

Framework development process

The framework has been developed using the following process.

1. Review and analyse the evidence base and prior work conducted around monitoring and evaluation in HARP.

- Prior literature reviews
- Previous statewide and local evaluations
- Survey of current outcome measures being used within HARP services
- Prior departmental working group work on chronic disease management KPIs

2. Consider program context.

- Aims and objectives of HARP
- *Victorian Health Priorities Framework*
- National Health Reform

3. Convene a working group of sector representatives including HARP program managers and evaluation personnel from metropolitan and rural services.

- Review drafts and achieve consensus on appropriate elements within the framework
- Provide sector perspective on KPIs and targets
- Identify and address potential barriers or areas requiring clarification
- Assist development of supporting documents

4. Conduct broader consultation.

- Internal with other programs within the Continuing Care Unit and with the Data Management Unit
- External with HARP managers
- Particular consideration to compatibility with reporting requirements for activity-based funding

5. Trial and review the monitoring KPIs and targets and the evaluation resource over the 2011–12 reporting year.

Hospital Admission Risk Program Monitoring and Evaluation Framework

Purpose of framework

The monitoring and evaluation framework aims to support and measure how well services are meeting the aim and objectives of the Hospital Admission Risk Program (HARP).

To achieve this, the framework needs to be:

- **comprehensive** – provide a balanced view of the whole program (avoid focusing on selected elements and subsequent disincentives on other core elements)
- **concise** – provide clear expectations around monitoring key performance indicators (KPIs), targets and recommended outcome measures
- **flexible** – be applicable across varied HARP service models in different contexts
- **sustainable** – utilise existing data collection strategies and minimise administrative burden where possible.

The framework is developed around a program logic structure to ensure a comprehensive approach to monitoring and evaluation that includes all elements of the program.



Aim

The aim of HARP is to:

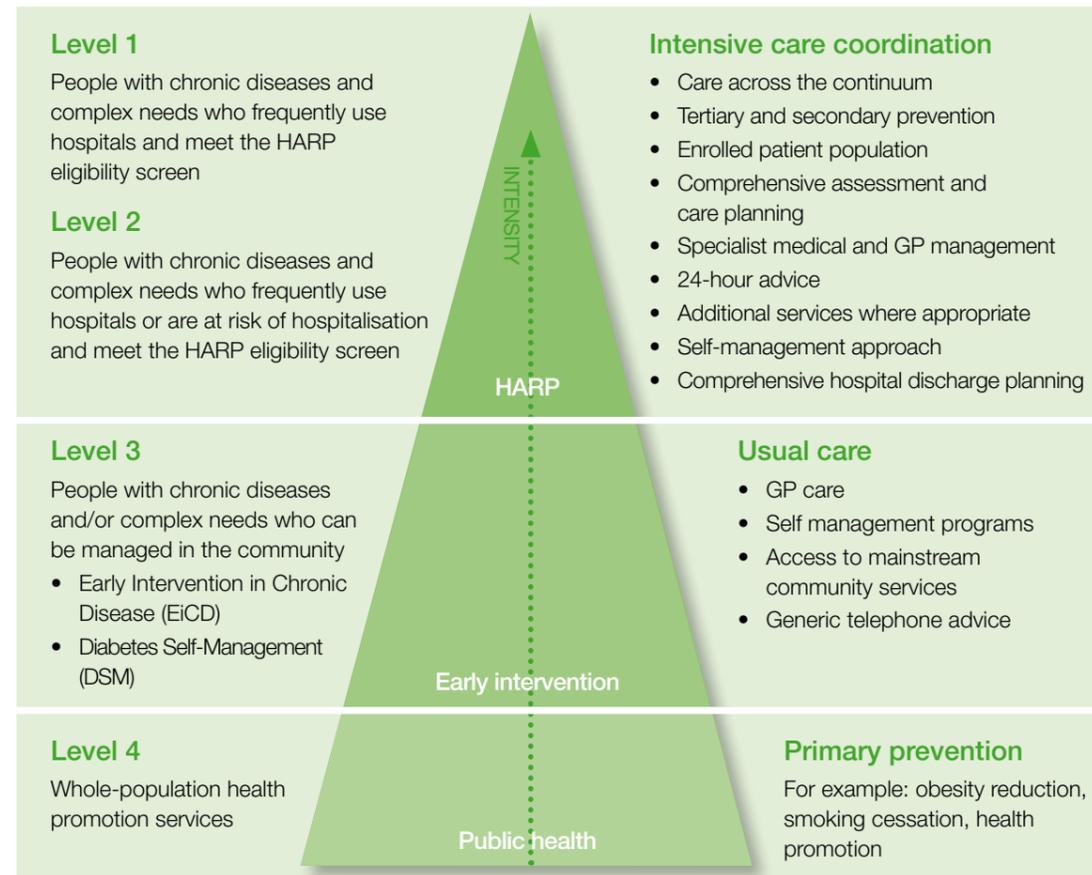
To decrease hospital demand through provision of comprehensive assessment, care coordination and timely responsive specialist care in the ambulatory/community setting for people with complex needs who present frequently or are at imminent risk of presenting to hospital.

Objectives

The objectives of HARP are to:

- improve patient outcomes
- provide integrated seamless care within and across hospital/community sectors
- reduce avoidable hospital admissions and emergency department (ED) presentations
- ensure equitable access to healthcare.

HARP target population



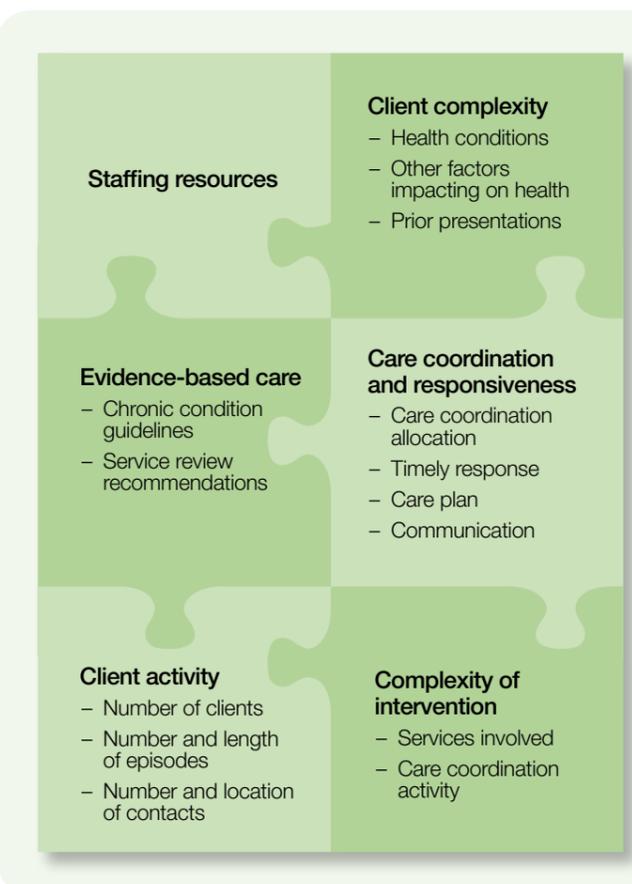
Based on Kaiser Permanente triangle

The components

The **monitoring** component addresses efficiency and accountability. Measures include inputs, processes and outputs. This is supported by the Key Performance Indicators guide

The **evaluation** component addresses effectiveness and utilises impact and outcome measures. This is supported by the evaluation resource

The monitoring component



Evaluation component

