



APPLYING EVALUATIVE REASONING WITHIN THE POLITICAL ECONOMY OF RURAL PRIMARY HEALTHCARE

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Murray Primary Health Network

28 September 2023











Murray PHN acknowledges its catchment crosses over many unceded First Nations Countries, following the Dhelkunya Yaluk (Healing River).

We pay our respects and give thanks to the Ancestors, Elders and Young People for their nurturing, protection and caregiving of these sacred lands and waterways, acknowledging their continuing cultural, spiritual and educational practices.

We are grateful for the sharing of Country and the renewal that Country gives us. We acknowledge and express our sorrow that this sharing has come at a personal, spiritual and cultural cost to the wellbeing of First Nations Peoples.

We commit to addressing the injustices of colonisation across our catchment, and to listening to the wisdom of First Nations communities who hold the knowledge to enable healing.

We extend that respect to all Aboriginal and Torres Strait Islander Peoples.











This is our story about taking on a challenging task, in complex and political system.

About balancing commitment to community with obligation to funders.













The context

The challenge

The approach

What we made

Managing the change











THE CONTEXT





THE CHALLENGE

Sort out our indicators and do some evaluation

@ MAZK ANDEZSON, WWW.ANDEZTOONS.CON



"After analyzing all your data, I think we can safely say that none of it is useful."





What was actually needed

Develop a conceptual framework, implementation plan, multidisciplinary team, and business systems to design, deliver and demonstrate value for investment across the business portfolio

while...

Embed evaluative reasoning capability and capacity across organisational functions and core business activity areas











THE APPROACH

Systems thinking

Design thinking

Evaluation science

Organizational change theory

Implementation science

Behavioural sciences

Decision theory











EVALUATIVE REASONING

- Evaluative reasoning enables us to develop a shared definition of the value rural primary health care services must deliver to warrant the continued investments made in them
- It guides us in purposefully designing services and programs that are logically likely to be able to achieve this targeted value.
- It helps us to set the criteria and standards we will use to judge how well we are delivering this value and the impact it is making.
- It enables us to collect data that matters in supporting the adaptive decision making required to continuously improve and adapt our activities.

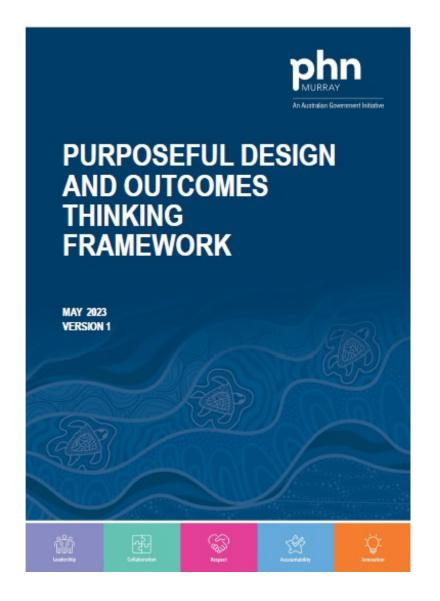












Process of designing, delivering, and demonstrating **value for investment** in all that we do.

- clearly understanding the need that must be met,
- defining the overall value for investment that must be delivered (including specific short-, medium-, and long-term outcomes),
- designing the intervention to ensure that this value can feasibly be delivered,
- delivering this value by ensuring intervention readiness, fidelity and quality,
- **demonstrating** the extent to which outcomes have been achieved and intervention value delivered.











