Renewal Webinar Series
Program Evaluation

with Judy Rollins, PhD, RN
Rollins & Associates
Georgetown University School of Medicine

Presented by the Society for the Arts in Healthcare

The Society’s Webinar Series is made possible through the support of the National Endowment for the Arts, which supports the Society’s Consulting Service. The Consulting Service provides affordable assistance to organizations wishing to establish or advance the arts in healthcare settings.
Overview

• Definitions
• Logic model
• Evaluation plan
• Methods
• Questions and Answers
• Pre conference session
Definitions

• **Research**—To contribute to fundamental knowledge and theory

• **Evaluation**—To examine and judge the processes and outcomes aimed at attempted solutions, and to use the findings to make decisions, improve programs, solve problems
Types of Evaluation

- **Formative or Process**—looks at the worth of a program while the program activities are forming or happening.

- **Summative or Outcomes**—looks at impacts/benefits/changes that occur as a result of the program at the end.
Participatory Evaluation

- Working with people instead of doing something to people
- Program people are "co-investigators"
- Role of evaluator is facilitator
- Process controlled by program people
A Partnership Approach

- Identify relevant questions
- Plan the evaluation design
- Select or develop appropriate measures and methods
- Gather and analyze data
- Reach consensus about findings, conclusions, recommendations
- Disseminate results and prepare action plan
**Evaluation Definitions**

- **Inputs**—What materials and resources you *use* to achieve your objectives
- **Activities**—What you *do* to get the job done
- **Outputs**—What *comes out*
- **Outcomes**—What *changes* as a result
- **Outcome Targets**—What *number or percent* of participants you anticipate will achieve the outcome
- **Outcome Indicators**—What *success looks like*
Poetry Workshop Series

Objectives

• To increase veterans’ self-expression, self-esteem, and socialization
• To increase VA staff awareness of the benefits of the arts for hospitalized veterans
• To provide a new outlet for the poet to share his/her knowledge and skills
1. How effective was the series in increasing veterans’ self-expression, self-esteem, and socialization?
2. Did the series increase VA staff awareness of the benefits of the arts for hospitalized veterans?
3. What impact did facilitating these workshops have on the poet?
Objectives: (1) To increase veterans’ self-expression, self-esteem, and socialization; (2) To increase VA staff awareness of the benefits of the arts for hospitalized veterans; and (3) To provide a new outlet for the poet to share his/her knowledge and skills.
# Logic Model

## Poetry Workshop Series at the VA

Objectives: (1) To increase veterans’ self-expression, self-esteem, and socialization; (2) To increase VA staff awareness of the benefits of the arts for hospitalized veterans; and (3) To provide a new outlet for the poet to share his/her knowledge and skills.

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<td>Facilities</td>
<td>Train poet</td>
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<td>Staff/Equipment/Facilities/BOD/Money/Poet/VA staff</td>
<td>Fundraise Recruit poet Train poet Schedule sessions Publicize program Recruit participants Conduct program Evaluate program</td>
<td>3 grants submitted 1 poet hired 8 sessions scheduled 6 posters in the facility 100 flyers printed and distributed 50 veterans served 400 poems created Evaluation completed</td>
<td>$2,500 raised For veterans: • Increased self-expression • Increased self-esteem • Increased socialization For VA staff: • Increased appreciation for the arts For poet: • Satisfying job experience</td>
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- **For veterans:**
  - 75%: increased self-expression
  - 75%: increased self-esteem
  - 75%: increased socialization

- **For VA staff:**
  - 90%: increased appreciation for the arts

- **For poet:**
  - Minimum of satisfactory job experience
## Evaluation Plan

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<tr>
<td>1. How effective was the series in increasing veterans’ self-expression, self-esteem, and socialization?</td>
<td>Creates poetry  &lt;br&gt; Shows or talks about work with others  &lt;br&gt; More willing to try new things  &lt;br&gt; Interacts more with others</td>
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<td>2. Did the series increase VA staff awareness of the benefits of the arts for hospitalized veterans?</td>
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Shows or talks about work with others  
More willing to try new things  
Interacts more with others | Veterans  
VA staff  
Administration  
Poet  
Other program staff |         |
| 2. Did the series increase VA staff awareness of the benefits of the arts for hospitalized veterans? |  |         |         |
| 3. What impact did facilitating these workshops have on the poet?         |  |         |         |
The Four Ways to Gather Information

- Talk to people
- Get written responses
- Observe people
- Review written information

