

OHT Patient, Caregiver & Community Engagement Learning Series

Module 7: Evaluating Engagement

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Acknowledgements

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How to Use This Workbook

To Cite this Document

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Legal

The materials in this workbook are general guidelines only. This workbook is not intended to provide legal advice. If there is a discrepancy between this document and any applicable legislation, the legislation will always prevail.

Document Layout

This workbook consists of four sections. **Section 1** outlines what we mean by evaluation and why it matters. **Section 2** outlines ways you can evaluate your engagement activities *qualitatively* via key reflective questions and guiding frameworks. **Section 3** outlines ways you can evaluate your engagement activities *quantitatively* via existing surveys that are free to download and use (links are provided). **Section 4** briefly outlines the *Engage with Impact Tool-Kit* and its various components to support you in planning and conducting your evaluation activities.

Section 1: What do we mean by evaluation and why does it matter?

Put simply, evaluation is the assessment or examination of something. Evaluation helps us shine a spotlight on *what is working* and *what is not working* about the “thing” we are assessing. The “thing” could be an intervention, a program or a new work flow. We can also evaluate the *process* of creating “the thing” such as people’s experiences in working together and creating it.

In the space of community, patient and caregiver engagement, a primary focus of evaluation has been on the quality of engagement practices and less so on the assessment of outcomes and impacts of these activities and processes, though increasing attention is being paid to the latter (Abelson, Tripp et al. 2023).

It’s important to think about the **WHO**, **WHAT**, **HOW** and **WHY** of Evaluation

WHO is being evaluated? Patient and caregiver partners?

- Engagement leads? Researchers? Organizational leaders? All?

WHAT is being evaluated? What things are you measuring and at what level?

- Individual, project, organization, system?

HOW are you evaluating?

- What methods and tools are you using?

WHY are you doing an evaluation? (What value will an evaluation bring? Who will benefit?)

Evaluation is more than collecting information. It allows us an opportunity to reflect and learn about what is working well and what is *not* working well. Having time for reflection and discussion with your team is required to see if you are on the right track and whether or not you need to pivot or change course.

Section 2: Evaluation- Qualitative

Evaluation can occur through open-ended questions and discussions (e.g., qualitatively). For example, if you are working as part of a team with different partners such as patients, caregivers, members of the community, providers, etc., you may periodically check in as a form of ongoing evaluation.

Some key questions you can ask include:

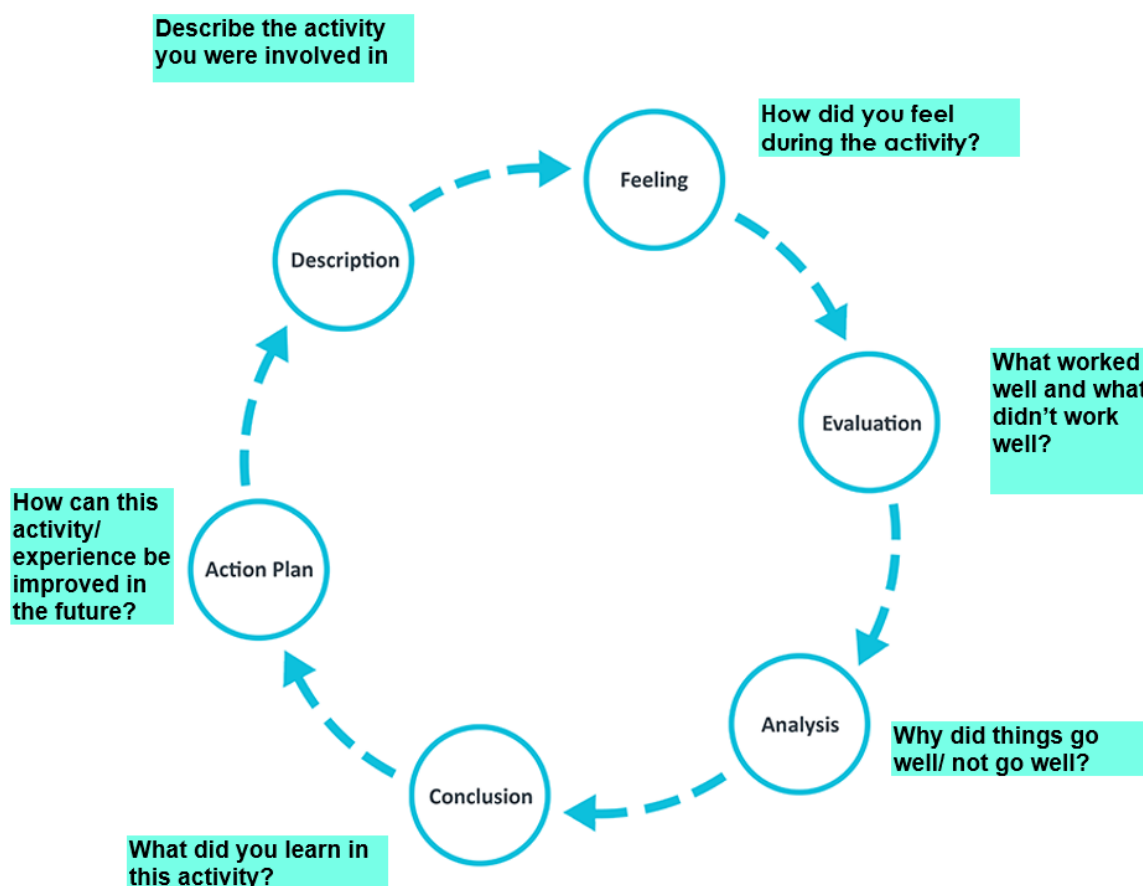
1. “What is working well?”, “What should we keep doing?”
2. “Do you feel your time was/is well spent?”, “Why or why not?”
3. “What is not going so well?”, “What should we change/stop doing?”

