Soteria Strains Safe Patient Handling and Mobility Program Guide

Section 1 - Setting the Stage

Section 1.3 - Program Evaluation and Continuous Improvement

V1.0 edited June 23, 2015



A provincial strategy for healthcare workplace musculoskeletal injury prevention.

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Section 1.3 – Program Evaluation and Continuous Improvement

Introduction

This section describes program evaluation in general terms and provides recommendations for evaluating the Soteria Strains Safe Patient Handling and Mobility Program.

Why Evaluate?

Evaluations may be done for one or more reasons including enhancing learning, demonstrating value, and for increasing accountability. Learning is an important aspect of continuous improvement and understanding how various components of a program affect outcomes. Demonstrating value is important for improving buy-in from various stakeholders and understanding a program's true cost and its return on investment. Increasing accountability is important from a financial perspective as well as ensuring effectiveness and transparency of a program. An evaluation framework should be developed that reflects the reason(s) for evaluating.

Why Evaluate Soteria Strains Safe Patient Handling and Mobility Program?

The Soteria Strains Safe Patient Handling and Mobility Program needs to be evaluated to facilitate learning, demonstrate value, and enhance accountability. This necessitates a balanced and comprehensive evaluation framework that effectively assesses the various components of the program.

- Learning from the evaluation is important to continuously improve implementation as the program is rolled out, as well as to ensure processes are effective and produce anticipated outcomes.
- Demonstrating value is critical to establishing utility and creating buy-in across stakeholder groups, driving change, and understanding cost impacts and return on investment.
- Enhancing accountability is an important aspect of the program. Understanding the effectiveness of the program and its impact on potential future costs and the system's capacity to deliver health care service will be helpful when making fiscal decisions.

What is Evaluation?

Evaluation is a systematic approach to assess the design, implementation, improvement, or outcomes of a program.¹ Generally, evaluation employs scientific research methods from various fields to gather evidence to inform decision-making.

There are many types and forms of evaluation; however, the following three steps outline the general structure of the evaluation process for this program.

General Evaluation Structure

Here are the three steps used in the Soteria Strains Safe Patient Handling and Mobility Program evaluation.

- Step 1- Gather evidence
- Step 2 Draw conclusions
- Step 3 Present findings and ensure use



¹ The term "program" may have a variety of meanings; in the current context, the "program" is the Soteria Strains Safe Patient Handling and Movement Program, which includes multiple elements/components.

Ongoing Evaluation

While the evaluation process will change as the program matures, this framework represents a cyclical and continuous-improvement model. This means plans generated from the conclusions are implemented and evaluation of those improvements continues. The framework can be reassessed after each stage of implementation and adjusted according to program needs and organizational changes.

There are three phases of evaluation: implementation, process and outcomes. The evaluation questions asked and tools/sources will vary depending on the evaluation phase.

Please note:

- There is an overlap across components; therefore, evaluation questions and tools may be appropriate for more than one phase.
- The phases are sequential in nature and dependent on the previous phase. Therefore, an implementation evaluation is required before completing a process evaluation and a process evaluation is required before completing an outcomes evaluation.

The implementation, process, and outcome evaluation phases are described briefly below:

Implementation evaluations measure the extent to which the program was implemented as intended. It explores:

- What changes to the planned implementation occurred?
- Why the implementation was changed?
- The impact of those changes on the program?

Implementation evaluation can also assess the acceptance of the program among staff, management, and other key stakeholders.

Process evaluations measure the activity of the program and the extent to which it is being carried out as intended. Process evaluation:

- Enables greater understanding of the program's operations.
- Is not used to make judgments about program effectiveness for meeting longterm outcomes (although it may be possible to see some early indications of program effectiveness).
- Is the only type of evaluation, at times, that is feasible or the primary source for identifying improvements (typically, when a program is still becoming established).
- Is useful for optimizing the program and fully understanding the operating context.

- Is commonly used for:
 - accountability (e.g., legislated responsibilities, funding agencies, regulatory bodies)
 - program development
 - program improvement
 - guidance for similar initiatives
 - comparison of multiple sites
 - understanding the context and its influence on process and outcomes
- Is required to complete an outcomes evaluation.

Outcome evaluations measure the longer-term effects that are a result of the program. Most changes are the result of multiple factors, and the outcomes evaluation attempts to identify the role of the program in bringing about those changes. For example, musculoskeletal injury rates among health care workers is influenced by injury prevention programs such as this one; however, changing patient demographics (average weight, age, mobility status, etc.) also influence injury rates among health care workers. Outcomes evaluation tries to demonstrate that the program is contributing to decreased injury rates and that the demonstrated changes are not only a result of changing demographics.

Outcome Evaluations:

- Answers the question "Did the program do what it was supposed to do?"
- Helps Assess:
 - how the program affected the target group(s)
 - how issues were addressed
- Is used for a variety of reasons including to:
 - determine if stated objectives are being met
 - determine if the model employed is better than other models
 - assess the relative value of a program
 - make decisions about whether a program should be modified, maintained, or cancelled

Evaluation Implementation Plan

The comprehensive evaluation framework for the Soteria Strains program is designed for staged implementation. Here we offer suggestions for carrying out the various stages of evaluation. This is a guide only and is, therefore, flexible. It can be amended to suit the organization's specific evaluation needs and operational context.

Evaluation of the Soteria Strains program is intended to be ongoing. This enables the program to be accountable, to learn and improve over time, and to create buy-in and acceptance of the program among key stakeholder groups.

Given the staged approach to implementation, it is most beneficial to implement the evaluation components as the program is being put in place. This allows the organization to make mid-course corrections as barriers, challenges, and opportunities are identified while also enabling

documentation of early successes in a timely fashion. Implementation of the full Soteria Strains program will take approximately 8 – 10 months, and evaluation will require approximately 14 months. Once completed, the evaluation framework can be re-assessed. Evaluation of processes and outcomes can be repeated once any necessary adjustments have been made; an additional implementation evaluation will only be needed if new components of the program are added or if existing components are changed significantly.

The basic evaluation tools, identified in the framework, include the logic model and program description, evaluation questions for each stage, indicators associated with answering each question, and data-collection tools. The data-collection tools are designed to be flexible – they provide the structure for data collection, but individual organizations will have to make decisions about how the data-collection tools will be used (i.e., as a survey, interview guide, focus group guide or online questionnaire), and whether additional information needs to be collected from any of the key groups. The tools are meant to assess all evaluation questions identified in the suggested evaluation framework.

It is up to individual organizations whether to implement an evaluation that addresses all the questions identified in the evaluation framework or if top priorities will be focused on in the near future with other questions being explored at a later time. Certain priorities are considered necessary to meet the evaluation needs of the Soteria Strains Development Committee; however, this does not mean that other questions of interest to the individual organizations or stakeholder groups cannot be included.

The suggested stages for evaluation are:

- Stage 1: This stage includes implementation and process evaluation of three of the seven components of the logic model: policy and procedures (all aspects); evaluation and monitoring (all aspects); and communications (planning and development). (Months 0 – 4)
- 2. **Stage 2**: Here a process evaluation will be conducted on the training and peer champion components of the program as well as communications implementation. (Months 3-7)
- 3. **Stage 3**: Implementation and process evaluation of the hazards, risks, and controls components inherent in maintaining communications occurs here. (Months 6 10).
- 4. **Stage 4**: An outcomes evaluation of all components of the Soteria Strains program is conducted. Opportunities to report on early outcomes of the program may arise at other stages of the evaluation and should be leveraged to facilitate data collection and analysis, and minimize burden of the evaluation on stakeholders. (Months 9 14)

Analysis and Reporting

Questions asked as part of the data-collection tools (appendices 1.3.5 & 1.3.6) are organized by type of evaluation or data source and are mapped to specific evaluation questions in the corresponding matrix. By referring to the tools and the corresponding matrix, the nature of the indicators and how they are connected to the data being collected becomes clear.

If data is collected using interviews or focus groups, they should be conducted by trained interviewers, and the data-collection and analysis process should be managed by someone skilled in qualitative research design and analysis. Interpreting findings will require skilled qualitative-analysis techniques that should be carried out by an individual with appropriate training, resources, and knowledge.

Each evaluation stage will produce findings specific to that stage. Findings from Stages 1, 2, and 3 should be used to inform analyses and interpretation of findings in the final outcomes evaluation. A summary report pulling together the findings of all four stages may be desirable at the end of the 14-month evaluation cycle.

Resources, Budget and Timeline

The breadth and depth of any single stage of the evaluation will depend on the budget allocated to the process and whether an internal or external evaluation approach is used. Smaller numbers of resources and lower budgets will restrict the extent of data collection and analysis that is feasible. Using the four-stage approach will allow financial and human resources to be spread over an extended period, thus, increasing cost-effectiveness and allowing for sufficient planning for implementation.

Reviewing and Updating the Evaluation Framework

Upon completion of each stage of the evaluation, those involved should review the framework and reflect on their experiences. This will allow for updating sections of the framework as needed so subsequent cycles of evaluation will be improved based on prior experience. For example, the need to assess implementation is generally a one-time requirement that will be unnecessary in subsequent evaluation cycles. Thus, future cycles may be completed in shorter timeframes as elements are removed and familiarity with the process is gained. This will allow the framework to remain a living document that is adjusted regularly to ensure a close fit with evaluation needs.

When all four stages have been implemented, the evaluation framework as a whole should be reflected upon to assess whether it continues to accurately meet the needs of key stakeholders. At that time, the logic model should also be carefully assessed and updated to reflect any changes to Soteria Strains programs and activities. This will allow the framework to be updated based on a current program description when all cycles of the evaluation are complete.

Provided for Evaluation of the Soteria Strains Safe Patient Handling and Movement Program are:

- Logic Model and Theory of Change (Appendix 1.3.1)
- Evaluation Matrix including questions, indicators and measures organized by evaluation phase
 - Implementation (Appendix 1.3.2)
 - Process (Appendix 1.3.3)
 - Outcomes (Appendix 1.3.4)
- Data-Collection Checklists organized by evaluation phase (Appendix 1.3.5)
 - Implementation (Appendix 1.3.5.1)
 - Process (Appendix 1.3.5.2)
 - Outcomes (Appendix 1.3.5.3)
- Data-Collection Tools organized by data source (Appendix 1.3.6)
 - Managers (Appendix 1.3.6.1)
 - Patients (Appendix 1.3.6.2)
 - Stakeholders/Partners (Appendix 1.3.6.3)
 - Trainers (Appendix 1.3.6.4)
 - Health Care Workers (Appendix 1.3.6.5)

As stated previously, the organization is encouraged, during the early stages of implementation and as part of ongoing operations, to continue to refine and focus the evaluation framework while meeting the minimum standards recommended in the framework (e.g., key performance indicators, reporting frequency).

