation. A matrix is presented for monitoring complete application of the model.

Source: CINAHL

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Available in fulltext at Highwire Press
Available in print at Lincoln County Hospital Professional Library
Available in print at Pilgrim Hospital Staff Library

36. Managing change in health care redesign: a model to assist staff in promoting healthy change.

Author(s): Johnston B
Citation: Nursing Economic$, 01 January 1998, vol./is. 16/1(12-17), 07461739
Publication Date: 01 January 1998
Abstract: Effective leaders recognize the critical nature of active, broad-based nurse participation in patient care redesign efforts. The sense-of-coherence theory is applied to change management with the intent to foster comprehensibility, manageability, and meaningfulness in dealing with change-related stress. Multiple strategies including communication, training/education, and outcome evaluation must be part of any organizational redesign project. Front-line staff should be encouraged to participate in focus groups to air concerns and to evaluate both the positive and negative impact of changes in patient care delivery.

Source: CINAHL

Full Text:
Available in fulltext at EBSCO Host

37. The analysis and application of peer assessment in nurse education, like beauty, is in the eye of the beholder

Author(s): Patterson, Elizabeth
Citation: Nurse Education Today, 1996, vol./is. 16/1(49-55), 0260-6917 (Feb 1996)
Publication Date: 1996
Abstract: Recent nursing literature has illustrated an increasing interest in the use of peer assessment in nurse education programmes. An examination of this mode of assessment has revealed that the way in which peer assessment is both analysed and applied in the educational domain in general, and in the nursing education domain in particular, is dependent upon the philosophy or theoretical framework that explains and directs the context in which it takes place. This influence may originate from the guiding philosophy of a curriculum, the regulatory constraints of a professional body, the mission statement of an educational institution, or the prevailing values and beliefs of society at large. Underpinning each of these influences are the particular interests of the empirical, the interpretive and the critical paradigms. This paper will examine the concept of peer assessment from the perspectives of its purpose in the development of the professional nurse and the particular
Source: HMIC

38. **Advancing quality: total quality management in the National Health Service**

Author(s): Joss, Richard, Kogan, Maurice

Citation: Buckingham: Open University Press, 1995

Publication Date: 1995

Abstract: This book is intended for health service managers and others involved with improving quality in the NHS. The authors begin by reviewing theoretical and conceptual issues surrounding models of quality improvement, tracing the historical development and discussing the different meanings of quality. They explain what is meant by total quality management (TQM) and how it is being adapted into a model of quality assurance for the NHS. Methods for designing for quality in terms of models of organisational change, and ways of evaluating quality initiatives are examined. The authors then discuss in detail the findings of their three-year evaluation of TQM in the NHS, which also looked at TQM programmes in the commercial sector. Finally they consider the options for improving on quality assurance in the NHS and propose a new model (the Brunel quality model) based on the principles of TQM as part of an agenda for reform. Cites 93 references.

Source: HMIC

39. **A community education monitoring system: methods from the Stanford Five-City Project, the Minnesota Heart Health Program and the Pawtucket Heart Health Program.**


Citation: Health Education Research, 01 March 1993, vol./is. 8/1(81-95), 02681153

Publication Date: 01 March 1993

Abstract: Understanding the process of behavior change interventions is critical to achieving campaign effectiveness and successful program replication. The present article presents a community education monitoring system (CEMS) using data from the Stanford Five-City Project (FCP), the Minnesota Heart Health Program (MHHP) and the Pawtucket Heart Health Program (PHHP). CEMS records the number and type of intervention activities, outcome objectives, targets of change (individual, organizational or environmental), channel(s) of dissemination and proportion of programs funded by the community. These data illustrate (1) the application of theory for each project, (2) data-based program administration, (3) feedback for revising programs and (4) type of reach or "dose" information obtained from intervention monitoring. Process evaluations such as CEMS provide critical links between field realities and evaluation outcomes. This type of evaluation develops standards for measuring program reach and allows comparisons with other programs. CEMS also illustrates how programs enact theory. Validation studies are critical to the continued successful use of CEMS. The first step, however, is to develop a uniform way of describing complex multichannel behavior change programs. CEMS in a refined form should prove invaluable to health promotion program planners whether in research or service settings.

