PROGRAM LOGIC EXAMPLE

PROGRAM	Comprehensive Tobacco Control Program (CTPP)		PERIOD (BUDGET)	1 July 2017 – 30 June 2020 (\$1,500,000 per year)			
AGENCIES INVOLVED	Healthier Lives WA, Department of Health WA						
PROGRAM GOAL/S	Reduced prevalence of tobacco smoking in WA adults						
SITUATION	INPUTS	OUTPUTS	OUTCOMES-IMPACT	JTCOMES-IMPACT			
			Short-term outcomes	Intermediate outcomes	Long-term impact		
 Why is this program needed? In 2015, 13% of adults in WA were current smokers. In 2011, tobacco use was the leading cause of disease burden in Australia. In 2009/10, tobacco use cost WA \$1.26 billion in healthcare costs and lost labour. What works, according to the evidence? A sustained, population-wide, multi-level approach that includes mass media campaigns, access to cessation services, targeted interventions for at-risk groups, community interventions, and tobacco regulation. What laws / policies / strategies are relevant to this program? WA HPSF 2017-2021 supports programs that reduce tobacco smoking in WA adults. The National Tobacco Strategy 2012-2018 supports programs that reduce the rate of tobacco smoking in Australia. The WHO Framework Convention on Tobacco Control supports tobacco control measures that reduce the prevalence of tobacco use and exposure. 	 What resources are needed? Staff FTE: 5. Overall budget of \$1,500,000 / year. Existing partnerships between parties 	 What will the program do and who is the target group? Run state-wide mass media campaigns targeting WA adults on harms of smoking. Generate community / organisational interest in tobacco control measures. Run PD events to increase knowledge in health professionals throughout the state. Produce / distribute resources to public that support / promote quitting smoking. Run seminars for relevant agencies to raise awareness of harms of second-hand smoking. Provide training on cessation support, treatment services and access pathways for community and health professionals. 	 What changes are anticipated in the short-term? Increased motivation to quit among smokers exposed to the program. Increased awareness of the harms of smoking and exposure to second hand smoke in adults exposed to the program. 	What changes are anticipated in the medium-term? • Increased attempts to quit smoking in WA smokers exposed to the program.	What changes are anticipated in the long-term? Reduced prevalence of tobacco smoking in WA adults exposed to the program.		
Formative Evaluation		Process Evaluation	Outcome Evaluation	ntcome Evaluation			

EVALUATION PLAN EXAMPLE

PROGRAM	Comprehensive Tobacco Control Program (CTCP)		PERIOD (BUDGET)	1 July 2017 – 30 June 2020 (\$1,500,000 per year)				
AGENCIES INVOLVED	Healthier Lives WA, Department of Health WA							
PROGRAM GOAL/S	Reduced prevalence of tobacco smoking in WA adults							
EVALUATION QUESTIONS	Have demographic factors impacted on program reach? Have demographic factors impacted on changes in attempts to quit smoking? Have partnerships with key stakeholders been strengthened over the course of the program?							
EVALUATION OUTPUTS (PLANNED)	6 monthly progress reports, annual reports, evaluation reports, conference presentations, journal articles							
Program Goal/s	Impact indicators	Source	Frequency	Responsibility	Reporting			
Reduce prevalence of tobacco smoking in WA adults exposed to the program.	% of adults who report smoking daily.	CTCP Survey.	Prior to and following campaign waves.	HLWA	September 30, 2018/2019/2020			
Program Objectives	Outcome indicators	Source	Frequency	Responsibility	Reporting			
Increase motivation to quit among smokers exposed to the program.	% of surveyed smokers 'highly motivated' to quit.	CTCP Survey.	Prior to and following campaign waves.	HLWA	Mar & Sept 30, 2018/2019/2020.			
Increase awareness of the harms of smoking and exposure to second hand smoke in adults exposed to the program	Mean number of smoking-related health problems recalled by surveyed adults.	CTCP Survey.	Prior to and following campaign waves.	HLWA	Mar & Sept 30, 2018/2019/2020.			
Increase attempts to quit smoking in WA smokers exposed to the program.	Mean number and duration of self-reported quit attempts	CTCP Survey.	Prior to and following campaign waves.	HLWA	Mar & Sept 30, 2018/2019/2020.			
Program Activities	Process indicators	Source	Frequency	Responsibility	Reporting			
Run state-wide mass media campaigns targeting WA adults on harms of smoking	% of surveyed adults able to recall content from campaign.	CTCP Survey.	Post-campaign survey	HLWA	Mar & Sept 30, 2018/2019/2020.			
Generate community/organisational interest in tobacco control measures.	% of surveyed adults who recall hearing/seeing quit smoking messages in the past month.	CTCP Survey.	Ongoing from Jul 17 - Jun 20.	HLWA	Mar & Sept 30, 2018/2019/2020.			
Run PD events to increase knowledge in health professionals throughout the state.	Number of attendees at PD events per quarter	CTCP events and resources database	Ongoing from Jul 17 - Jun 20.	HLWA	Mar & Sept 30, 2018/2019/2020.			
	% of attendees reporting improved knowledge following PD events.	PD/training feedback questionnaire	Ongoing from Jul 17 - Jun 20.	HLWA	Mar & Sept 30, 2018/2019/2020.			
Produce / distribute resources to public that support/promote quitting smoking.	Number of resources distributed per quarter	CTCP events and resources database.	Ongoing from Jul 17 - Jun 20.	HLWA	Mar & Sept 30, 2018/2019/2020.			
Run seminars for relevant agencies to raise awareness of harms of second-hand smoking.	Total seminar attendees per quarter.	CTCP events and resources database	Ongoing from Jul 17 - Jun 20.	HLWA	Mar & Sept 30, 2018/2019/2020.			
	% of attendees reporting improved awareness following PD events.	PD/training feedback questionnaire.	Ongoing from Jul 17 - Jun 20.	HLWA	Mar & Sept 30, 2018/2019/2020.			
Provide training on cessation support, treatment services and access pathways for	% of attendees reporting 'very good' awareness following training.	PD/training feedback questionnaire.	Ongoing from Jul 17 - Jun 20.	HLWA	Monthly from Jul 2017 - Jun 2020.			
community and health professionals.	Number of health services referring clients to Quitline.	Quitline database.	Ongoing from Jul 17 - Jun 20.	HLWA	Monthly from Jul 2017 - Jun 2020.			
	Number of health professionals and others attending training.	CTCP events and resources database	Ongoing from Jul 17 - Jun 20.	HLWA	Mar & Sept 30, 2018/2019/2020.			