Steps 1-3

Steps one to three (gather evidence, draw conclusions, and present findings/ensure use) are a core program component and should be integrated into the program implementation.

Step 1 – Gather Evidence

Gathering evidence is an ongoing activity that includes passive and active monitoring.

- Passive monitoring includes reviewing data already being collected by the organization (e.g., WCB claims data).
- Active monitoring includes data collection that requires some effort or change on the part
 of the organization in what and/or how data is being collected. This could include
 ongoing and/or new activities. Ongoing, active data collection would be a change to an
 existing data-collection method or a change in how data is being analyzed. For
 example, adding questions to existing staff surveys or a document review process. New
 activities include data collection that is not being completed currently by the organization
 (a new focus group, survey, interview, document review, etc.).

The staged rollout of the program, which requires targeting high-risk areas first, means that evidence gathered at any point in time will differ depending on the component being evaluated, the area being assessed, and the stage of the rollout.

Electronic Data Management

Systems using computer-based data collection and storage are preferable to those based on paper or electronic spreadsheets. The main reason for this is the ease with which data (injuries, incidents, interview/survey results and training) can be retroactively identified and extracted using built-in search functions.

In the absence of an electronic database tools that may be created include:

- Online Survey(s),
- Report templates
- Dashboard/electronic reporting system

Step 2 - Draw Conclusions

The objective of an evaluation is to generate timely, accurate, relevant, and objective findings and conclusions to support the stated purpose (learning, demonstrating value, and/or accountability) of the evaluation. When drawing conclusions, the evaluators should refer back to the purpose. It is also important to present data and conclusions in a meaningful, useful, and balanced way that outlines the strengths and weaknesses of the methodology used.

For this program, it is recommended that data be collected and analyzed by individuals with adequate skills and experience in quantitative and qualitative data analysis.

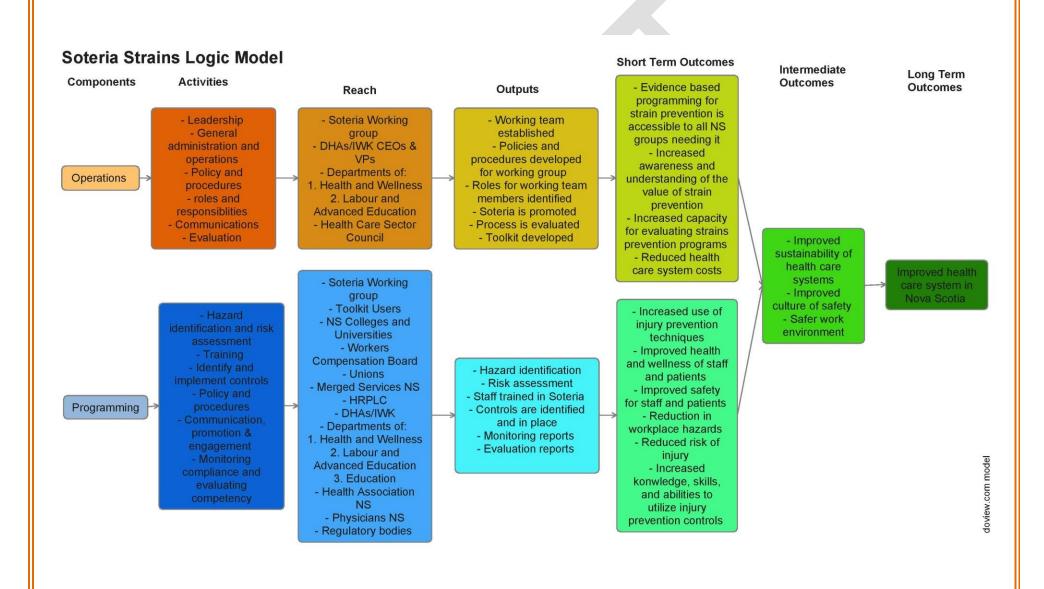
Step 3 - Present Findings and Ensure Use

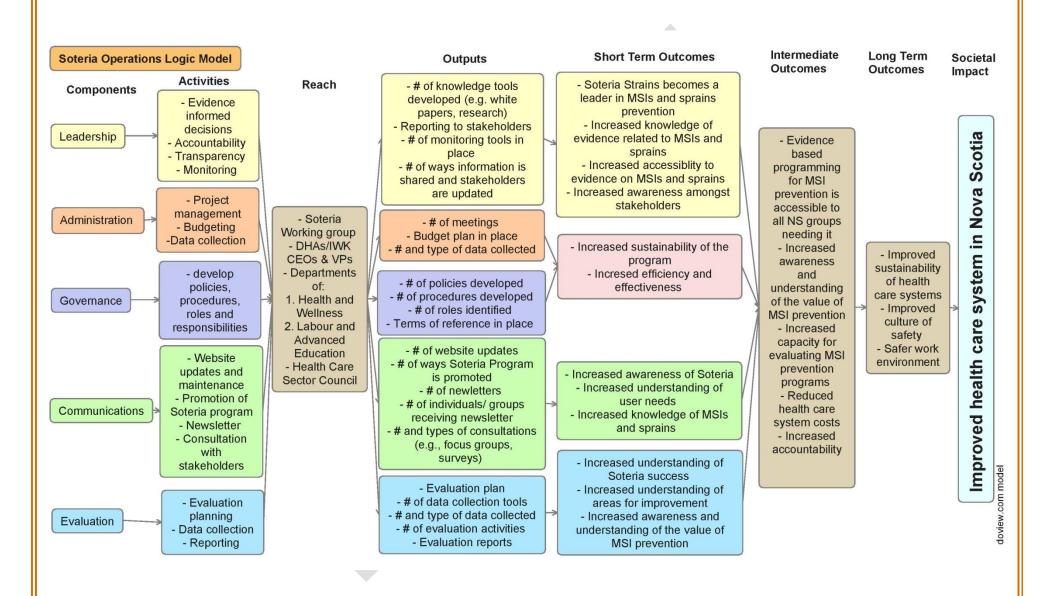
It is important that data collected and analyzed be presented in an appropriate manner to improve decision-making. Timeliness is very important and stakeholders using the specific data should meet expectations regarding how quickly information should be turned around. Some indicators may need a higher reporting frequency than recommended early in the program, and less frequent reporting later. Information systems and technology should be leveraged to allow for access to relevant and timely information. Conclusions should have recommended actions attached with timeframes for completion. These actions should be assigned to individuals who have the authority and skills to complete them.

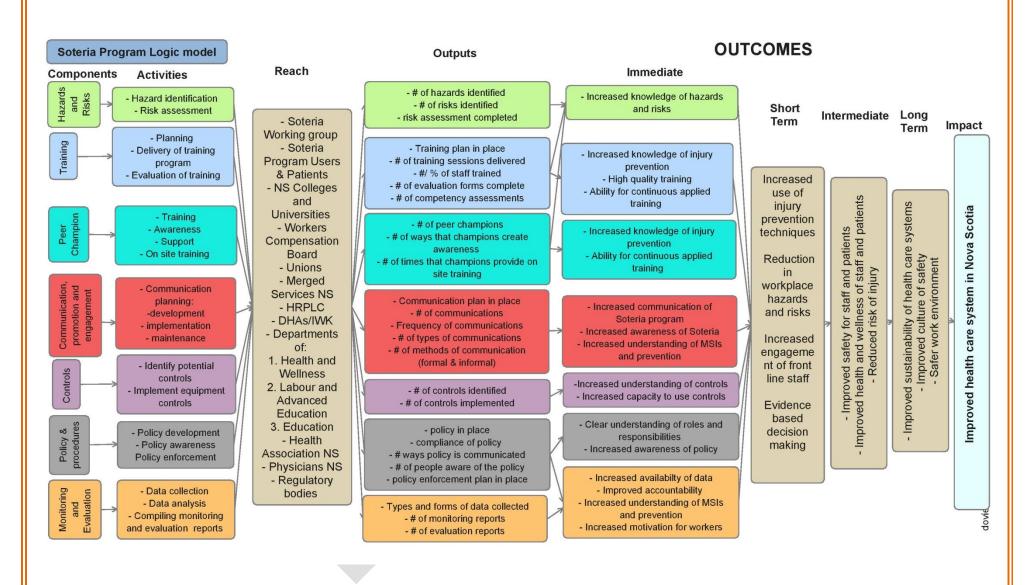
Ongoing Evaluation

While the evaluation process will change as the program matures, this framework represents a cyclical and continuous-improvement model. This means plans generated from the conclusions are implemented and evaluation of those improvements continues. The framework can be reassessed after each stage of implementation and adjusted according to program needs and organizational changes.