Source: CINAHL

40. **Evaluation of nursing education programmes -- theory and practice.**

Author(s): Whiteley S

Citation: International Journal of Nursing Studies, 01 August 1992, vol./is. 29/3(315-323), 00207489

Publication Date: 01 August 1992

Abstract: In this paper, the history of educational evaluation is considered through a review of the literature, in order to try and understand how current evaluation methods have developed. It is important that a historical perspective is gained, as there has been a big shift in thinking from a strongly behaviourist code of practice to a more investigative and
less prescriptive approach, during the relatively short time span that evaluation has had to develop as a subject in its own right. The application of the theory to practice is also considered in terms of a working evaluation model developed through work on continuing education courses in Scotland.

Source: CINAHL

41. Program evaluation within a health promotion framework.

Author(s): Thompson JC

Citation: Canadian Journal of Public Health, 02 March 1992, vol./is. 83/(0-), 00084263

Publication Date: 02 March 1992

Abstract: Program evaluation can assist in assessing the conceptualization, design, implementation and utility of health promotion action. Evaluation of health promotion, with multiple strategies combining individual, social and policy action, lends itself to an evaluation-as-politics paradigm. Consideration of the interests of all major stakeholders, use of a series of related studies, and a commitment to multiple methods and multiple perspectives characterize this paradigm. Simple, practical research that is adequate for answering relevant questions is required. The program evaluator is not a neutral, scientific observer—he/she is a participant in the political arena along with other stakeholder groups. A model of the areas of interest in evaluation of health promotion, some potential evaluation questions, and a health promotion impact evaluation model are presented to emphasize unique aspects involved in evaluation of health promotion action. The evaluator can take a proactive role and challenge problems in conception and implementation of health promotion action. He/she can advocate for health promotion.

Source: CINAHL

42. Evaluation in nursing staff development.

Author(s): Abruzzese RS

Citation: Nursing staff development: strategies for success., 1992, vol./is. /235-248),

Publication Date: 1992

Source: CINAHL

43. Evaluation of an integrated curriculum: the Waltz Model.

Author(s): Milazzo-Chornick N

Citation: Nurse Educator, 01 September 1991, vol./is. 16/5(35-35), 03633624

Publication Date: 01 September 1991

Source: CINAHL

44. “Towards quality in nurse education”: a study of the development, design and implementation of a tool for evaluating and approving clinical areas for student nurse training

Author(s): BECKETT, Cliff

Citation: , 1991

Publication Date: 1991

Abstract: Measurement of the effectiveness of educational processes is complex, and no less so with the increasing demands for a quality product. This project considers how to respond to the new requirements placed upon Directors of Nurse Education in approving clinical areas as suitable environments for nurse education. It proposes the use of an Educational Audit, as being the process most appropriate for assessing the reliability of the educational provision. The project considers the development, design and implementation of the audit tool, using action based research. The educational audit documentation provides for a naturalistic approach, incorporating a multi-methodology, based on grounded theory and triangulation. The standards of any profession are dependent upon the quality of the education provided for its students in both theory and practice, and the evaluation of
that provision. The findings of this project show that the educational audit tool gives the framework for a structured tripartite approach, providing an acceptable vehicle for involving all educationalists, and nurse managers. It provides a constructive appraisal and an ongoing record of the quality of education within the clinical learning environment. [Researcher abstract].