Callahan, 2004
Methods

• Questionnaires, surveys, checklists
• Interviews
• Documentation
• Observation
• Focus Groups
• Case Studies
# Evaluation Plan

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*Shows or talks about work with others*  
*More willing to try new things*  
*Interacts more with others*                                                    | Veterans  
VA staff  
Administration  
Poet  
Other program staff            | Surveys  
Observation  
Interview  
Documentation  
Case Study                      |
| self-esteem, and socialization?                                           |                                                                          |                      |                                   |
|                                                                          |                                                                          |                      |                                   |
| 2. Did the series increase VA staff awareness of the benefits of the     |                                                                          |                      |                                   |
| arts for hospitalized veterans?                                          |                                                                          |                      |                                   |
|                                                                          |                                                                          |                      |                                   |
| 3. What impact did facilitating these workshops have on the poet?         |                                                                          |                      |                                   |
|                                                                          |                                                                          |                      |                                   |
Rosenberg Self-Esteem Scale (Rosenberg, 1965)

The scale is a ten-item Likert scale with items answered on a four point scale - from strongly agree to strongly disagree. Instructions: Below is a list of statements dealing with your general feelings about yourself. If you strongly agree, circle **SA**. If you agree with the statement, circle **A**. If you disagree, circle **D**. If you strongly disagree, circle **SD**.

1. On the whole, I am satisfied with myself. 
   - **SA**
   - **A**
   - **D**
   - **SD**

2. At times, I think I am no good at all. 
   - **SA**
   - **A**
   - **D**
   - **SD**

3. I feel that I have a number of good qualities. 
   - **SA**
   - **A**
   - **D**
   - **SD**

4. I am able to do things as well as most other people. 
   - **SA**
   - **A**
   - **D**
   - **SD**

5. I feel I do not have much to be proud of. 
   - **SA**
   - **A**
   - **D**
   - **SD**

6. I certainly feel useless at times. 
   - **SA**
   - **A**
   - **D**
   - **SD**

7. I feel that I am an equal person of worth, at least on an equal plane with others. 
   - **SA**
   - **A**
   - **D**
   - **SD**

8. I wish I could have more respect for myself. 
   - **SA**
   - **A**
   - **D**
   - **SD**

9. All in all, I am inclined to feel that I am a failure. 
   - **SA**
   - **A**
   - **D**
   - **SD**

10. I take a positive attitude toward myself. 
   - **SA**
    - **A**
    - **D**
    - **SD**

Scoring: **SA=3**, **A=2**, **D=1**, **SD=0**. Items with an asterisk are reverse scored, that is, **SA=0**, **A=1**, **D=2**, **SD=3**. Sum the scores for the 10 items. The higher the score, the higher the self esteem.
Avoid asking for information that you can obtain elsewhere.

- Nursing Home Residents (http://medicare.gov)
- Community Health Status Indicators (http://communityhealth.hhs.gov/HomePage.aspx)
- KIDS COUNT (http://www.kidscount.org/datacenter/)
- Technical apparatus
Sample Size

- **Confidence interval** is the plus-or-minus figure usually reported in newspaper or television opinion poll results.

- **Confidence level** tells you how sure you can be. It is expressed as a percentage and represents how often the true percentage of the population who would pick an answer lies within the confidence interval.

Determine Sample Size

Confidence Level:  95%  99%

Confidence Interval:  4

Population:  250

Calculate  Clear

Sample size needed:
Determine Sample Size

Confidence Level: 95%  99%

Confidence Interval: 4

Population: 250

Sample size needed: 177
Factors that Influence Survey Response Rates

- Questionnaire length
- Respondent pre-notification
- Issue salience
- Incentive
- Method
- Reminders
Activity Documentation

• Simple
• Examples:
  Session reports
  Journals
  Logs
• Analyze themes
• Simple descriptive stats

Session Report

Artist _______________ Date ________
1. With whom did you work?