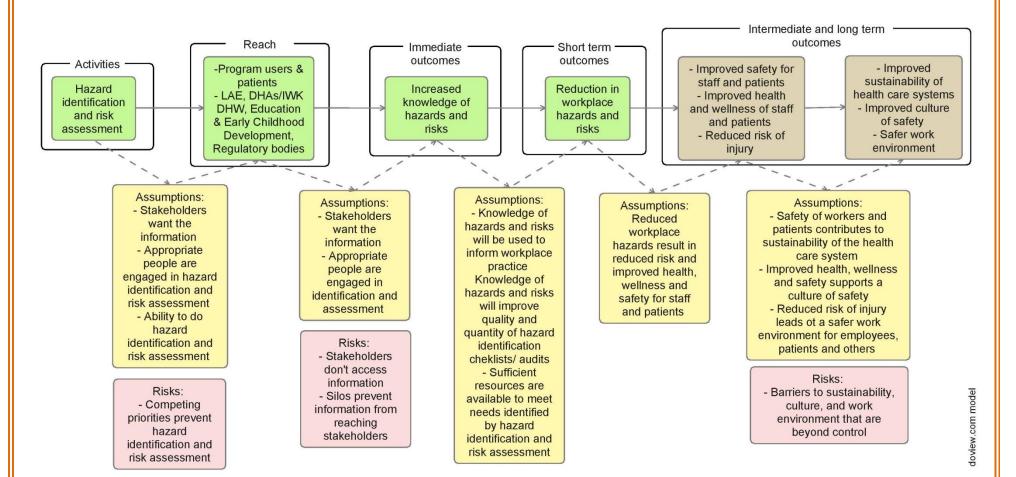
Appendix 1.3.1 - Logic Model and Theory of Change



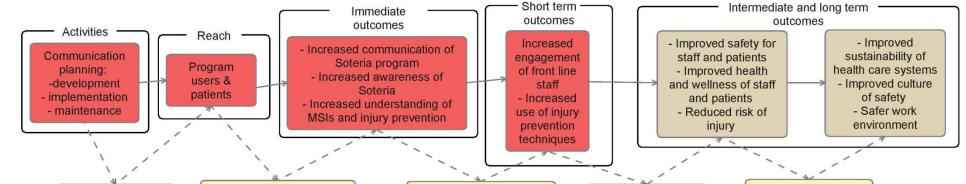




Hazards and Risks Theory of Change



Communication Theory of Change



Assumptions: - Resources to

develop a communication plan are available Assumptions:

- A communication plan is implemented that is effective in increasing awareness and understanding of injury prevention and workplace safety
- Communications are received by staff
- Communication is sustainable

Risks:

- Communications are ignored
- Communications are forgotten shortly after initial outreach

Assumptions:

- Staff are able to be engaged in MSI prevention on an ongoing basis
- Resources to use injury prevention techniques are available
- Safe patient handling is valued

Risks:

- Barriers to engagement - Lack of buy-in to
- Soteria prorgam

Assumptions:

- Staff engagement results in staff being more aware of MSIs and injury prevention and they perform in a manner that is safer and reduces risks
- Use of injury prevention techniques reduces risk of injury and results in improved health and wellness for staff and patients

Assumptions:

- Safety of workers and patients contributes to sustainability of the health care system - Improved health, wellness and safety supports a culture of safety - Reduced risk of

injury leads ot a

safer work

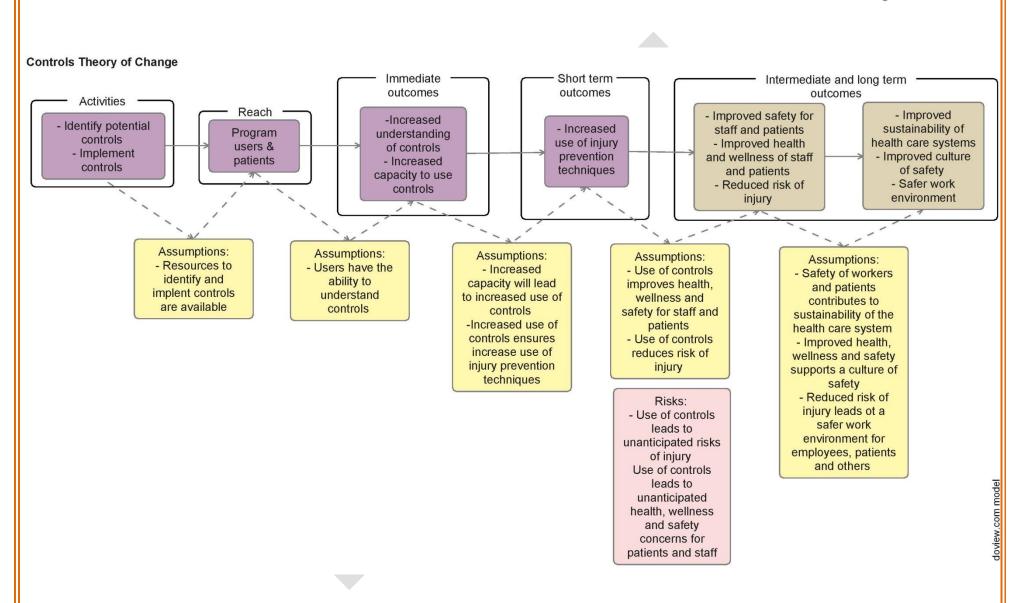
environment for

employees, patients

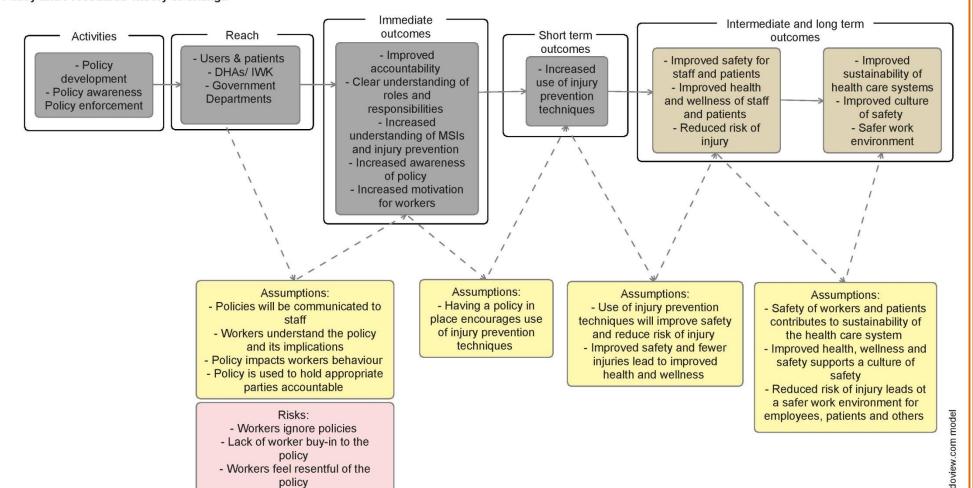
and others Risks: Barriers to sustainability

culture of safety and safe work environment

doview.com model



Policy and Procedures Theory of Change



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Monitoring and Evaluation Theory of Change **Immediate** Intermediate and long term Short term outcomes outcomes outcomes Activities Reach Increased availabilty of - Evidence - Improved safety for - Improved - Data collection data based decision staff and patients sustainability of - Users & patients - Improved health - Data analysis - Improved making around health care systems - DHAs/ IWK - Compiling - Improved culture - Government accountability MSIs and injury and wellness of staff monitoring and - Increased prevention and patients of safety Departments evaluation reports - Reduced risk of - Safer work understanding of MSIs - Increased use and injury prevention of injury injury environment - Increased motivation prevention for workers techniques Assumptions: Assumptions: Assumptions: Assumptions: Assumptions:

- Capacity to aet monitoring

and evaluation reports to appropriate decision makers and workers

- Common definitions and performance measures are established and adopted
- Resources to collect and analyze data are available
 - Monitoring and evaluation reports are used to increase knowledge and understanding
- Workers are motivated by evaluation activities

- Data collected and knowledge produced are appropriate for informing decision making
- Organization has the ability to use evaluation and monitoring to inform decision making
- Monitoring and evaluation reports are used to increase use of injury prevention techniques

Risks:

-Organizational culture does not support an evidence based approach to decision making

- Evidence based decision making improves safety and reduces risk of injury
- Decisions based on evidence improve health and wellness for staff and patients
- Increased use of injury prevention techniques improves health, wellness and safety of staff and patients
- Use of injury prevention techniques reduce risk of injury

Risk:

- Use of injury prevention techniques inadvertantly increases risk of injury

- Safety of workers and patients contributes to sustainability of the health care system
- Improved health, wellness and safety supports a culture of safety
- Reduced risk of injury leads ot a safer work environment for employees, patients and others

Appendix 1.3.2 – Matrix: Implementation Evaluation

GENERAL IMPLEMENTATION			
Implementation Questions	Indicators	Data Source	Collection Method
Was the Safe Patient Handling and Mobility Program implemented within the intended time frame?	Extent to which the program was implemented in accordance with the specified time frame	Organizational files Management Workers	Document review Manager survey/ interviews Staff survey/ interviews
How well was the Safe Patient Handling and Mobility Program accepted by staff and management?	Extent to which staff accept and value the Safe Patient Handling and Mobility Program	Management Workers	Manager survey/ interviews Staff survey/ interviews
What impact has implementing the Safe Patient Handling and Mobility Program had on the organization's human resources?	Human Resource impacts including: - Increase or decrease demand on workers (e.g., psychosocial impacts, workload, etc) - Increase or decreased in number of staff - Increase or decrease in overtime - Increase or decrease in sick time - Increase or decrease in hiring - Change in staff complement (i.e., ratios of full time, part time, temporary, etc.)	Organizational files Management Workers	Document review Manager survey/ interviews Staff survey/ interviews
Overall, do staff and management consider implementation of the program a success?	Extent to which staff and management consider implementation of the program a success	Management Staff	Management survey/ interview Staff survey/ interview

COMPONENT: HAZARDS AND	COMPONENT: HAZARDS AND RISKS			
Implementation Questions	Indicators	Data Source	Collection Method	
Were hazard identification components implemented as planned?	Extent to which hazard identification activities were implemented in accordance with the Safe Patient Handling and Mobility Program	Organizational files Management Workers	Document review Manager survey/ interviews Staff survey/ interviews	
	Number of hazards identified Number of hazards identified related to resident/ patient handling MSIs	Organizational files	Document review	
Were risk assessments implemented as planned?	Extent to which risk assessment activities were implemented in accordance with the Safe Patient Handling and Mobility Program	Organizational files Management Workers	Document review Manager survey/ interviews Staff survey/ interviews	
	Number of risk assessments completed Number of risk assessments related to resident/ patient handling MSIs	Organizational files	Document review	

COMPONENT: TRAINING			
Implementation Questions	Indicators	Data Source	Collection Method
Was planning for training carried out as intended?	Extent to which training was planned in accordance with the Safe Patient Handling and Mobility Program	Training files Trainers Management Workers	Document review Trainers survey/ interview Manager survey/ interviews Staff survey/ interviews
Was delivery of training for all components implemented as intended?	Extent to which training for all components was delivered in accordance with the Safe Patient Handling and Mobility Program	Training files Trainers Management Workers	Document review Trainers survey/ interview Manager survey/ interviews Staff survey/ interviews
Was training for all components evaluated as intended?	Extent to which training was evaluated in accordance with the Safe Patient Handling and Mobility Program	Training files Evaluation forms and reports Trainers Management Workers	Document review Trainers survey/ interview Manager survey/ interviews Staff survey/ interviews
Have peer champions been developed and implemented as intended?			