ELEMENT 1: VALUE FOR INVESTMENT MODEL











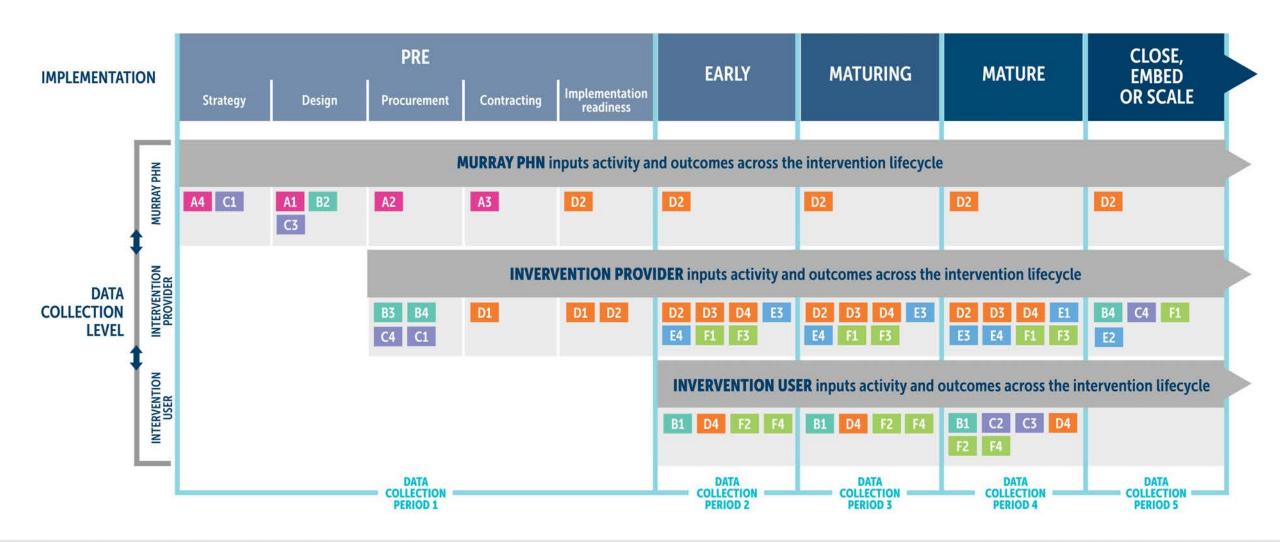


ELEMENT TWO: VFI ALIGNED HIGH LEVEL PERFORMANCE INDICATORS

WHAT WE ASSESS Dimensions of value for investment	WHAT DOES THIS LOOK LIKE? Performance criteria	WHAT INDICATORS WILL BE USED TO DETERMINE VALUE FOR INVESTMENT? Performance indicators			
A. Relevance and Feasibility	Service procurement, commissioning and design is evidence-based, aligned to instrumental and performance need, is anti-racist and feasible in terms of service provider viability, workforce availability, and adequacy and duration of funding	Service design quality and cultural responsiveness	and contracting quality and	Service provider viability and workforce availability	Commissioned service funding: true-cost ratio
B. Appropriateness	Service is anti-racist, safe and acceptable, culturally safe and acceptable, aligned with related interventions and partnerships, and perceived to be compatible within the service setting	B1 Service user perceptions of safety, acceptability and cultural safety	of related intervention	Perceptions of service compatibility and suitability in own setting	Partnership quality and efficiency
င်္ခြီ C. Equity	Service resources, access and benefits are targeted to those with the highest need, and we share our investment decisions with the community through self-determination in approaches to investment and procurement	C1 Equity focused service funding and implementation strategy	Distribution of outcomes	Service reach	Perceived benefit of service to under-serviced cohorts
D. Implementation quality	Through relational anti-racist commissioning service providers are implementation ready, implementation support offered by Murray PHN is accessible and useful, the service is implemented as planned, and service providers and users report a positive service experience	Service provider relationship and Implementation readiness		Implementation fidelity	Service provider and user satisfaction
E. Efficiency	Resources are optimally applied to deliver useful activities, outputs and related outcomes	Service cost-efficiency (cost of outputs)		Funding acquittal efficiency	Service provider data collection and reporting quality
F. Effectiveness	Services achieve their intended service and clinical outcomes relative to implementation maturity over time	F1 Targeted service outputs and outcomes achieved	outcomes achieved	Service provider reported experiences & outcomes	Service user reported experiences and outcomes