Source: HMIC

45. The problem-solving curriculum evaluation and development model.

Author(s): Hogg SA

Citation: Nurse Education Today, 01 April 1990, vol./is. 10/2(104-110), 02606917

Publication Date: 01 April 1990

Abstract: Evaluation has been a feature of nurse education programmes for many years, yet many nurse educators are still struggling with inappropriate, time-consuming procedures, that yield little reward. This paper describes an evaluation and development model that is in the process of implementation at The Royal Free Hospital and Friern School of Nursing. The model has generated much interest from other schools of nursing, and has so far proved easy to use, flexible in application to any course, and has turned evaluation into a purposeful, fruitful, enjoyable and rewarding process.

Source: CINAHL

46. Extended input-output models: progress and potential

Author(s): Batey P.W., Rose A.Z.

Citation: International regional science review, 1990, vol./is. 13/1-2(27-49), 0160-0176 (1990)

Publication Date: 1990

Abstract: "This article presents a critical survey of research on extended input-output models, emphasizing recent developments in demographic-economic and socio-economic analysis. Basic principles of model design and construction are reviewed, by reference to a representative selection of extended models. Two research themes--labor market analysis and income distribution--are pursued in greater detail as examples of the directions of current work. A comparison is made between extended models and social accounting matrices." excerpt

Source: EMBASE

47. An evaluation study of a clinical nursing course in a baccalaureate nursing curriculum.

Author(s): Davenport KG

Citation: , 01 January 1989, vol./is. /(0-202),

Publication Date: 01 January 1989

Abstract: The emphasis on the responsibility of educators to provide students with the information that is appropriate and relevant to their learning programs is clearly evident. This responsibility is encouraging more nurse educators to carefully evaluate their curriculum to determine its effectiveness in preparing beginning practitioners of nursing. The purpose of this study was to evaluate a clinical nursing course which is part of a four year curriculum in nursing. The evaluation focused on how well the stated objectives were met and the appropriateness of the objectives and course within the context of the curriculum. The framework developed by Wolf (1984) was used in this evaluation study. All students and faculty involved in this course were participants in the study which used a single group multi-method design. Students completed a pretest/posttest based on the course objectives and faculty rated the students performance in the clinical area using rating scales developed for that purpose. A supplementary questionnaire was completed at the end of the course by students and faculty. The results of this evaluation study indicated that eleven of the twenty-eight objectives were not met. The objectives that focused on physical assessment, identification of symptoms, verbal reporting, use of clinical research findings, scientific rationales and human development were the most problematic for this
student group. The appropriateness of this course in relation to curriculum was determined by examining the curriculum and other related documents. The course is placed well in the curriculum and is consistent with the philosophy and framework. The literature seems to point out that nursing educators have difficulty finding evaluation frameworks that meet their needs. This study demonstrated that Wolf's (1984) framework provides the flexibility and direction that nursing educators would find useful in conducting formal evaluations of their programs.

Source: CINAHL

48. The construction of an evaluation model for use in conjunction with continuing education courses in the nursing profession.

Author(s): Whiteley SJ

Citation: , 01 January 1989, vol./is. /(0-381),

Publication Date: 01 January 1989

Abstract: Available from UMI in association with The British Library. Continuing education in Scotland underwent radical changes in the early 1980's, when the National Board for Nursing, Midwifery and Health Visiting for Scotland responded to the proposals of a working party report (Working Party 1981). They began redesigning their continuing education provision for qualified nurses, and in conjunction with this development, they commissioned two consecutive evaluations. One was to look at a course entitled 'The Experienced Charge Nurse Module', and the other was of a more complex modular development, entitled 'Professional Studies I and II'. This thesis uses the work that was carried out by the author in executing the two evaluations, to propose a new model of evaluation for use in conjunction with continuing education courses. The need for the model became apparent in the early stages of the research, after the relevant nursing, evaluation, and continuing education literature sources were considered. No existing models appeared to completely meet the demands of the complexities of adult, continuing education courses, although it was considered that the 'Illuminative Evaluation' model of Parlett and Hamilton (1972) was a good basis to work from. Through the initial evaluation of the Experienced Charge Nurse Module, certain methodologies--predominantly qualitative--were tested, and used in conjunction with progressive focusing (Parlett and Hamilton, 1972) and grounded theory techniques (Glaser and Strauss, 1967). This based the research strongly in the phenomenological field, and these techniques were pursued and strengthened through the second, much larger evaluation of Professional Studies I and II. The main development at this stage, was that of a monitoring exercise. This complemented the evaluative component, and when the two elements were combined, they formed the ‘Structure-Process-Outcome’ model of evaluation (based on the categories used in the quality assurance field (Donabedian, 1966)). This is proposed as a flexible and comprehensive model which can be adapted for use at either the macro or micro level of evaluation.