COMPONENT: COMMUNICATION, PROMOTION AND ENGAGEMENT			
Implementation Questions	Indicators	Data Source	Collection Method
Were communications plans developed and implemented as intended?	Extent to which communication plans were developed and implemented in accordance with the Safe Patient Handling and Mobility Program	Organizational files Management Workers	Document review Manager survey/ interviews Staff survey/ interviews
Is maintenance of communications being implemented as intended?	Extent to which communications are being maintained in accordance with the Safe Patient Handling and Mobility Program	Organizational files Management Workers	Document review Manager survey/ interviews Staff survey/ interviews
COMPONENT: CONTROLS			
Implementation Questions	Indicators	Data Source	Collection Method
Were controls identified as intended?	Extent to which controls were identified in accordance with the Safe Patient Handling and Mobility Program	Organizational files Management Workers	Document review Manager survey/ interviews Staff survey/ interviews
Were controls implemented as intended?	Extent to which controls were implemented in accordance with the Safe Patient Handling and Mobility Program	Organizational files Management Workers	Document review Manager survey/ interviews Staff survey/ interviews

COMPONENT: POLICY AND PR	ROCEDURES		
Implementation Questions	Indicators	Data Source	Collection Method
Was policy developed as intended?	Extent to which policy was developed in accordance with the Safe Patient Handling and Mobility Program	Organizational files Management Workers	Document review Manager survey/ interviews Staff survey/ interviews
Was policy awareness protocols implemented as intended?	Extent to which policy awareness protocols are implemented in accordance with the Safe Patient Handling and Mobility Program	Organizational files Management Workers	Document review Manager survey/ interviews Staff survey/ interviews
Was policy enforcement protocols implemented as intended?	Extent to which policies are enforced as intended by the organization	Organizational files Management Workers	Document review Manager survey/ interviews Staff survey/ interviews
COMPONENT: MONITORING A	ND EVALUATION		
Implementation Questions	Indicators	Data Source	Collection Method
Were data collection and analysis implemented as intended?	Extent to which data collection and analysis are implemented in accordance with the Safe Patient Handling and Mobility Program	Organizational files Management Workers	Document review Manager survey/ interviews Staff survey/ interviews
Were monitoring and evaluation reporting protocols implemented as intended?	Extent to which monitoring and evaluation reporting protocols are implemented in accordance with the Safe Patient Handling and Mobility Program	Organizational files Management Workers	Document review Manager survey/ interviews Staff survey/ interviews

Appendix 1.3.3 – Matrix: Process Evaluation

GENERAL PROCESS EVALUATION QUESTIONS			
Process Questions	Indicators	Data Source	Collection Method
To what extent is the manner in which the Safe Patient Handling and Mobility Program is provided consistent with the Safe Patient Handling and Mobility Program guide?	Extent to which the program is consistent with the Safe Patient Handling and Mobility Program guide	Organizational files Management Workers	Document review Manager survey/ interviews Staff survey/ interviews
To what extent has aspects of the Safe Patient Handling and Mobility Program been carried out in a timely manner?	Extent to which components are carried out in a timely manner that is in accordance with the Safe Patient Handling and Mobility Program	Organizational files Management Staff	Document review Manager survey/ interviews Staff survey/ interviews
To what extent are questions (from staff and management) about the Safe Patient Handling and Mobility Program answered in a timely manner?	Extent to which questions are addressed in a timely manner	Management Staff	Manager survey/ interviews Staff survey/ interview
To what extent is there adequate staff to manage the Safe Patient Handling and Mobility Program?	Extent to which sufficient human resources are available to manage the Safe Patient Handling and Mobility Program	Organizational files (minimum requirements) Management Staff	File review Manager survey/ interviews Staff survey/ interview
To what extent does "turf protection" or "organizational politics" affect the Safe Patient Handling and Mobility Program?	Perceptions of turf protection and organizational politics affecting the Safe Patient Handling and Mobility Program	Management Staff	Manager survey/ interviews Staff survey/ interview

_		T	1 age 20 01 70
To what extent is there effective information sharing with other organizations/ stakeholders regarding the Safe Patient Handling and Mobility Program?	Information sharing among stakeholders (progress reports shared, learning shared)	Organizational files (meeting minutes) Stakeholders/ partners Management Staff	File review Stakeholder/ partner survey/ interview Management survey/ interview Staff survey/ interview
To what extent is there effective coordination with other organizations/ stakeholders regarding the Safe Patient Handling and Mobility Program?	Coordination among stakeholders	Organizational files Stakeholders/ partners Management Staff	File review Stakeholder/ partner survey/ interview Management survey/ interview Staff survey/ interview
What have been the challenges/ opportunities in operating the Safe Patient Handling and Mobility Program?	Number of challenges in operating the Safe Patient Handling and Mobility Program	Management Staff	Management survey/ interview Staff survey/ interview
To what extent do staff and management have the appropriate knowledge, skills and ability for operating the various components of the Safe Patient Handling and Mobility Program?	Extent to which staff and management have been trained to operate the various components of the Safe Patient Handling and Mobility Program	Organizational files (Training records including competency assessment, performance reviews, ongoing competency assessments) Management Staff	Document review Management survey/ interview Staff survey/ interview
Is there adequate orientation and training on the Safe Patient Handling and Mobility Program for staff and management?	Extent to which staff and management have received orientation and training for the Safe Patient Handling and Mobility Program	Training records Management Staff	Document review Management survey/ interview Staff survey/ interview

		,	
To what extent do the policies and procedures support the Safe Patient Handling and Mobility Program?	Policies in place to support Safe Patient Handling and Mobility Program	Organizational files Management Staff	Document review Management survey/ interview Staff survey/ interview
Is there regular monitoring of the Safe Patient Handling and Mobility Program with feedback from the appropriate stakeholders?	Monitoring plan in place that gathers feedback from stakeholders	Organizational files Management Staff	Document review Management survey/ interview Staff survey/ interview
To what extent is data to inform decision making around the Safe Patient Handling and Mobility Program available?	Availability of data about the Safe Patient Handling and Mobility Program	Organizational files Management Staff	Document review Management survey/ interview Staff survey/ interview
To what extent is the Safe Patient Handling and Mobility Program being evaluated?	Evaluation tools and activities regarding the Safe Patient Handling and Mobility Program	Organizational files Management Staff	Document review Management survey/ interview Staff survey/ interview

COMPONENT: HAZARD IDENTIFICATION AND RISK ASSESSMENT

Output: Hazards Identified

Process Questions	Indicators	Data Source	Collection Method
Is there an efficient process for hazard identification in place?	Hazard identification process in place, documented and followed	Organizational files Management Workers	Document review Manager survey/ interviews Staff survey/ interviews

COMPONENT:	HAZARD IDENTIFICATION AND RISK ASSESSMENT	•

Output: Risks Identified and Risk Assessments Completed

Process Questions	Indicators	Data Source	Collection Method
Is there an efficient process for risk assessment in place?	Risk assessment process in place, documented and followed	Organizational files Management Workers	Document review Manager survey/ interviews Staff survey/ interviews
	Number of risk assessments completed	Organizational files Management Workers	Document review Manager survey/ interviews Staff survey/ interviews

COMPONENT: TRAINING - PLANNING

Output: Training Plan in Place

Output. Training Flair in Flace				
Process Questions	Indicators	Data Source	Collection Method	
Is there an efficient plan in place for providing training on Soteria Strains?	Training plan in place that is documented and followed	Organizational files Trainers Management Workers	Document review Trainer survey/ interviews Manager survey/ interviews Staff survey/ interviews	
	Number and types of training sessions planned and implemented	Organizational files Management Workers	Document review Manager survey/ interviews Staff survey/ interviews	
	Number of trainers available for implementing training	Organizational files Management	Document review Management survey/ interview	

COMPONENT: TRAINING - DELIVERY

Output: Training Plan in Place

Output. Training Fran in Frace				
Process Questions	Indicators	Data Source	Collection Method	
Has training for the Safe Patient Handling and Mobility Program been provided to appropriate staff?	Number and types (managers, front line, etc) of staff trained	Organizational files Management Workers	Document review Manager survey/ interviews Staff survey/ interviews	
	Number and types of training sessions planned and implemented	Organizational files Management Workers	Document review Manager survey/ interviews Staff survey/ interviews	
	Management and staff satisfaction with who received training	Organizational files Management Workers	Document review Manager survey/ interviews Staff survey/ interviews	
Was Soteria Strains training delivered as intended?	Extent to which training was delivered according to training plans	Organizational files Management Workers	Document review Manager survey/ interviews Staff survey/ interviews	

Output: Evaluation Forms Completed and Competency Assessments

Process Questions	Indicators	Data Source	Collection Method
Was training for the Safe Patient Handling and Mobility Program evaluated as planned?	Number of evaluation forms completed	Organizational files Trainers Managers Workers who participated in training	Document review Trainer survey/ interview Manager survey/ interviews Staff survey/ interviews
	Number of competency assessments completed by participants	Organizational files Management Workers who participated in training	Document review Manager survey/ interviews Staff survey/ interviews

COMPONENT: TRAINING - PEER CHAMPIONS

Output: Number of Peer Champions

Process Questions	Indicators	Data Source	Collection Method
How many organizations using the Safe Patient Handling and Mobility Program have peer champions?	Number of peer champions	Organizational files Trainers Managers Workers who participated in training	Document review Trainer survey/ interview Manager survey/ interviews Staff survey/ interviews
	Percentage of organizations using Soteria Strains with peer champions in place	Organizational files Management Workers who participated in training	Document review Manager survey/ interviews Staff survey/ interviews

COMPONENT: CONTROLS Output: Identify Controls			
Process Questions	Indicators	Data Source	Collection Method
How are appropriate controls identified?	Process for identifying controls is identified documented and followed	Organizational files Management Workers	Document review Manager survey/ interviews Staff survey/ interviews
	Number and types of potential controls identified	Organizational files Management Workers	Document review Manager survey/ interviews Staff survey/ interviews

COMPONENT: COMMUNICATION - PLANNING, DEVELOPMENT AND IMPLEMENTATION

Outputs: Communication Plan in Place, # of Communications,

Frequency of Communications, # of Types of Communications,

of Methods of Communications

Process Questions	Indicators	Data Source	Collection Method
Is there an effective plan in place for communicating about the Safe Patient Handling and Mobility Program?	Communication plan in place that is documented and followed	Organizational files Management Workers	Document review Manager survey/ interviews Staff survey/ interviews
	Number and types of communications planned and implemented	Organizational files Management Workers	Document review Manager survey/ interviews Staff survey/ interviews
To what extent was communications about the Safe Patient Handling and Mobility Program carried out as intended?	Extent to which communication plan was implemented as intended	Organizational files Management Workers	Document review Manager survey/ interview Staff survey/ interview
	Frequency of communication	Organizational files	Document review
	Number and types of communication	Organizational files	Document review
	Number of methods of communication	Organizational files	Document review
	Number of recipients of communications	Organizational files	Document review