novation

ELEMENT 3: INTERVENTION DESIGN & LIFECYCLE EVALUATIVE MONITORING FRAMEWORK



KEY

A. Relevance & Feasibility

B. Appropriateness

C. Equity

D. Implementation quality

E. Efficiency

F. Effectiveness

ELEMENT 4: PURPOSEFUL DESIGN IMPLEMENTATION PROGRAM











PRE

Diagnostics, design, planning and resourcing

EARLY

Warming up and getting started

MATURING

Making clear progress

MATURE

Consistent and dependable application

EMBEDDED AND SCALED

The way we work





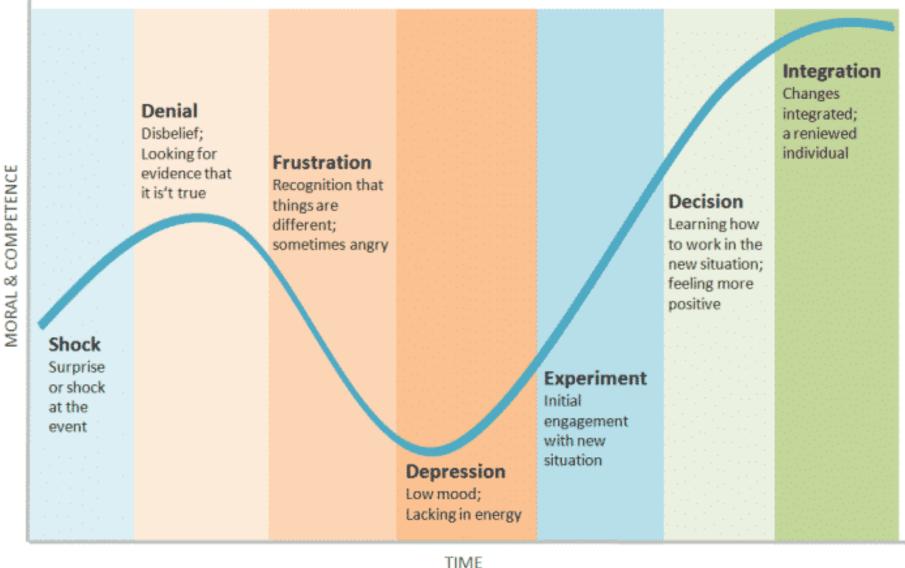






MANAGING THE CHANGE

Kübler-Ross model













NOT UNDERSTANDING THE COSTS OR THE TRADES FOR THIS SHINY NEW THING



"This is a major project of utmost importance, but it has no budget, no guidelines, no support staff, and it's due in 15 minutes. At last, here's your chance to really impress everyone!"











BRAND CAMP by Tom Fishburne Mission Statement QUALITY! WE'VE GUIDED BY A RELENTLESS FOCUS (HEARTFELT ADJECTIVE) ALREADY R (YET ANOTHER (LICHE) USED ON QUALITY. (CLICHE) (ANOTHER THAT WE WILL STRIVE CBIG ASPIRATIONAL WORD) (VAGUE GROWP) DELIVERING -SLIDE 1 OF 42