2. What did you do?

3. What were the participants’ responses?

4. Any additional comments/concerns?
Primary Themes for Sessions

- Distraction: 33%
- Presence: 24%
- Engagement: 30%
- Discovery: 13%
Rubric

• 0 = Child does not respond.
• 1 = Child completes the movement with assistance.
• 2 = Child may be coordinated, off balance, but completes the movement with limited assistance.
• 3 = Child completes the movement independently.
Comfort

- *Relief*—the state of having a specific comfort need met
- *Ease*—the state of calm or contentment
- *Transcendence*—the state in which one can rise above problems or pain
The Comfort Line

http://www.thecomfortline.com/webinstruments.html

Comfort Daisies
(c) Kolcaba 2000

Right now I feel:

1. Very bad
2. Sort of bad
3. Sort of good
4. Very good
Observed Emotion Rating Scale


**OBSERVED EMOTION RATING SCALE**

<table>
<thead>
<tr>
<th>RESIDENT'S NAME</th>
<th>UNIT</th>
<th>OBSERVER'S NAME</th>
<th>DATE</th>
<th>TIME</th>
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</table>

Please rate the extent or duration of each affect over a ten-minute period. Some possible signs of each emotion are listed. If you see no sign of a particular feeling, rate "Never."

<table>
<thead>
<tr>
<th>7</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
<th>5</th>
<th>6</th>
<th>7</th>
<th>8</th>
<th>9</th>
<th>10</th>
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**PLEASURE**

Signs: Laughing; singing; smiling; kissing; stroking or gently touching other; reaching out warmly to other; responding to music (only counts as pleasure if in combination with another sign).

![Smiley face](attachment:image.png)

**ANGER**

Signs: Physical aggression; yelling; cursing; berating; shaking fist; drawing eyebrows together; clenching teeth; pursing lips; narrowing eyes; making distancing gesture.

![Frown face](attachment:image.png)

**ANXIETY/FEAR**

Signs: Shrieking; repetitive calling out; restlessness; wincing/grimacing; repeated or agitated movement; line between eyebrows; lines across forehead; hand wringing; tremor; leg jiggling; rapid breathing; eyes wide; tight facial muscles.

![Anxiety face](attachment:image.png)

**SADNESS**

Signs: Crying; frowning; eyes drooping; moaning; sighing; head in hand; eyes/head turned down and face expressionless (only counts as sadness if paired with another sign).

![Sad face](attachment:image.png)

**GENERAL ALERTNESS**

Signs: Participating in a task; maintaining eye contact; eyes following object or person; looking around room; responding by moving or saying something; turning body or moving toward person or object.

![Alert face](attachment:image.png)
Pe ds QL™

Present Functioning Scales
Child & Teen Self-Report

DIRECTIONS
Please put a mark on each line that best shows how you feel now. If you have no problem and feel fine, put a mark at the end of the line by the happy face. If you have some problems and do not feel that well, put a mark near the middle of the line. If you feel very bad or have lots of problems, put a mark by the sad face.

1. I feel afraid or scared

2. I feel sad or blue

3. I feel angry

4. I worry about what will happen to me

5. I feel tired

6. I feel pain or hurt

ID#: _______________________
Date: ______________________

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Lullaby Project

- Amherst Glebe Arts Response, Inc.
- Lynn Kable, Director
- Nursing Home
- Calm and relaxing music after dinner
## Evaluation Plan

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<td>Veterans&lt;br&gt;VA staff Administration&lt;br&gt;Poet&lt;br&gt;Other program staff</td>
<td>Surveys&lt;br&gt;Observation&lt;br&gt;Interview&lt;br&gt;Documentation&lt;br&gt;Case Study</td>
</tr>
<tr>
<td>2. Did the series increase VA staff awareness of the benefits of the arts for hospitalized veterans?</td>
<td>Lingers around workshop&lt;br&gt;Asks questions&lt;br&gt;Verbal, non-verbal, or written feedback</td>
<td>VA staff Administration&lt;br&gt;Poet</td>
<td>Interviews&lt;br&gt;Observation&lt;br&gt;Documentation</td>
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<td>3. What impact did facilitating these workshops have on the poet?</td>
<td>Verbal, non-verbal, or written feedback&lt;br&gt;Attendance</td>
<td>Poet&lt;br&gt;Veterans&lt;br&gt;VA staff Administration</td>
<td>Interviews&lt;br&gt;Observation&lt;br&gt;Documentation</td>
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Q & A Time
Research: Key Methods for Creative Questions

- Society for the Arts in Healthcare 20th Annual International Conference
- Wednesday, April 22
- 9 am–4 pm
- Sharon Goodill, Ruth McCaffrey, Upali Nanda, Judy Rollins
“Do not imagine that Art is something which is designed to give gentle uplift and self-confidence. Art is not a brassiere. At least, not in the English sense.

But do not forget that brassiere is the French for life jacket.”

Julian Barnes, *Flaubert’s Parrot*, 1984