COMPONENT: CONTROLS - IMPLEMENT EQUIPMENT CONTROLS

Output: # of Controls Implemented

Process Questions	Indicators	Data Source	Collection Method
What controls have been implemented?	Number and types of controls implemented in workplace	Organizational files Management Workers	Document review Manager survey/ interviews Staff survey/ interviews

COMPONENT: POLICY AND PROCEDURES

Output: Policy Development, Awareness and Enforcement

Output. Folicy Development, Awareness and Emorcement				
Process Questions	Indicators	Data Source	Collection Method	
Is there an effective policy in place for supporting the Safe Patient Handling and Mobility Program?	Policy in place	Organizational files – policy manual Management Workers	Document review Manager survey/ interviews Staff survey/ interviews	
Are staff and management aware of the policy and its implications?	Number and types of communications about the policy	Organizational files Managers Staff	Document review Manager survey/ interview Staff survey/ interview	
	Managers and staff indicate awareness and understanding of the policy	Managers Staff	Manager survey/ interview Staff survey/ interview	
Is the policy enforced?	Managers and staff report that policy is enforced	Managers Staff	Manager survey/ interview Staff survey/ interview	
	Number of documented incidents of policy being enforced	Organizational files	Document review	

COMPONENT: MONITORING AND EVALUATION

Output: Data Collection, Data Analysis, Monitoring/ Evaluation Reporting

Process Questions	Indicators	Data Source	Collection Method
What data collection processes are in place for gathering evidence on the Safe Patient Handling and Mobility Program?	Data collection process is identified, followed and documented	Organizational files Management Workers	Document review Manager survey/ interviews Staff survey/ interviews
	Number and types of data being collected as evidence to inform decisions around the Safe Patient Handling and Mobility Program	Organizational files Management Workers	Document review Manager survey/ interviews Staff survey/ interviews
	Number and type of data collection tools being used	Organizational file Management Workers	Document review Manager survey/ interview Staff survey/ interview
How is data analyzed?	Data analysis process is identified	Management Workers	Management survey/ interview Staff survey/ interview
What monitoring and evaluation reports are produced for the Safe Patient Handling and Mobility Program?	Monitoring and evaluation reports identified	Organizational documents Management Workers	File review Management survey/ interview Staff survey/ interview

Appendix 1.3.4 – Matrix: Outcome Evaluation

GENERAL OUTCOMES				
Outcomes Questions	Indicators	Data Source	Collection Method	
To what extent are staff and management satisfied with the Safe Patient Handling and Mobility Program?	Level of staff satisfaction Level of management satisfaction	Workers Management	Staff survey/ interviews Manager survey/ interviews	
To what extent does the Safe Patient Handling and Mobility Program enhance quality of life for management, staff and residents/patients?	Quality of life indicators for management, staff and residents/ patients	Management Workers Residents/ patients	Manager survey/ interview Staff survey/ interview Resident/ patient survey/ interview	
Do stakeholders perceive the Safe Patient Handling and Mobility Program to be of high quality	Stakeholders' perceptions of the quality of the Safe Patient Handling and Mobility Program	Management Workers Residents/ patients	Manager survey/ interview Staff survey/ interview Resident/ patients survey/ interview	
Are costs associated with the Safe Patient Handling and Mobility Program reasonable?	Extent to which the organization has the finances available to support the Safe Patient Handling and Mobility Program	Organizational financial files/ records Management	Document review Manager survey/ interview	
	Management's perceptions regarding the various costs of the Safe Patient Handling and Mobility Program	Management	Manager survey/ interview	
To what extent are goals of the Safe Patient Handling and Mobility Program being met	Extent to which formal goals of the Safe Patient Handling and Mobility Program are being met	Organizational files/ records Management Workers	Document review Manager survey/ interview Staff survey/ interview	

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Has the Safe Patient Handling and Mobility Program had an impact on human resources?	Human resource impacts including: - Increase or decrease demand on workers - Increase or decreased in number of staff - Increase or decrease in overtime - Increase or decrease in sick time - Increase or decrease in hiring - Change in staff complement (i.e., ratios of full time, part time, temporary, etc.)	Organizational files Management Workers	Document review Manager survey/ interviews Staff survey/ interviews
What are the costs related to MSIs before and after the Safe Patient Handling and Mobility Program was implemented?	Costs associated with resident/ patient lift related MSIs prior to the program Costs associated with resident/ patient lift related MSIs after the program	Organizational files Management	Document review Manager survey/ interview
To what extent has the Safe Patient Handling and Mobility Program increased value for money?	Cost savings attributable to the Safe Patient Handling and Mobility Program ROI	Management Workers	Manager survey/ interview Staff survey/ interview
To what extent has the Safe Patient Handling and Mobility Program had positive health impacts for workers and residents/ patients?	Positive health impacts on workers Positive health impacts on residents/ patients	Management Staff Residents/ patients	Manager survey/ interview Staff survey/ interview Resident/ patient survey/ interview

To what extent has the Safe Patient Handling and Mobility Program reduced the use of health care services, sick time or worker's compensation services amongst staff?	Change in use of health care services Change in sick time use Change in workers compensation use	Organizational files Management Staff	Document review Manager survey/ interview Staff survey/ interview
To what extent has the Safe Patient Handling and Mobility Program contributed to improvements in key workplace health indicators amongst workers?	Changes in workplace health indicators since implementation of the Safe Patient Handling and Mobility Program	Organizational files Management Staff	Document review Manager survey/ interview Staff survey/ interview
To what extent has the Safe Patient Handling and Mobility Program contributed to improvements in key health indicators for residents/ patients?	Changes in key health indicators for patients since implementation of the Safe Patient Handling and Mobility Program	Organizational files Management Staff Residents/ Patients	Document review Manager survey/ interview Staff survey/ interview Resident/ patient survey/ interview
To what extent is the Safe Patient Handling and Mobility Program generalized to other locations	Extent to which the contextual factors of the organization impacted success of the Safe Patient Handling and Mobility Program Extent to which contextual factors in the organization are/could be replicated in	Management Staff	Manager survey/ interview Staff survey/ interview
To what extent is the Safe Patient Handling and Mobility Program sustainable?	other organizations Resource needs for the Safe Patient Handling and Mobility Program Sustainability planning in place	Management Staff	Manager survey/ interview Staff survey/ interview
What sources of funding are available to support the program?	Funding sources available	Organizational files (financial records)Mgmt.	Document review Manager survey/ interview

COMPONENT: HAZARDS AND	RISKS – IMMEDIATE O	OUTCOMES	Page 36 01 76
Outcomes Questions	Indicators	Data Source	Collection Method
Has the Safe Patient Handling and Mobility Program increased knowledge of hazards and risks in the workplace?	Management and workers demonstrate increased awareness of hazards and risks	Organizational files Management	Hazard and risk competency assessment Manager survey/
		Workers	interviews
			Staff survey/ interviews
	Number and types of	Organizational	Document review
	hazards and risks identified	files Management	Manager survey/ interviews
		Workers	Staff survey/ interviews
COMPONENT: TRAINING - IMM	MEDIATE OUTCOMES		
Outcomes Questions	Indicators	Data Source	Collection Method
Has the Safe Patient Handling and Mobility Program increased knowledge of MSIs and injury prevention?	Management and workers demonstrate increased knowledge of MSIs and injury	Management Workers Trainers	MSI and Injury prevention competency assessment
	prevention		Manager survey/ interviews
			Staff survey/ interviews
			Trainers survey/ interview
Is the training provided for the Safe Patient Handling and	Managers and workers perceptions	Managers Workers	Manager survey/ interviews
Mobility Program of high quality?	of training quality	Trainers	Staff survey/ interviews
			Trainer survey/ interview

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To what extent is training offered in an applied and continuous manner through peer champions?	Managers and workers perceptions of applied and continuous training Number of instances of on the floor training Approaches to continuous learning and improvement	Managers Workers Trainers	Manager survey/ interviews Staff survey/ interviews Trainer survey/ interview
COMPONENT: COMMUNICATION	ON - IMMEDIATE OUTC	OIVIES	
Outcomes Questions	Indicators	Data Source	Collection Method
Has there been increased communication about and awareness of the Safe Patient Handling and Mobility Program	Increase in number and types of communications	Organizational files Management Workers	Document review Manager survey/ interviews Staff survey/ interviews
Has awareness of the Safe Patient Handling and Mobility Program increased	Increased awareness of the Safe Patient Handling and Mobility Program amongst managers and workers	Managers Workers	Manager survey/ interviews Staff survey/ interviews
Has the Safe Patient Handling and Mobility Program increased understanding of MSIs and injury prevention?	Increased understanding of MSIs and injury prevention among managers and workers	Management Workers	MSI and Injury prevention competency assessment Manager survey/ interviews Staff survey/ interviews

COMPONENT: CONTROLS - IMMEDIATE OUTCOMES				
Outcomes Questions	Indicators	Data Source	Collection Method	
Has the Safe Patient Handling and Mobility Program increased understanding of controls?	Increased understanding of controls amongst managers and workers	Managers Workers	Manager survey/ interviews Staff survey/ interviews	
Has the Safe Patient Handling and Mobility Program increased capacity to use controls?	andling Increased capacity to use controls amongst		Manager survey/ interviews Staff survey/ interviews	
COMPONENT: POLICY AND PR	ROCEDURES - IMMEDI	ATE OUTCOMES		
Outcomes Questions	Indicators	Data Source	Collection Method	
Is there clear understanding amongst managers and workers about roles and responsibilities related to MSIs and injury prevention?	Managers and workers indicate clear understanding of their roles and responsibilities related to MSIs and injury prevention	Management Workers	Manager survey/ interviews Staff survey/ interviews	
Has awareness of the policy and procedures in place to support the Safe Patient Handling and Mobility Program increased?	Increased awareness of the policy and procedures in place to support the Safe Patient Handling and Mobility Program amongst managers and workers	Managers Workers	Manager survey/ interviews Staff survey/ interviews	
Have accountability processes regarding MSIs and injury prevention improved as a result of the Safe Patient Handling and Mobility Program?	Improved accountability for MSIs and injury prevention	Management Staff	Manager survey/ interviews	