Providing different ways to share feedback is important. These different ways to collect feedback may include a group meeting, 1-1 meeting, through an anonymous survey, etc. The first time these questions are asked you may hear “Everything is fine.”.

Creating a culture of feedback takes time, so asking these questions at regular intervals and providing different ways to get this feedback will be essential in building a culture of learning within your team.

Gibb's Reflective Cycle

You may draw on Graham Gibb's reflection cycle (developed in 1988) to structure your questions. We provide example questions in text boxes beside each phase/circle of the cycle (see figure below). These questions can be used as a guide to tap into people's understanding of the activity you are working on, how they feel about it, including what's working well, what's not working well and what to adapt going forward (University of Edinburgh 2022).



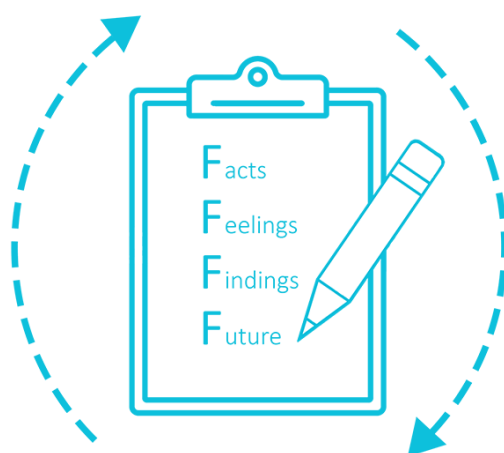
The 4 F's

Aligned with Gibb's Reflective Cycle, Dr. Roger Greenway developed the 4 F's of Active Reviewing (Facts, Feelings, Findings and Future) to reflect on an activity. The following table outlines each "F" followed by a definition and some example questions (University of Edinburgh 2022).

Concept	Definition	Example Questions
Facts	What happened?	<ul style="list-style-type: none"> What was most memorable/different/interesting? What were the turning points or critical moments?

Concept	Definition	Example Questions
Feelings	Emotional reactions	<ul style="list-style-type: none"> • At what point did you feel most or least involved? • What were your personal highs and lows?
Findings	Concrete learning	<ul style="list-style-type: none"> • Why did (or didn't) it work? • What was most/least valuable?
Future	Structuring learning to use for the future	<ul style="list-style-type: none"> • How does it look to use the findings? • What has already changed?

For more information on Gibb's Reflective Cycle and Greenway's 4 F's Framework see the University of Edinburgh Reflective Tool-Kit <https://www.ed.ac.uk/reflection/reflectors-toolkit/reflecting-on-experience/four-f>



Public and Patient Engagement Evaluation Tool (PPEET)

Public and patient engagement activities can also be evaluated using easy-to-administer surveys. A number of surveys have been developed to assess various elements of engagement activities. A Canadian collaboration of researchers and public and patient engagement (PPE) practitioners led by Dr. Julia Abelson developed the **Public and Patient Engagement Evaluation Tool (PPEET)** - which consists of 3 questionnaires. The questionnaires assess experience with engagement at the organization level, the project level and the participant level. These questionnaires are available in English and French.

