Evaluation Logic Model for WorkHealthy America

Black font = items we can measure now either systematically OR through case studies of others

Grey font = items we want to measure in the future

Inputs

- •P2 staff
- •3-5 year partnership
- •Community or statewide leadership team
- Participation/ commitment of local organizations to create healthy places
- Funding to support initiative
- •Techology platforms (LeadHealthy, WorkHealthy, LearnHealthy, PQTS) that automate and tailor highly-evidence based policies & practices

Outputs Activities (What we do)

- Assess & benchmark organization practices
- Strategic coaching for organizations and leadership teams
- Webinars
- Best practice sharing
- Recognition
- •Gather data & provide reports
- Evaluate progress over time

Outputs Participation (Who we reach)

- •688 organizations participating/ engaged to create a healthy place¹
- •1,070,727 individuals in participating organizations¹
- •11 NC counties achieving Power of 101
- •7 states achieving Power of 10^{1,2}
- % or average # of orgs attending webinars/ trainings
- % or average # of orgs using action plans
- % or average # of orgs using online tools & resources
- Other "engagement" metrics (as identified)

Outputs -Feedback (What partners say)

- •% who would recommend us
- •% loyal promoters
- •% passives
- •% detractors

Outcomes -Short Term

•ORG-LEVEL

- •82% of organizations improving policies & practices (i.e. improved by at least one letter grade)³
- •18% of organizations improving across ALL topics³

INDIVIDUAL-LEVEL

- •Increase in awareness of health promotion benefits (DOT)⁴
- •Increase in awareness of disease status (Mars, DOT)⁴
- •Increase in engagement in health promoting activities (Partners in Learning, City of Greenville, Mars)⁴

• COMMUNITY-LEVEL

- % of organizations adopting healthy policies by sector
- •Comparative effectiveness of WHA participants versus to community as a whole

Outcomes -Medium Term

•ORG-LEVEL

- •41% organizations achieving an A grade¹
- •22 organizations achieving Excellence¹

• INDIVIDUAL-LEVEL

- •Increase in purchasing/eating healthy foods (FirstHealth)⁴
- Increase in physical activity (Caromont)⁴
- Decreased tobacco use rates (Mars, PIL)⁴

• COMMUNITY-LEVEL

 % decrease in smoking rate among WHA participants, compared to community as a whole

Outomes -Long term

•ORG-LEVEL

- Increased productivity among employees
- Decreased employer costs due to preventable health & disability claims (City of Greenville, Caromont, Mars)⁴
- Robust & sustainable culture of health across organization

•INDIVIDUAL-LEVEL

- Decreased rates of overweight/obesity (DOT, PIL, Caromont), diabetes, high blood sugar (PIL), hypertension (PIL, Caromont), heart disease, etc⁴
- Decrease incidence of smoking-related or lung disease

• COMMUNITY-LEVEL

- Economic development
- Population health impact

¹ Reflects all WorkHealthy data through January 2016

² Power of 10 is a goal of Healthy Together NC to reach the 10 major employers in each of NC's 100 counties by 2025

³ Reflects all WorkHealthy data through January 2015

⁴ Data not collected by Prevention Partners