

CONCEPTUAL LOGIC MODEL

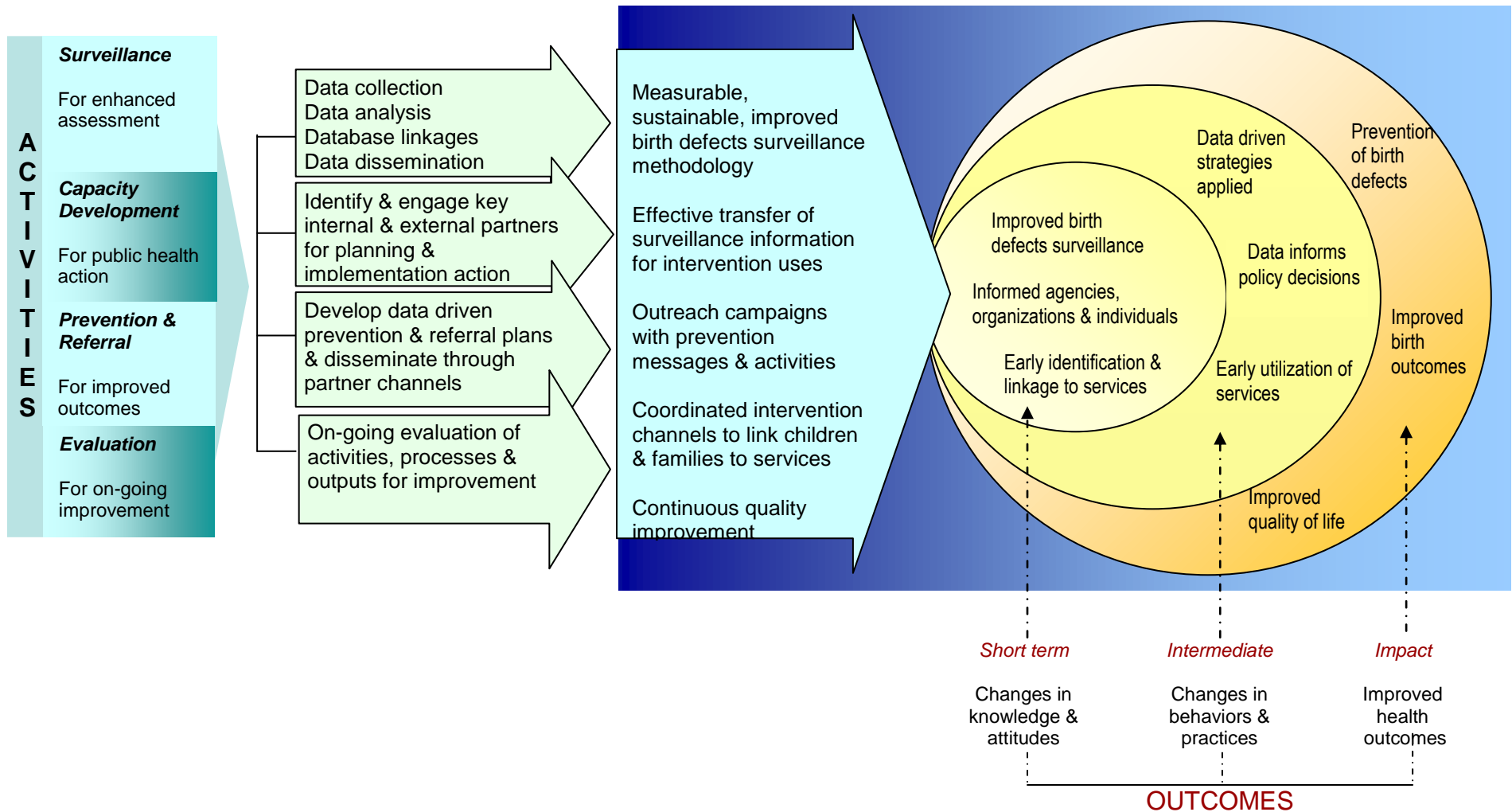
State Birth Defects Program Cooperative Agreements

IF

We do...

THEN

Changes in knowledge, attitudes, behaviors, practices & policies within systems & individuals can be produced



Activities

Surveillance
Establish/enhance state-based birth defects surveillance system



Capacity Development
Build birth defects capacity through infrastructure & partnership collaboration



Prevention
Outreach to target audiences with prevention activities



Referral
Enhance referral process for early linkage to services

Data collection
Data analysis
• Monitor & detect trends in birth defects
Database linkages
• Link to state databases
Data dissemination
• Timely dissemination of data for utilization
Evaluation for completeness & timeliness

Partner identification
• Identify & engage internal & external partners
Action plan development
• Develop data driven prevention & referral action plan to reach target audiences
Evaluation for partner engagement

Prevention messages & activities implemented
• Disseminate birth defects prevention messages to general and target audiences through partner channels
Evaluation for on-going improvement to address gaps, opportunities & reach

Link children/families to services
• Implement referral plan
• Develop baseline data
Evaluation for on-going planning & improvement

Outputs

Measurable, sustainable, improved birth defects surveillance methodology

Effective transfer of surveillance information for public health uses

Outreach campaigns with prevention messages & activities

Coordinated intervention channels for linking children & families to services

Continuous quality improvement

Outcomes

Improved birth defects surveillance

Improved dissemination of accurate & timely information to organizations, agencies & individuals

Increased early identification and linkage to services

Data-driven strategies applied

Early utilization of services

Data informs policy decisions

Prevention of birth defects

Improved birth outcomes

Improved quality of life

Indicators -

Develop & integrate evaluation measures into the key activities

- Quality and timely data are produced and disseminated
- Quality assurance for completeness of data tested through on-going improvement efforts using statistical methods
- Matrix identifying capacity building objectives, strategies & partner list is developed and approved
- Data driven prevention & referral plans are developed through partnership engagement
- On-going partner meetings take place to exchange progress information and make mid-course modifications
- Data driven list identifying at-risk populations is developed to guide prevention efforts
- Appropriate prevention partners are engaged & a plan to reach target audiences is developed
- Targeted audiences are reached using appropriate prevention/intervention strategies
- Referral protocols are tested for effectiveness & timeliness
- Baseline data are available to indicate changes in # of referrals & # of persons receiving early intervention & special education services
- Timely referral to services is evidenced
- Gaps in referrals are identified using appropriate methods (i.e. qualitative research – focus groups)