COMPONENT: MONITORING AND EVALUATION – IMMEDIATE OUTCOMES				
Outcomes Questions	Indicators	Data Source	Collection Method	
Has there been increased availability of data about MSIs and injury prevention as a result of the Safe Patient Handling and Mobility Program?	Increase in quantity and quality of data about MSIs and injury prevention	Organizational files Management Workers	Document review Manager survey/ interviews Staff survey/ interviews	
Have accountability processes regarding MSIs and injury prevention improved as a result of the Safe Patient Handling and Mobility Program?	Improved accountability for MSIs and injury prevention	Management Staff	Manager survey/ interviews	
Has the Safe Patient Handling and Mobility Program increased understanding of MSIs and injury prevention?	Increased understanding of MSIs and injury prevention among managers and workers	Managers Workers	MSI and Injury prevention competency assessment Manager survey/ interviews Staff survey/	
Has the Safe Patient Handling and Mobility Program increased workers' motivation to engage in safe resident/ patient handling and injury prevention	Managers and workers report increased motivation	Managers Workers	interviews Manager survey/ interviews Staff survey/ interviews	

Appendix 1.3.5 - Document and File Review Checklists (Implementation, Process and Outcomes)

This Document and File Review Checklist provides guidelines to organizations implementing the Safe Patient Handling and Mobility Program regarding the evidence that can be gathered from program documentation and files as a means of generating monitoring and evaluation evidence. Questions are categorized into three different phases of evaluation: Implementation, Process and Outcomes. Within each evaluation phase the questions are sub-categorized into related indicators. It is up to the individual organization to determine which questions are most important for their organizations needs around monitoring and evaluation and therefore which documents and files will be reviewed. Reviewing this checklist prior to implementation of the Safe Patient Handling and Mobility Program may also provide direction for file storage and document management related to the program.



Appendix 1.3.5.1 - Implementation Checklist

Checklist items in this section are appropriate for gathering evidence related to the implementation of the Soteria Strains organization. This generally refers to the startup, planning and early phases of getting a program underway.

GENERAL IMPLEMENTATION					
Evaluation Questions	Indicators	Document for Review	Document Location	Findings	
Was the Safe Patient Handling and Mobility Program implemented within the intended time frame?	Extent to which the program was implemented in accordance with the specified time frame	Timeline documents Project management documents Organizational Calendars Soteria Strains Guide book			
What impact has implementing the Safe Patient Handling and Mobility Program had on the organization's human resources?	Human resource impacts including changes in: demand on workers, number of staff, overtime, sick time, hiring, staff complement	HR Files Employee files			
COMPONENT: HA	AZARDS AND IDEN	ITIFICATION			
Were hazard identification components implemented as planned?	Extent to which hazard identification activities were implemented in accordance with the Safe Patient Handling and Mobility Program	Timeline documents Project management documents Organizational Calendars Soteria Strains Guide book			
	Number of hazards identified	Organizational hazards documents			

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	Number of hazards identified related to resident/ patient handling MSIs	Organizational hazards documents		
Were risk assessments implemented as planned?	Extent to which risk assessment activities were implemented in accordance with the Safe Patient Handling and Mobility Program	Timeline documents Project management documents Organizational Calendars Soteria Strains Guide book		
	Number of risk assessments completed	Organizational risk assessment documents		
	Number of risk assessments related to resident/ patient handling MSIs	Organizational risk assessment documents		
COMPONENT: TR	RAINING			
Was planning for training carried out as intended?	Extent to which training was planned in accordance with the Safe Patient Handling and Mobility Program	Training plans Soteria Strains Guide book	Training files	
Was delivery of training for all components implemented as intended?	Extent to which training for all components was delivered in accordance with the Safe Patient Handling and Mobility Program	Training documents (power points, manuals, etc.) Soteria Strains Guide book	Training files	

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Was training for all components evaluated as intended?	Extent to which training was evaluated in accordance with the Safe Patient Handling and Mobility Program	Training evaluation forms Soteria Strains Guide book	Training files	
COMPONENT: CO	OMMUNICATION, P	ROMOTION AND E	ENGAGEMENT	
Were communications plans developed and implemented as intended?	Extent to which communication plans were developed and implemented in accordance with the Safe Patient Handling and Mobility Program	Communications plan Project management documents Soteria Strains Guide book		
Is maintenance of communications being implemented as intended?	Extent to which communications are being maintained in accordance with the Safe Patient Handling and Mobility Program	Communications plan Project management documents Soteria Strains Guide book		
COMPONENT: CO	ONTROLS			
Were controls identified as intended?	Extent to which controls were identified in accordance with the Safe Patient Handling and Mobility Program	Soteria Strains Guide book		
Were controls implemented as intended?	Extent to which controls were implemented in accordance with the Safe Patient Handling and Mobility Program	Soteria Strains Guide book		

COMPONENT: PO	LICY AND PROCE	DURES	1 age 40 01 70
Was policy developed as intended?	Extent to which policy was developed in accordance with the Safe Patient Handling and Mobility Program	Policy documents Soteria Strains Guide book	
Were policy awareness protocols implemented as intended?	Extent to which policy awareness protocols are implemented in accordance with the Safe Patient Handling and Mobility Program	Policy documents Soteria Strains Guide book	
Was policy enforcement protocols implemented as intended?	Extent to which policies are enforced as intended by the organization	Policy documents Soteria Strains Guide book	
COMPONENT: MO	ONITORING AND E	VALUATION	
Were data collection and analysis implemented as intended?	Extent to which data collection and analysis are implemented in accordance with the Safe Patient Handling and Mobility Program	Soteria Strains Guide book Databases Evaluation/ monitoring reports	
Were monitoring and evaluation reporting protocols implemented as intended?	Extent to which monitoring and evaluation reporting protocols are implemented in accordance with the Safe Patient Handling and Mobility Program	Soteria Strains Guide book Databases Evaluation/ monitoring reports	

Appendix 1.3.5.2 - Process Checklist

Checklist items in this section are appropriate for gathering evidence related to the processes of the Soteria Strains organization. This generally refers to the activities, how the activities are carried out and documented and the outputs that are produced by those activities.

	GENERAL PROCESS	EVALUATION QU	JESTIONS	
Evaluation Question	Indicators	Document for Review	Document Location	Findings
To what extent is the manner in which the Safe Patient Handling and Mobility Program is provided consistent with the Safe Patient Handling and Mobility Program guide?	Extent to which the program is consistent with the Safe Patient Handling and Mobility Program guide	Project management documents Soteria Strains Guide book		
To what extent has aspects of the Safe Patient Handling and Mobility Program been carried out in a timely manner?	Extent to which components are carried out in a timely manner that is in accordance with the Safe Patient Handling and Mobility Program	Project management documents Soteria Strains Guide book		
To what extent is there adequate staff to manage the Safe Patient Handling and Mobility Program?	Extent to which sufficient human resources are available to manage the Safe Patient Handling and Mobility Program	HR documents Soteria Strains Guide book		
To what extent is there effective information sharing with other organizations/ stakeholders regarding the Safe Patient Handling and Mobility Program?	Information sharing amongst stakeholders	Meeting minutes Documented communication s with other organizations and stakeholders		

To what extent is there effective coordination with other organizations/ stakeholders regarding the Safe Patient Handling and Mobility Program?	Coordination amongst stakeholders	Meeting minutes Documented communications with other organizations and stakeholders	
To what extent do staff and management have the appropriate knowledge, skills and ability for operating the various components of the Safe Patient Handling and Mobility Program?	Extent to which staff and management have been trained to operate the various components of the Safe Patient Handling and Mobility Program	Training documents/ records including competency assessment, performance reviews, ongoing competency assessments	
Is there adequate orientation and training on the Safe Patient Handling and Mobility Program for staff and management?	Extent to which staff and management have received orientation and training for the Safe Patient Handling and Mobility Program	Training documents/ records	
To what extent do the policies and procedures support the Safe Patient Handling and Mobility Program?	Policies in place to support Safe Patient Handling and Mobility Program	Policy documents	
Is there regular monitoring of the Safe Patient Handling and Mobility Program with feedback from the appropriate stakeholders?	Monitoring plan in place that gathers feedback from stakeholders	Monitoring plans/ reports	
To what extent is data to inform decision making around the Safe Patient Handling and Mobility Program available?	Availability of data about the Safe Patient Handling and Mobility Program	Databases Data collection plans	

To what extent is the Safe Patient Handling and Mobility Program being evaluated? COMPONENT: HAZAF	Evaluation tools and activities regarding the Safe Patient Handling and Mobility Program	Evaluation plan/ framework Evaluation report	ENT	
Is there an efficient process for hazard identification in place?	Hazard identification process in place, documented and followed	Organizational hazards documents		
	Number and type of hazards identified	Organizational hazards documents		
Is there an efficient process for risk assessment in place?	Risk assessment process in place, documented and followed	Organizational risk assessment documents		
	Number of risk assessments completed	Organizational risk assessment documents		
COMPONENT: TRAIN	ING			
Is there an efficient plan in place for providing training on Soteria Strains?	Training plan in place that is documented and followed	Training plan		
	Number and types of training sessions planned and implemented	Training records		
	Number of trainers available for implementing training	Training records		
Has training for the Safe Patient Handling and Mobility Program been provided to	Number and types (managers, front line, etc) of staff trained	HR files – training documents Training records		
appropriate staff?	Number and types of training sessions planned and implemented	Training records		

Was Soteria Strains training delivered as intended?	Extent to which training was delivered according to training plans	Soteria Strains Guide Book Training records	
Was training for the Safe Patient Handling and Mobility Program evaluated as planned?	Number of evaluation forms completed	Training records	
	Number of competency assessments completed by participants	Training records	
How many organizations using	Number of peer champions	Training records	
the Safe Patient Handling and Mobility Program have peer champions?	Percentage of organizations using Soteria Strains with peer champions in place	Project management documents	
COMPONENT: CONT	ROLS		
How are appropriate controls identified?	Process for identifying controls is identified documented and followed		
	Number and types of potential controls identified		
What controls have been implemented? What controls have been implemented?	Number and types of controls implemented in workplace		
	Number and types of controls implemented in workplace		