1. Organization level- assesses the organization's capacity for, and culture of public and patient engagement.
2. Project level- assesses the planning, execution and impact of the engagement activity after completion.
3. Participant level- captures the participants' assessments of the engagement activity that they have participated in.

These three tools are free to download and use. Please visit <https://ppe.mcmaster.ca/resources/public-and-patient-engagement-evaluation-tool/> to fill out the tool request form (it takes just a couple of minutes to fill out, then you get immediate access to the tools).

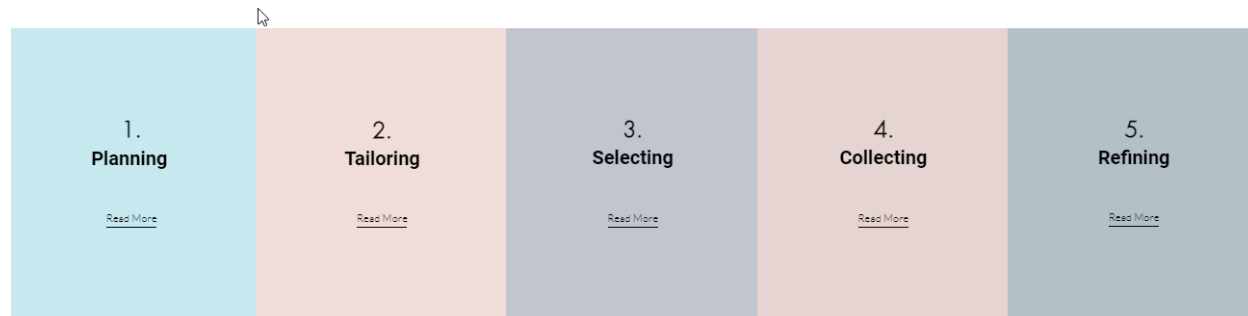
Section 3: A Tool-Kit for Planning and Conducting Engagement Evaluation

In 2020-2021, a Working Group comprised of patient and caregiver partners, researchers, government personnel and engagement specialists in Ontario designed the Engage with Impact Toolkit to support evaluation activities of the Ontario Health Teams.(Abelson, Tripp et al. 2023, Public and Patient Engagement Collaborative 2023).The Toolkit is hosted on a website which can be found at this link <https://www.evaluateengagement.ca/>

On the next page we provide a screenshot from the website.

Toolkit Modules

The Engage with Impact Toolkit has been developed as a series of 5 modules. Each module includes background information, tasks to complete, resources and other supports.



As seen here, the tool-kit has 5 modules (each comprised of a description, tasks, resources, and downloadable, PDF fillable templates). The 5 modules are:

1. Planning
2. Tailoring
3. Selecting
4. Collecting
5. Refining

The figure below provides a quick synopsis of each module, which can also be found in this recent publication <https://onlinelibrary.wiley.com/doi/full/10.1111/hex.13742> led by Dr. Julia Abelson.

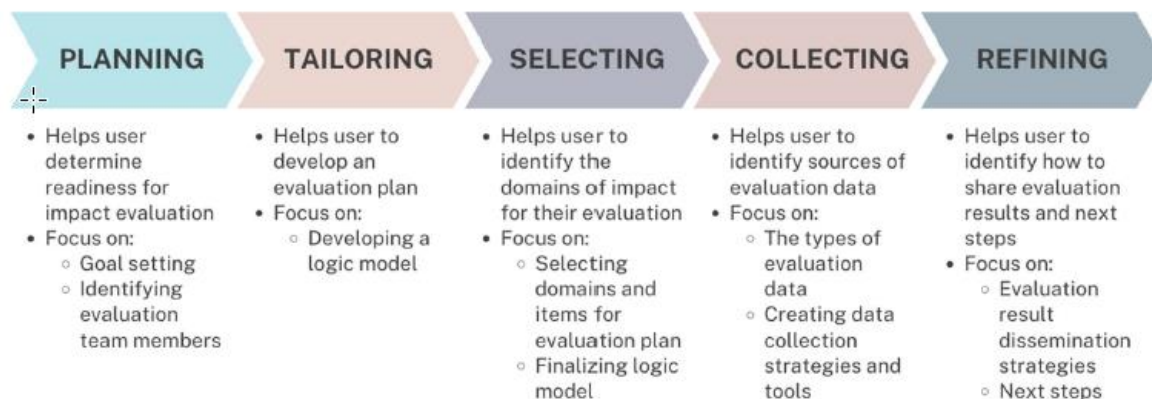


FIGURE 4 The Engage with Impact Toolkit modules.

