

Program Logic Framework 2006-2009

AIM: TO CONTINUALLY IMPROVE THE QUALITY OF MATERNITY CARE SERVICES IN VICTORIA			
OBJECTIVES	OUTPUTS	ACTIVITIES	EVALUATION/REPORTING INDICATORS
1. To provide a forum for multidisciplinary expertise and leadership in maternity care	1.1 2/12 steering group meetings	1.1.1 Develop and circulate draft agenda 1.1.2 Participation in meetings 1.1.3 Carry out actions as agreed in meetings 1.1.4 Drafts and circulate minutes 1.1.5 Respond to issues arising from workplan or in relation to guidelines or other external issues in media which require an expert response	<ul style="list-style-type: none"> No. Meetings held attendance rates membership Description of issues addressed and outcome
	1.2 Robson's analysis of caesarean section rate	1.2.1 Assist with literature review 1.2.2 Assist with data collection and analysis plan 1.2.3 Assist with data collection and analysis 1.2.4 Assist with write up and preparing presentations of analysis 1.2.5 Develop an implementation plan to address caesarean section rate, based on analysis	<ul style="list-style-type: none"> Data analysis report and findings No. of presentations and attendances Activities held to address c/s rate Monitoring of c/s rate in intervention sites
2. Increase use of evidence based guidelines in maternity care	2.1 Implementation strategy	2.1.1 Draft evidence based implementation strategy for target recommendations of smoking cessation and HIV counselling initially, utilising NICS tools 2.1.2 Conduct audit feedback and barrier analysis and develop implementation strategy for each site 2.1.3 Work with site teams to implement guideline recommendations at each site 2.1.4 Liaise with DHS maternity program advisors to develop smoking cessation audit tool 2.1.5 Consult with health services to determine which interventions are being used and how are these being audited	<ul style="list-style-type: none"> No. of sites targetted and participation Description of implementation activities undertaken Research proposal and report investigating smoking KPI, and recommendations no. of HIV counselling accredited midwives pre and post intervention Description of capacity building for guideline implementation and EBP and No. of maternity providers included Descriptive survey of use of guidelines in education and service providers
	2.2 Journal article describing audit	2.2.1 Draft and publish journal article outlining audit process and findings, to share learnings on audit process	<ul style="list-style-type: none"> journal publication
	2.3 3/12 Community of Practice meetings	2.3.1 Liaise with other maternity projects to promote synergy 2.3.2 Liaise after meetings with VMR and antenatal education project coordinators to coordinate projects 2.3.3 Draft and circulate agenda 2.3.4 Record and circulate minutes 2.3.5 Coordinate shared learning activities which focus on implementation issues	<ul style="list-style-type: none"> No. CoP meeting held Participation rates Membership Description of shared learning activities
	2.4 Dissemination of guidelines	2.4.1 Regular (3-6/12) mailout of update of 3 centres guidelines	<ul style="list-style-type: none"> Frequency and no. of sites guidelines disseminated to

		2.4.2 Workshops to promote guidelines in tertiary centres	<ul style="list-style-type: none"> No. of workshops held Participation rates
	2.5 3 Centres website	2.5.1 Review and update website 3/12	<ul style="list-style-type: none"> Website updated and available No. of website "hits" per month
3. To increase access to evidence based guidelines for practitioners by developing, adapting and endorsing clinical practice guidelines for use	3.1 3 Centres guidelines	3.1.1 Maintain 3 centres guidelines and respond to issues arising (eg.expiry dates, urine testing recommendations)	<ul style="list-style-type: none"> Description of issues arising with guidelines
	3.2 Caesarean section guidelines	3.2.1 Establish reference group	<ul style="list-style-type: none"> Description of process of guideline adaptation
		3.2.2 Search and appraise existing guidelines	
		3.2.3 Review existing guidelines and findings of Robson's analysis	
		3.2.4 Draft adapted guidelines or endorse as appropriate	<ul style="list-style-type: none"> Guideline publication
		3.2.5 Define recommendations 3.2.6 Develop an implementation plan to address c/s rate issues identified in Robson's analysis	<ul style="list-style-type: none"> Description of implementation, no. of sites, participation
	3.3 National antenatal care guidelines	3.3.1 Participate in development	<ul style="list-style-type: none"> Description of input into National guideline development
		3.3.2 Assist with design of implementation strategy in Victoria	<ul style="list-style-type: none"> Description of input into implementation strategy
4. To improve collaboration between tertiary maternity service providers	4.1 3 centres workplan	4.1.1 Develop consensus on workplan for 3 sites to collaborate on from 2006-9	<ul style="list-style-type: none"> Final workplan published on website
	4.2 Shared internal guidelines	4.2.1 Consider merit of sharing guidelines between 3 sites	<ul style="list-style-type: none"> No of guidelines shared Description Participation in process (capacity building)
	4.3 Compatible IT systems	4.3.1 Exchange information on IT plans to ensure systems are compatible and able to compare information	<ul style="list-style-type: none"> Report of IT plans for each site and comparison of compatibility
	4.4 Benchmarking	4.4.1 Consider merit of combined approach to benchmarking	<ul style="list-style-type: none"> No. of benchmarking initiatives
	4.5 Performance Indicator action plan	4.5.1 Review together the Victorian KPIs and consider implications for a 3 centres response (eg smoking cessation)	<ul style="list-style-type: none"> Description of activities undertaken in response to KPI report
5. To improve access to evidence based information for consumers	5.1 High quality evidence based consumer information regarding tests and investigations in pregnancy	5.1.1 Update consumer information	<ul style="list-style-type: none"> No. of updates undertaken
	5.2 High quality evidence based information on caesarean section	5.2.1 Develop a consumer reference group 5.2.2 Review information from guidelines and define scope of consumer information 5.2.3 Draft consumer information and consult	<ul style="list-style-type: none"> Description of development of consumer information process Publication of consumer information on caesarean section
	5.3 Distribution records of consumer information	5.3.1 Maintain reliable order and supply system for distribution of consumer information	<ul style="list-style-type: none"> No. of consumer information booklets sold and no. of sites

6. Share learnings and expertise in guideline development, implementation and development of consumer information throughout Victoria	6.1 Conference and workshop attendances and presentations	<p>5.3.2 Report annually on distribution</p> <p>6.1.1 Take opportunities to develop expertise in guideline development, implementation and development of consumer information</p> <p>6.1.2 Share learnings with other professionals in maternity care from expertise developed through presentation at workshops and conferences.</p>	<ul style="list-style-type: none"> No. and description of professional presentations
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