COMPONENT: COMM	UNICATION - PLANN	IING, DEVELOPMEN	T AND IMPLE	MENTATION
Is there an effective plan in place for communicating about the Safe Patient Handling and Mobility Program?	Communication plan in place that is documented and followed	Communications plan		
	Number and types of communications planned and implemented	Communications documents		
To what extent was communications about the Safe Patient Handling and Mobility	Extent to which communication plan was implemented as intended	Communication plan		
Program carried out as intended?	Frequency of communication	Communications documents		
	Number and types of communication	Communications documents		
	Number of methods of communication	Communications documents		
	Number of recipients of communications	communications documents		
COMPONENT: POLIC	Y AND PROCEDURE	S		
Is there an effective policy in place for supporting the Safe Patient Handling and Mobility Program?	Policy in place	Policy manual		
Are staff and management aware of the policy and its implications	Number and types of communications about the policy	Staff correspondence/ communications documents		
		Project Management files		
Is the policy enforced?	Number of documented incidents of policy being enforced	Project/ organization management documents		
		HR documents		

COMPONENT: MONITORING AND EVALUATION				
What data collection processes are in place for gathering evidence on the Safe Patient	Data collection process is identified, followed and documented	Evaluation plan/ framework Evaluation reports		
Handling and Mobility Program?	Number and types of data being collected as evidence to inform decisions around the Safe Patient Handling and Mobility Program	Evaluation plan Evaluation reports Data bases Project management documents		
	Number and type of data collection tools being used	Evaluation plan Evaluation reports Data bases Project management documents		
What monitoring and evaluation reports are produced for the Safe Patient Handling and Mobility Program?	Monitoring and evaluation reports identified	Evaluation reports		

Appendix 1.3.5.3 - Outcomes Document Checklist

Checklist items in this section are appropriate for gathering evidence related to the outcomes of the Safe Patient Handling and Mobility Program in this organization. This generally refers changes that have occurred or impacts that have been felt because of the program.

GENERAL OUTCOMES				
Evaluation Question	Indicators	Document For Review	Document Location	Findings
Are costs associated with the Safe Patient Handling and Mobility Program reasonable?	Extent to which the organization has the finances available to support the Safe Patient Handling and Mobility Program	Financial documents/ records		
To what extent are goals of the Safe Patient Handling and Mobility Program being met	Extent to which formal goals of the Safe Patient Handling and Mobility Program are being met	Soteria Guide Book Project Management documents		
Has the Safe Patient Handling and Mobility Program had an impact on human resources?	Human resource impacts including: Increase or decrease demand on workers Increase or decreased in number of staff Increase or decrease in overtime Increase or decrease in sick time Increase or decrease in hiring Change in staff complement (i.e., ratios of full time, part time, temporary, etc.)	HR files Project management files		

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What are the costs related to MSIs before and after the Safe Patient Handling and Mobility	Costs associated with resident/ patient lift related MSIs prior to the program	HR documents Project management documents		
Program was implemented?	Costs associated with resident/ patient lift related MSIs after the program			
To what extent has the Safe Patient Handling and Mobility Program reduced the use of health care services, sick time or worker's compensation services amongst staff?	Change in use of health care services Change in sick time use Change in workers compensation use	HR documents Project management documents		
To what extent has the Safe Patient Handling and Mobility Program contributed to improvements in key workplace health indicators amongst workers?	Changes in workplace health indicators since implementation of the Safe Patient Handling and Mobility Program	HR documents Project management documents		
To what extent has the Safe Patient Handling and Mobility Program contributed to improvements in key health indicators for residents/ patients?	Changes in key health indicators for patients since implementation of the Safe Patient Handling and Mobility Program	Resident/ Patient health documents	Resident/ patient files	
What sources of funding are available to support the program?	Funding sources available	Financial records		
COMPONENT: HAZARDS AND RISKS				
Has the Safe Patient Handling and Mobility Program increased knowledge of hazards and risks in the workplace?	Number and types of hazards and risks identified	Hazard and risk documents		

COMPONENT: COMMUNICATION				
Has there been increased communication about and awareness of the Safe Patient Handling and Mobility Program	Increase in number and types of communications	Soteria Strains Communications documents Project Management documents		
COMPONENT: MONITORING AND EVALUATION				
Has there been increased availability of data about MSIs and injury prevention as a result of the Safe Patient Handling and Mobility Program?	Increase in quantity and quality of data about MSIs and injury prevention	Data bases HR documents		

Appendix 1.3.6 – Data Collection Guides

Appendix 1.3.6.1 – Manager Data Collection Guide

This data collection guide is meant to provide a guideline to organizations implementing the Safe Patient Handling and Mobility Program regarding the questions that can be posed to Senior Managers as a means of generating monitoring and evaluation evidence about the Safe Patient Handling and Mobility Program. Questions are categorized into three different phases of evaluation: Implementation, Process and Outcomes. Within each evaluation phase the questions are sub-categorized into topic groups.

It is up to the individual organization to determine the approach to posing questions (e.g., survey, interview, focus group, etc.) and which questions are most important for their organizations needs around monitoring and evaluation. Depending on the chosen method for data collection it may be necessary to modify the questions slightly; for example, the manner in which questions are posed during a face to face interview may be quite different than on a survey. In considering the data collection methods that will be used it is important to take into account the time and cost of each approach, the resources available to analyze the data produced, and Managers' response to different formats. There is no right or wrong data collection method, but the pros and cons associated with each should be considered and an informed and strategic choice made.

Implementation Evaluation

Questions in this section are appropriate for gathering evidence related to the implementation of the Soteria Strains organization. This generally refers to the startup, planning and early phases of getting a program underway.

Implementation – General

- 1. Was the Safe Patient Handling and Mobility Program implemented within the intended time frame?
 - a. Did you face any challenges in implementing the Safe Patient Handling and Mobility Program? How were these challenges resolved?
- 2. How well was the Safe Patient Handling and Mobility Program accepted by staff and management?
- 3. What impact has the implementation phase (early start up, getting established) of the Safe Patient Handling and Mobility Program had on the organization's human resources?
 - a. Did you face human resource challenges during implementation? How were these resolved?
- 4. Overall, do you consider implementation of the program a success?

Implementation - Hazards and Risks Component

- 1. Were the hazard identification activities of the Safe Patient Handling and Mobility Program implemented as intended?
 - a. Did you face any challenges in implementing the hazard identification component? How were those challenges resolved?
- 2. Was the risk assessment activities implemented as intended?
 - a. What challenges did you face in implementing the risk assessments? How were those challenges resolved?

Implementation - Training Component

- 1. Was training for the Safe Patient Handling and Mobility Program implemented as intended?
 - a. Did you face any challenges in planning for training? How were those challenges resolved?
- Were all components of the training implemented as intended?
 - a. If not, please explain why.
- 3. Was evaluation of the training for the Safe Patient Handling and Mobility Program implemented as intended?
 - a. Did you face any challenges in implementing evaluation of the training component?

Implementation - Communication, Promotion and Engagement

- 1. Were communication plans developed and implemented as intended?
 - a. Did you face any challenges in implementing communications plans? How were those challenges resolved?
- 2. Are communications plans being maintained as intended?
 - a. If not, why not?

Implementation - Controls

- 1. Were controls identified and implemented as intended?
 - a. Did you face any challenges in identifying and implementing controls? How were those challenges resolved?

Implementation - Policy and Procedures

- 1. Were policies related to the Safe Patient Handling and Mobility Program developed as intended?
- 2. Was policy awareness implemented as intended?
- 3. Was policy enforcement protocols implemented as intended?
- 4. Did you face any challenges related to implementing the policy component of the Safe Patient Handling and Mobility Program? How were those challenges resolved?

Implementation - Monitoring and Evaluation

- 1. Was planning for evaluation and monitoring implemented as intended for the Safe Patient Handling and Mobility Program?
 - a. Did you face any challenges in planning for evaluation and monitoring? How were those challenges resolved?
- 2. Were protocols for data collection and analysis implemented as intended?
 - a. Did you face any challenges in implementing protocols for data collection and analysis?

Process Evaluation

Questions in this section are appropriate for gathering evidence related to the processes of the Soteria Strains organization. This generally refers to the activities, how the activities are carried out and documented and the outputs that are produced by those activities.

Process - General

- 1. To what extent is the Safe Patient Handling and Mobility Program in your organization consistent with the Safe Patient Handling and Mobility Program guide?
- 2. To what extent has the Safe Patient Handling and Mobility Program been carried out in a timely manner?
- 3. To what extent are questions about the Safe Patient Handling and Mobility Program answered in a timely manner?

- 4. To what extent is there adequate staff to manage the Safe Patient Handling and Mobility Program?
- 5. To what extent do staff and management have the appropriate knowledge, skills and ability for operating the various components of the Safe Patient Handling and Mobility Program?
- 6. Is there adequate orientation and training on the Safe Patient Handling and Mobility Program for staff and management?
- 7. To what extent does "turf protection" or "organizational politics" affect the Safe Patient Handling and Mobility Program?
- 8. To what extent is there effective information sharing with other organizations/ stakeholders regarding the Safe Patient Handling and Mobility Program?
- 9. To what extent is there effective coordination with other organizations/ stakeholders regarding the Safe Patient Handling and Mobility Program?
- 10. To what extent do the policies and procedures support the Safe Patient Handling and Mobility Program?
- 11. Is there regular monitoring of the Safe Patient Handling and Mobility Program with feedback from the appropriate stakeholders?
- 12. To what extent is data to inform decision making around the Safe Patient Handling and Mobility Program available?
- 13. To what extent is the Safe Patient Handling and Mobility Program being evaluated?
- 14. What have been the benefits or opportunities to the organization as a result of the Safe Patient Handling and Mobility Program?
- 15. What have been the challenges in operating the Safe Patient Handling and Mobility Program?

Process - Hazard Identification and Risk Assessment

- 1. Is there a process in place for hazard identification?
 - a. Where is this process documented?
 - b. Are workers aware of the process?
 - c. Is the process efficient?
 - d. Is the process followed?
 - e. Have you faced any challenges with this process? How have these challenges been resolved?
 - f. How many hazards have been identified using this process?
- 2. Is there a process in place for risk assessment?
 - a. Where is this process documented?
 - b. Are workers aware of the process?
 - c. Is the process efficient?
 - d. Is the process followed?
 - e. Have you faced any challenges with this process? How have these challenges been resolved?
- 3. How many risk assessments have been completed since the Safe Patient Handling and Mobility Program has been implemented?
 - a. Has this number changed from before the Safe Patient Handling and Mobility Program was implemented?