@ 2011

ASPIRATIONAL VERSUS DECISIVE AND FUNCTIONAL STRATEGY



MARKETOONIST. 10M

INCONSISTENT PACE, RATE, AND RESPONSE TO THE CHANGE JOURNEY





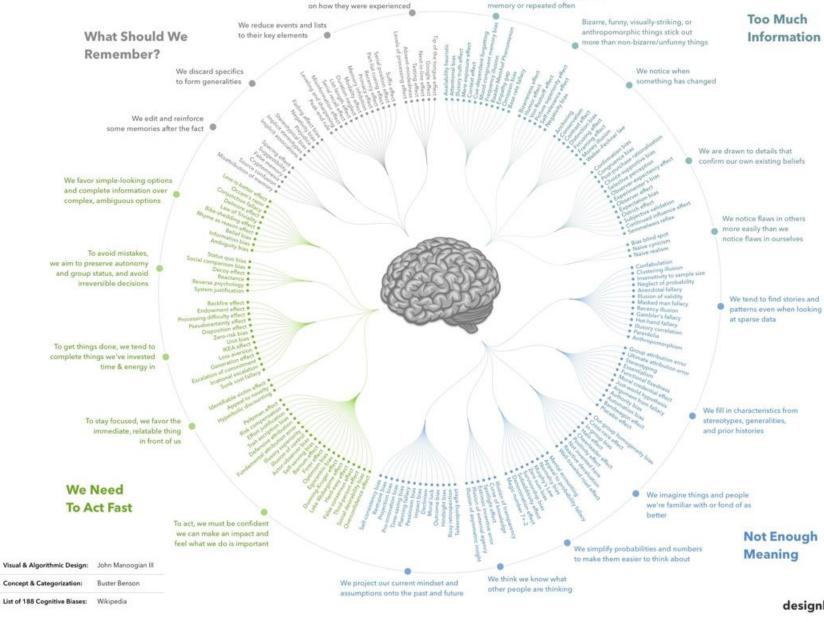








COGNITIVE BIAS CODEX



We store memories differently based

We notice things already primed in

BIAS AND FALLACY

ACTIVITY BIAS
CONFIRMATION BIAS
SUNK COST FALLACY
"QUICK WINS" AND
"LOW HANGING FRUIT"

PROGRESS FALLACY



MAGICAL THINKING













I trust my gut, Our project is too complex for logic and evidence.

RELUCTANCE AND MISTRUST OF MAKING LOGIC EXPLICIT



freshspectrum.com











CHERRY PICKING AND THE CHALLENGE OF FACING UNFAVOURABLE FINDINGS

Write "reports" using "data"