EVALUATION REPORT EXAMPLE

PROGRAM	Comprehensive Tobacco Control Program (CTCP)		PERIOD (BUDGET)	1 July 2017 – 30 June 2020 (\$1,500,000 per year)					
AGENCIES INVOLVED	Healthier Lives WA (HLWA), Department of Health WA								
PROGRAM GOAL/S	Reduce prevalence of tobacco smoking in WA adults exposed to the program								
EVALUATION OUTPUTS (ACTUAL)	6 monthly reports (x3), annual reports (x3), evaluation reports (x2), presentations (x19), journal articles (x8)								
KEY FINDINGS									
	reased amongst WA adults exposed to the program quit, awareness of the harms of smoking and number tyaried by living location and household income		he campaign.						
What did you evaluate?	How was it measured?	What did you find?	hat did you find? What are the implications?		What are the challenges and lessons learned?				
Program Goal/s									
Reduce prevalence of tobacco smoking in WA adults exposed to the program	% of adults who report smoking daily	Small additional decline in smoking for adults exposed to program	The program further reduced daily smoking in WA adults						
Program Objective/s									
Increase motivation to quit among smokers exposed to the program	% of surveyed smokers 'highly motivated' to quit.	Large increase in motivation for those exposed to campaign.	The program was effective at increasing motivation to quit		Effectiveness varied by living location.				
increase awareness of the harms of smoking and exposure to second hand smoke in adults exposed to the program	Mean number of smoking-related health problems recalled by surveyed adults	Moderate increase in knowledge of harms of smoking.	The program was effective at increasing awareness of the harms of smoking.						
Increase attempts to quit smoking in WA smokers exposed to the program.	Mean number and duration of self-reported quit attempts.	Small increases in the number and length of attempts to quit.	The program was effective at increasing quit attempts						
Program Activities			,						
Run state-wide mass media campaigns targeting WA adults on harms of smoking.	% of surveyed adults able to recall content from campaign	60% of adults able to recall content from TV campaign.	Reach for the target audience was excellent.		Reach varied by living location.				
Generate community/organisational interest in tobacco control measures.	% of surveyed adults who recall hearing/seeing quit smoking messages in the past month.	Recall of tobacco control messages increased sharply during campaign waves.	Community interest in tobacco control measures was high.						
Run PD events to increase knowledge in health professionals throughout the state	Number of attendees at PD events per quarter.	1407 health professionals in total across 78 PD events.	PD events were successfully delivered						
	% of attendees reporting improved knowledge following PD events	88% of attendees reported improved knowledge.	PD events were very effective at improving knowledge.		Relies on self-reports.				
Produce / distribute resources to public that support/promote quitting smoking.	Number of resources distributed per quarter.	1429 resources disseminated.	'Quit Kits' were widely disseminated.						
Run seminars for relevant agencies to raise awareness of harms of second-hand smoking.	Total seminar attendees per quarter	322 attendees across 40 seminars.	Seminars were effective for key public health agencies	raising awareness in					
	% of attendees reporting improved awareness following PD events	79% reported improved awareness following PD events.							
Provide training on cessation support, treatment services and access pathways for community	% of attendees reporting 'very good' awareness following training.	increase in number of people reporting 'very good' awareness	Training sessions were a time effective method for raising awareness amongst staff in key public health agencies and the community.		Regional/remote health professionals more difficult to reach.				
and health professionals.	Number of health services referring clients to Quitline.	Increase in number of health services referring clients to Quitline.							
	Number of health professionals and others attending training.	996 people attended training in total across 38 training sessions.							