Source: CINAHL

49. Social work training for child protection work: an evaluation of the ESCATA approach: a research report

Author(s): Stone, Maureen

Citation: Guildford (Guildford, GU2 5XH): University of Surrey, Department of Educational Studies, 1988(1v. (various pagings))

Publication Date: 1988

Abstract: This evaluation of training developed by East Sussex Consultancy and Training Agency (ESCATA) investigated the impact of the training on a group of 27 social workers. The evaluation was carried out by means of questionnaires and interviews. Supervisors were also surveyed. The results suggest that the training influenced the group in two main areas: (i) attitudes; and (ii) the development of a more structured and systematic approach to child abuse/neglect (CA/N) work. Attitudes appeared to be influenced away from structural explanations of CA/N towards increased monitoring of families known to be at risk, towards having more ex-victims of CA/N as social workers and towards a more regulatory model for the supervision of CA/N cases. Four to six weeks after the training 78% of respondents could name at least one related activity which they did differently because of participation in the training. Ratings for improved confidence, competence and
general satisfaction with the training did not appear to be related to previous social work or CA/N training experience. Supervisors tended to rate their workers’ knowledge and skills significantly higher than the workers’ own self-ratings, to see the training as ‘too basic’ and assess its impact as marginal. The research points to: (i) the need for relevant training for managers; (ii) CA/N training for social workers to include stress management; and (iii) such training to be developed within a wider theoretical and conceptual framework. [Publication abstract abridged].

Source: HMIC

50. Steps in evaluating a programme of nurse education.

Author(s): Parfitt BA

Citation: Nurse Education Today, 01 August 1986, vol./is. 6/4(166-171), 02606917

Publication Date: 01 August 1986

Abstract: Evaluation of nurse training programmes is seen by most nurse educators as a very important activity. The planning and implementation of an evaluation procedure can however, be a complex activity; it is complex because it requires not only a systematic approach to curriculum evaluation but also a satisfactory degree of compliance by those who in any way contribute or participate in the programme. Shortly after the Liverpool School of Nursing started its modular scheme of training, it set up an evaluation committee to work out a system of data collection so that the new programme could be evaluated. The procedure for evaluation was based on Stufflebeam's (1969) model of evaluation and both formative and summative methods of data collection were used. Although the effectiveness of the procedure will have to be reviewed at a later date, at present a framework for collecting relevant data has been established.

Source: CINAHL

51. The merging of participatory and analytical approaches to evaluation: implications for nurses in primary health care programs

Author(s): Rovers R.

Citation: International journal of nursing studies, 1986, vol./is. 23/3(211-219), 0020-7489 (1986)

Publication Date: 1986

Abstract: This paper addresses the need to make evaluation part of the nurse's expanded role within the Primary Health Care system. In a social policy and decision-making context, the nurse is an intermediary between political authorities and community groups. This requires diverse, but complementary, evaluation skills. The author proposes a dual method of evaluation for community health programs. The approach incorporates an objective-stance Logical Framework Analysis Model, to meet agencies' needs for program effectiveness and impact data, and a Participatory Evaluation approach, to recognize the ability of communities to judge whether health services are responsive to their needs. The nature and application of both methods within an International Primary Health Care context are explored. The paper concludes that access to a wide spectrum of evaluation data places the nursing profession in a challenging position to influence policy decisions related to health services.