Figure 1. How awesome we are



SOURCE: Because we said so

freshspectrum.com

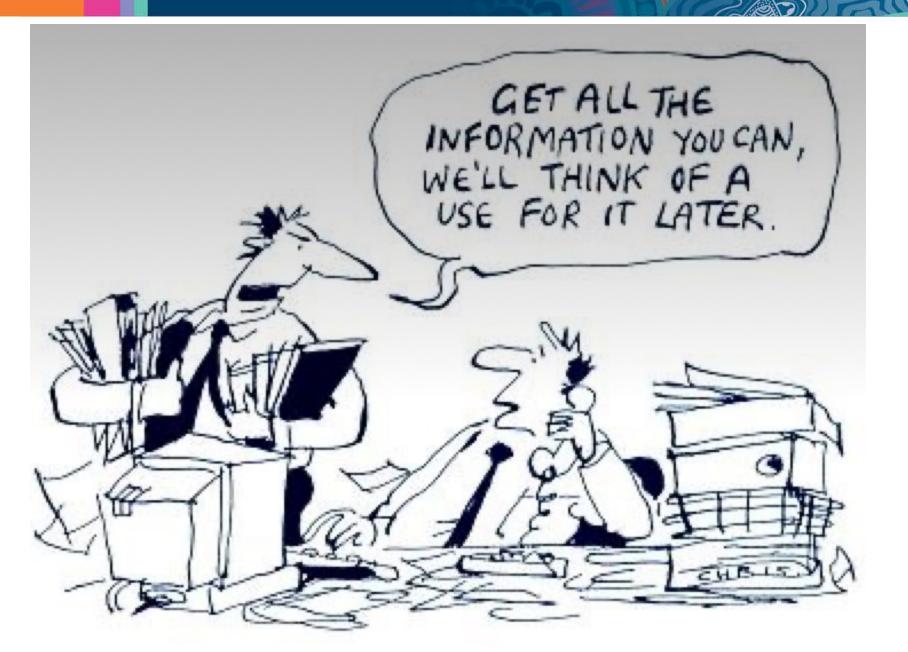












OLD HABITS

VS

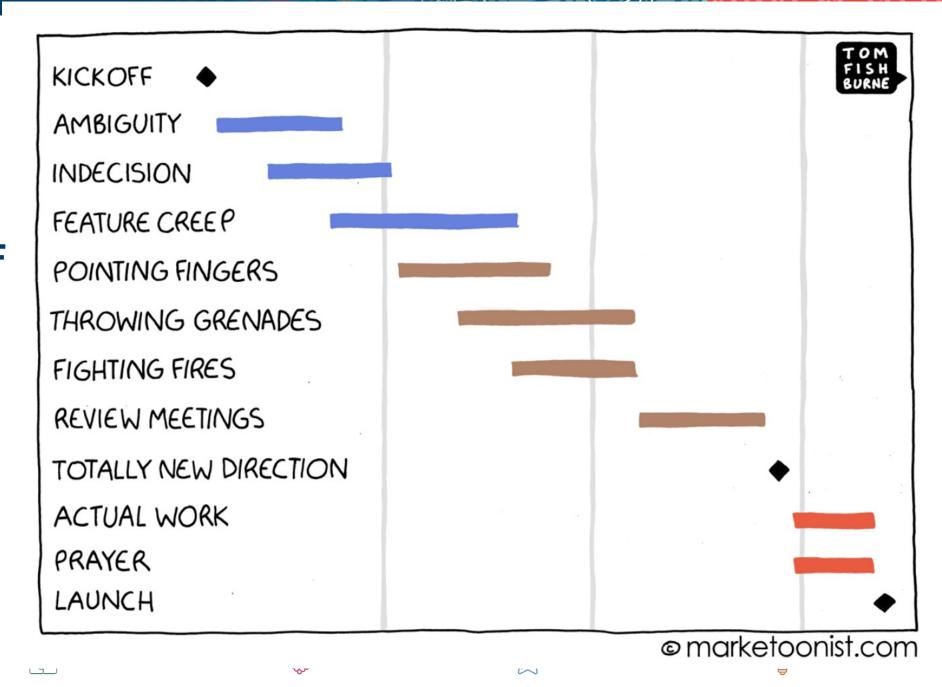
FEELING CONFIDENT ENOUGH TO ONLY FOCUS ON WHAT'S IMPORTANT



A DAY IN THE LIFE

. . .

THE CHALLENGE OF FINDING TIME TO FOCUS AND PROGRESS



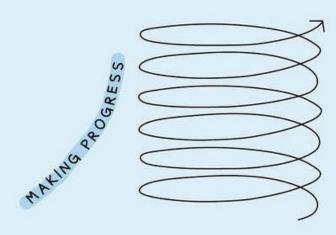


BUT TAKE HEART

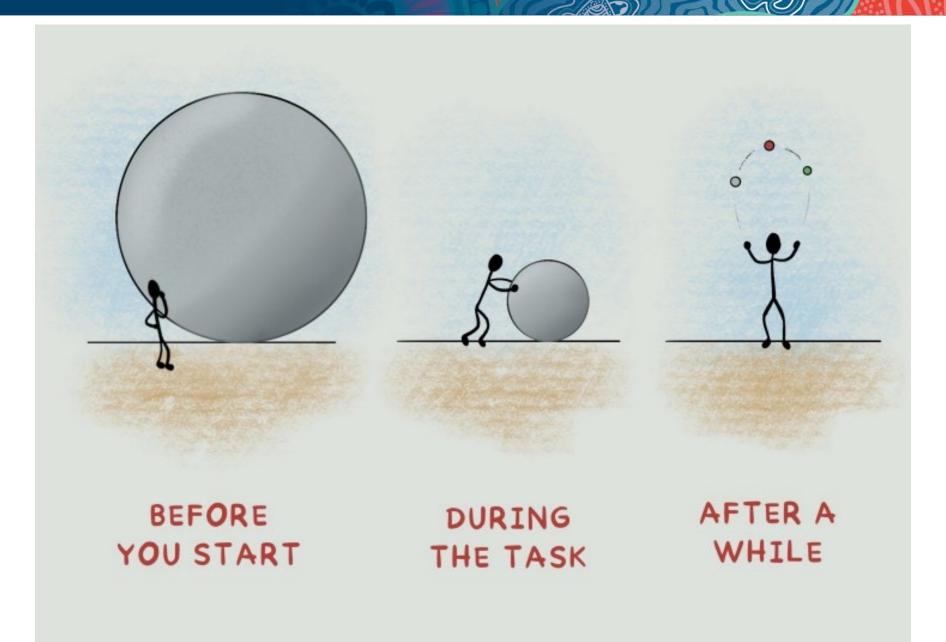
WHAT IT CAN FEEL LIKE



WHAT'S ACTUALLY HAPPENING

















BUT IF YOU'RE REALLY GOING TO DO THIS WELL, AND MAKE IT LAST

THERE ARE NO SHORTCUTS WITHOUT A TRADE







AS WE FAIL, SUCCEED, LEARN AND GROW...

We aim to contribute to the development of an emerging body of knowledge that other evaluative thinkers, designers, organisation leaders, and system change-makers, can apply to the real-world translational process of working with multi-disciplinary teams within organisations to embed evaluative reasoning into practice.