Teams may be quick to skip over the **planning phase**, but this phase is important to ensure team member alignment on project and evaluation goals. In addition to the templates that can be filled out from the Engage with Impact Toolkit, the Algoma Ontario Health Team has created a community readiness assessment, which can be found here:

https://www.algomaoh.ca/files/ugd/8cfcf4_3828364383584162b056115a58088221.pdf

In the **tailoring phase**, an evaluation plan is developed which may include putting together a logic model. We provide a logic model example template (on page 9 of this workbook) created by the Health System Performance Network (HSPN). The Engage with Impact Toolkit also has a [logic model worksheet](#) available for download on their website. In the **selecting phase**, specific measurement domains and items are identified. The **collecting phase** entails creating data collection strategies and tools.

Finally, the **refining phase** focuses on evaluation results, strategies for sharing and reflection.

Link to the Toolkit: <https://www.evaluateengagement.ca/>

A Closer Look at the Tailoring Phase- Developing a Logic Model

Given the use of Logic Models as a tangible tool to plan and conduct engagement activities and evaluation plans, we reflect a bit more on them here. Dr. Reham Abdelhalim describes a logic model as follows:

- A graphical depiction of processes used to communicate and describe an intervention's underlying theory, assumptions or reasoning related to specific and expected activity results/outcomes.
- A statement, often in picture form, of the steps needed to solve a problem or complete a program.
- They demonstrate how and why an intervention will achieve the desired outcome.
- They are sometimes called program models, mental models, road maps, blueprints or causal chains.
- They are hypothesized descriptions of the chain of causes and effects leading to an outcome of interest.

(Abdelhalim 2023)

Logic Model Template

Sample Logic Model Development Template

Resources/Inputs	Activities/Strategies	Outputs	Outcomes (Short & Long-Term)	Impact
<p>What resources will enable the set of activities?</p>	<p>In order to address the issue, we will conduct the following activities. These activities are required to achieve our desired outcome.</p>	<p>Once completed or underway, the activities will produce the following evidence of service delivery. These outputs should help monitor progress towards outcomes. Specify the timeline of each Output.</p>	<p>We expect that if complete or ongoing, the activities will lead to the following changes. Specify timing of achievement and consider short- (6-18 months) and long-term outcomes (19-36 months)</p>	<p>What is the goal of the program? What issue are you trying to address? We expect that if complete or ongoing, these activities will lead to the following changes.</p>

A Closer Look at the Toolkit's Selecting Phase

In the table below, the core measurement domains and items for each domain from the Engage with Impact Toolkit are listed (Abelson, Tripp et al. 2023). This information is also available on the [toolkit website](#) along with sample questions (both quantitative and qualitative) that can be used to collect information for the items.

Domain	Core Item
Knowledge & Skills	Patient and caregiver partners develop new skills
Confidence & Trust	Patients, caregivers and staff see increased value in the results of the work
Equity & Inclusivity	Engagement leads to more equitable programs due to diverse perspectives in building it
Priorities and Decisions	The engagement activity shapes organizational priorities
Effectiveness & Efficiency	Programs are effective because designed by patient and caregiver priorities
Patient Centeredness	Health system more aware of patient and caregiver experiences and challenges
Culture Change	Organization adopts a culture of co-design and engagement
Patient Outcomes and Experience	Partnering with patients and caregivers lead to improved patient outcomes

Section 4: Other Recommended Resources

There are other resources out there to support you in your Evaluation activities. We point to the Community Partnership Toolkit created by the **Algoma Ontario Health Team** <https://www.algomaohht.ca/cpt>. See the section on evaluation.

In summary, we hope you find this workbook helpful in getting you and your team started in planning and conducting your evaluation activities.

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