Source: EMBASE

52. Population policy in industrialized countries: evaluating policy theories to assess the demographic impact of population policy

Author(s): Leeuw F.L.

Citation: Genus, July 1985, vol./is. 41/3-4(1-19), 0016-6987 (1985 Jul-Dec)

Publication Date: July 1985

Abstract: "In this contribution the concept of population policy theory is defined. Also, the relevance of studying these theories in order to assess the demographic impact of population policy is discussed. The policy theory underlying the pronatalist marriage and family founding loans is evaluated as is the policy theory underlying antinatalist family
planning communication programs. It is concluded that the behavioral mechanisms behind
the two policy measures appear not to work in a way the policy theory assumes they work,
i.e. appear not to be able to change fertility behavior substantially.” The geographic focus is
worldwide. (summary in FRE, ITA) excerpt

**Source:** EMBASE

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**53. The evaluation of middle management training in the National Health Service.**

**Author(s):** WHITE, D

**Citation:** Bath University thesis (PhD), 1980

**Publication Date:** 1980

**Abstract:** The purpose of the research described in this thesis is to develop useful and
acceptable methods for assessing the effects and value of off-the-job middle management
training in the National Health Service. The preamble describes the background of this
need in the NHS, where a rapid growth of management training courses has not been
accompanied by any systematic means of securing evidence on the consequences of the
training in individual and organisational work performance. Seeing this situation as one
which embraces both the classroom and the workplace, the early chapters offer a
conceptual framework for the study of management development, built up from theoretical
perspectives on the nature of organisations and their management on the one hand, and
the nature of human and managerial learning on the other. These concepts are related
specifically to the management of health care organisations The consequent view of
management development emphasises consideration of contingency and choice, and is
placed in its historical context in the NHS. The characteristics of evaluation are then
examined in terms of a comparison of effects with objectives, and a valuing of the
comparison, taking place within a particular local system which needs to be understood.
The attempt to do so in fieldwork within the Wessex and Oxford NHS regions between
1974 and 1978 is then described, together with the methodology developed to secure and
feed back information about the working of the system to the interested parties. Lastly, the
findings of the research are described and discussed in relation to the hypotheses
tested and to a multivariate analysis of the influence of course learning, individual and
organisational factors on subsequent work performance. The sequel outlines the present
state and future prospects for this research in further developing and testing evaluation
strategies an methods for management training in the NHS. (Author abstract)

**Source:** HMIC

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**54. A model for the evaluation of allied health education**

**Author(s):** Gladhart S.C., Christensen M.G.

**Citation:** Journal of allied health, June 1978, vol./is. 7/3(199-205), 0090-7421 (1978
Summer)

**Publication Date:** June 1978

**Abstract:** The variety and complexity of evaluation designs, procedures and philosophies
has proved confusing for educators and health practitioners. Many evaluation models do
not provide for the scope of information needed by allied health programs and are inflexible
in regard to the information needs of individual programs. The model presented here is
based on the principles of “Systems Theory,” which provides a comprehensive framework
for the study of educational programs. Input, process, product and environment
components are proposed as a method to study all aspects of program operations. With
clearly definable rules for the evaluator and program decision-makers, the faculty can adopt
and change the course of the evaluation as they work through the planning, implementation
and recycling stages of the model. Use of the model should help programs identify
information needs and bring existing evaluation efforts together under a comprehensive
umbrella.

**Source:** EMBASE
Analysing and understanding the constituent communities in this ...

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The use of a theoretical design is necessary because of the complex ..... Evaluation Framework Report. 13. 3.2.3. The Evaluation Model .... populations within the overall community, and the number and type of organisations involved in ..... area-wide impacts of, say, a cycle training programme. ...

www.dft.gov.uk/pgr/evaluation/.../frameworkreport.pdf - Similar

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by L Banwell - Cited by 23 - Related articles
programme. Other studies place more emphasis on the perceptions, and attitudes, the ......
optimising the value that institutions, the education community and .... Spink, A. (1999), “Towards a theoretical framework for information ...
cadair.aber.ac.uk/.../Urquhart,%20Lonsdale,%20Armstrong%20et%20al.pdf

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embedded within a research programme that places the initiative within the context of .... community expertise, or there may be a hierarchy of theoretical ideology. .... www.msd.govt.nz/documents/about.../social.../22-pages119-127.pdf

Towards an Evaluation Framework for Community Learning Networks
File Format: PDF/Adobe Acrobat - Quick View
This research programme will formulate and test some of the hypotheses that .... community-relevant evaluation framework and methodology that can then be ... www3.fis.utoronto.ca/iprp/c3n/eval_framework.pdf

iCamp Evaluation Framework
File Format: PDF/Adobe Acrobat - Quick View
instruments have been developed, reflecting a diversity of theoretical approaches. (e.g. social constructivism, social network theory, community of inquiry) ...
www.icamp.eu/wp-content/.../d41___icamp___evaluation-framework.pdf

Documentation Evaluation Model for Social Science Data
File Format: PDF/Adobe Acrobat - Quick View
Only very few information scientists have conducted theoretical ... Evaluation Model(DEM) for social science data, identify factors that affect the .... UK Digital Curation Centre’s Visitor Programme. Edinburgh: 24 September, 2004 ....
deepblue.lib.umich.edu/bitstream/2027.42/63090/1/1450450223_ftp.pdf

Google Scholar
Programme evaluation: Approaches for supporting innovation and engaging communities
C Potter, R Basson, H Laauwen - Community psychology; ...., 2007 - books.google.com ... other students in your class and try to draw up a core list of the types of evaluation model or theoretical approach that ... V, GLOSSARY Applied sociology psychology: This refers to applications of social psychological methods, theories, principles or research findings to understand ...

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A Sampson - Evaluation, 2007 - evi.sagepub.com ... Four issues considered integral to a robust evaluation framework are discussed in this article: the ... typically faced by evaluators are outlined to explain why a theoretical perspective to ... by Kubic and colleagues (1995). They recognize the complexities of social programmes that ...

How Would We Know What Works?: Context and Complexity in the Evaluation of Community Involvement
P Burton, R Goodlad, J Croft - Evaluation, 2006 - evi.sagepub.com ... underlying theoretical claims of both community involvement and of area-based initiatives. An evaluation framework is then the impact of community involvement we need, therefore, to make greater use of theoretical and conceptual ... Legitimacy Managerial efficiency Social Individual ...

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heart disease prevention programs is affected by unique theoretical, conceptual, methodological ... prevention programs have been described within a general evaluation framework encompassing the ... These and other questions about the social relevance of community health ...

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L Zhang, M Enoch - 2005 - optimum2.org

... Overall, the report suggests a monitoring and evaluation framework for the OPTIMUM2 Southwark Pilot. ... Select a suitable theoretical framework that ... Figure 2 shows different stages of monitoring and evaluations in the life cycle of a social-economic programme from design ...

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DG Altman - Social Science & Medicine, 1986 - Elsevier

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B Mallinson, N Nyawo - iadis.net

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A Silva - wpeg.wits.ac.za

... investigated whether the programme had provided a vehicle for community empowerment at the individual, organisational and community levels as per Zimmerman's (2000) model of empowerment. Given this theoretical framework, a theory based evaluation model was used ...

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... by regarding social development theory as at an early stage of development which increasing theoretical sophistication will ... Evaluation reveals social structures within the relevant populations, when, for example, information does not pass from ... As an evaluation model, is not ...

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P Nilsen - Safety Science, 2007 - Elsevier

... The how and why of community-based injury prevention: A conceptual and evaluation model. ... a Department of Health and Society, Division of Social Medicine and Public Health Science, Linköping ... purpose of this model is to offer a way of thinking about community-based injury ...