Process - Training

- 1. Is there a plan in place for providing training on the Safe Patient Handling and Mobility Program?
 - a. Where is this plan documented?
 - b. Is the plan efficient?
 - c. Is the plan generally followed?
 - d. Have you faced any challenges with the training plan? How have these challenges been resolved?
 - e. How many training session have been implemented?
 - f. How many trainers are available in your organizations?
- 2. Has training been provided to staff?
 - a. How many and what positions received training?
 - b. How many sessions planned and/ or implemented?
 - c. How satisfied are you with who has received training on the Safe Patient Handling and Mobility Program?
 - d. To what extent has training been provided in accordance with the Safe Patient Handling and Mobility Program guide?

- 3. Were Safe Patient Handling and Mobility Program training evaluated?
 - a. What process was used for evaluation?
 - b. How many evaluation forms were completed?
 - c. How many competency assessments have been completed?
 - d. Have you faced any challenges with evaluation of the training? How have these challenges been resolved?
- 4. How many peer champions for the Safe Patient Handling and Mobility Program are present in your organization?
 - a. Have you faced any challenges with peer champions in your organization? How have these challenges been resolved?

Process - Controls

- 1. Is there a process in place for identifying appropriate controls?
 - a. Where is the process documented?
 - b. What types of controls have been identified?
 - c. How many controls have been identified for your organization?
 - d. Have you faced any challenges with identifying controls in your organization? How have those challenges been resolved?

Process - Communication

- 1. Is there an effective plan in place for communicating about the Safe Patient Handling and Mobility Program?
 - a. Where is the communication plan documented?
 - b. Has the communication plan been carried out as intended?
 - c. What types of communications have been planned/ implemented about the Safe Patient Handling and Mobility Program?

Process - Policy and Procedures

- 1. Are there any policies in place in your organization that support the Safe Patient Handling and Mobility Program?
 - a. If so, is staff aware of the policy and its implications?
 - b. Is the policy enforced?
 - c. Have you faced any challenges with this policy? How have those challenges been addressed?

Process - Monitoring and Evaluation

- 1. What data collection processes are in place of gathering evidence related to the Safe Patient Handling and Mobility Program?
 - a. What types of data are being collected?
 - b. What tools/ measures for data collection are being used?
 - c. How is data analyzed?
 - d. Have you faced any challenges related to data collection and/or analysis? How were those challenges addressed?
- 2. What monitoring or evaluation reports are produced relating to the Safe Patient Handling and Mobility Program?
 - a. Who is responsible for producing these reports?
 - b. How are the reports used?
 - c. Have you faced any challenges in the development or utilization of these reports? How have those challenges been addressed?

Outcomes Evaluation

Questions in this section are appropriate for gathering evidence related to the outcomes of the Safe Patient Handling and Mobility Program in this organization. This generally refers changes that have occurred or impacts that have been felt because of the program.

Outcomes - General

- 1. In general, how satisfied are you with the Safe Patient Handling and Mobility Program?
- 2. Do you feel that the Safe Patient Handling and Mobility Program has enhanced quality of life for you in any way?
- 3. Do you feel that the Safe Patient Handling and Mobility Program is of high quality? Why or why not?
- 4. In general, are costs associated with the Safe Patient Handling and Mobility Program reasonable?
 - a. Are the finances needed to support the Safe Patient Handling and Mobility Program available?
 - b. Are there any costs associated with the Safe Patient Handling and Mobility Program that don't seem reasonable or that are particularly burdensome for your organization?
- 5. To what extent are the goals of the Safe Patient Handling and Mobility Program being met?

- 6. To what extent has the Safe Patient Handling and Mobility Program impacted on the following aspects of human resources in your organization:
 - a. Demand on workers time
 - b. Increase/ decrease in number of staff
 - c. Increase/ decrease in overtime
 - d. Increase / decrease in sick time used
 - e. Increase/ decrease in hiring
 - f. Changes in staff complement (i.e., ratios of FTE, PTE, temporary workers, etc.)
- 7. To what extent has the Safe Patient Handling and Mobility Program contributed to increased value for money in your organization?
 - a. Have costs related to MSIs changed since prior to the Safe Patient Handling and Mobility Program being implemented?
 - b. Are there cost savings attributable to the Safe Patient Handling and Mobility Program?
 - c. What is the return on investment for the Safe Patient Handling and Mobility Program?
- 8. Has the Safe Patient Handling and Mobility Program impacted the use of health care services amongst workers?
- 9. Has the Safe Patient Handling and Mobility Program impacted the use of workers compensation services amongst workers?
- 10. Has the Safe Patient Handling and Mobility Program impacted workplace health indicators amongst workers?
- 11. Has the Safe Patient Handling and Mobility Program impacted key health indicators amongst residents/ patients?
- 12. Do you think the Safe Patient Handling and Mobility Program could be implemented with the same level of success in other organizations, with other workers and residents/patients, at another time?
 - a. What contextual factors need to be considered in generalizing the Safe Patient Handling and Mobility Program?
 - b. How might contextual factors be replicated in other organizations?
- 13. How sustainable is the Safe Patient Handling and Mobility Program?
 - a. What are the challenges to sustainability? How might these challenges be addressed?
 - b. What sources of funding are available to support the Safe Patient Handling and Mobility Program?

Outcomes - Hazards and Risks

- 1. To what extent has the Safe Patient Handling and Mobility Program increased knowledge of hazards and risks in the workplace?
- 2. To what extent has the Soteria Program affected this organization's ability to identify hazards and conduct risk assessment?

Outcomes - Training

- 1. Has the Safe Patient Handling and Mobility Program increased your knowledge of MSIs and injury prevention?
- 2. Is the training provided for the Safe Patient Handling and Mobility Program of high quality?
- 3. To what extent is training about MSIs and their prevention applied in a continuous manner in your organization?

Outcomes - Communication

- 1. Has the communication plan (assuming there is one) increased awareness about the Safe Patient Handling and Mobility Program?
- 2. Has the Safe Patient Handling and Mobility Program increased your understanding of MSIs and injury prevention?

Outcomes - Controls

- 1. Has the Safe Patient Handling and Mobility Program increased your understanding of controls?
- 2. Has the Safe Patient Handling and Mobility Program increased your capacity to use controls?

Outcomes - Policy and Procedures

- 1. Do you feel you have a clear understanding of your role and responsibility as a manager with regard to the prevention of MSIs in your organization?
- 2. Do you feel staff have a clear understanding of their role and responsibilities with regard to prevention of MSIs in this organization?
- 3. Has the Safe Patient Handling and Mobility Program increased your/ your staff's awareness of policies and procedures related to MSIs and injury prevention?
- 4. Has the Safe Patient Handling and Mobility Program increased accountability for MSIs and injury prevention in your organization?

Outcomes - Monitoring and Evaluation

- 1. Has the Safe Patient Handling and Mobility Program increased availability of data about MSIs and injury prevention in your organization?
- 2. Has the Safe Patient Handling and Mobility Program increased you/ your staffs understanding of MSIs and injury prevention?
- 3. Has the Safe Patient Handling and Mobility Program increased workers' motivation to engage in safe resident/patient handling and injury prevention?

Appendix 1.3.6.2 – Patient Data Collection Tool

This data collection guide is meant to provide guidelines to organizations implementing the Safe Patient Handling and Mobility Program regarding the questions that can be posed to Senior Managers as a means of generating monitoring and evaluation evidence. The questions are appropriate for the Process Evaluation phase.

It is up to the individual organization to determine the approach to posing questions (e.g., survey, interview, focus group, etc.) and which questions are most important for their organizations needs around monitoring and evaluation. Depending on the chosen method for data collection it may be necessary to modify the questions slightly; for example, the manner in which questions are posed during a face to face interview may be quite different than on a survey. In considering the data collection methods that will be used it is important to take into account the time and cost of each approach, the resources available to analyze the data produced, and Managers' response to different formats. There is no right or wrong data collection method, but the pros and cons associated with each should be considered and an informed and strategic choice made.

- 1. How safe is the way that you are lifted or transferred by staff?
- 2. Do you have any concerns about the way in which staff lift or transfer you?
- 3. Have you ever been injured during a lift or transfer?
- 4. Has a staff person ever been injured while lifting or transferring you or another resident/patient?
- 5. Do you have suggestions for how the safety of lifting/ transferring patients could be improved:
 - a. For the resident/ patient?
 - b. For workers?
- 6. Have you ever heard of the Safe Patient Handling and Mobility Program?

- a. If so, what do you think of it?
- b. What do you think are the challenges with this program?
- c. What are the benefits of the program?

Appendix 1.3.6.3 - Stakeholder/ Partners Data Collection Tool

This data collection guide is meant to provide guidelines to organizations implementing the Safe Patient Handling and Mobility Program regarding the questions that can be posed to Stakeholders and Partners of the Safe Patient Handling and Mobility Program as a means of generating monitoring and evaluation evidence. Questions are categorized into two different phases of evaluation: Process and Outcomes.

It is up to the individual organization to determine the approach to posing questions (e.g., survey, interview, focus group, etc.) and which questions are most important for their organizations needs around monitoring and evaluation. Depending on the chosen method for data collection it may be necessary to modify the questions slightly; for example, the manner in which questions are posed during a face to face interview may be quite different than on a survey. In considering the data collection methods that will be used it is important to take into account the time and cost of each approach, the resources available to analyze the data produced, and Managers' response to different formats. There is no right or wrong data collection method, but the pros and cons associated with each should be considered and an informed and strategic choice made.

Process Evaluation Questions

Questions in this section are appropriate for gathering evidence related to the processes of the Soteria Strains organization. This generally refers to the activities, how the activities are carried out and documented and the outputs that are produced by those activities.

- 1. How effective is the way in [XXX Organization] shares information about the Safe Patient Handling and Mobility Program effective?
 - a. Have you faced any challenges with relation to information sharing about the Safe Patient Handling and Mobility Program?
 - b. Do you have suggestions for how information sharing about the Safe Patient Handling and Mobility Program could be improved?
- 2. Are interactions with [XXX Organization] about the Safe Patient Handling and Mobility Program well-coordinated?
 - a. Why or why not?
 - b. How might coordination be improved?
- 3. Is your involvement with [XXX organization] about the Safe Patient Handling and Mobility Program monitored or evaluated?
 - a. How does evaluation/ monitoring happen?
 - b. Have you had sufficient opportunities to provide input related to your involvement with the Safe Patient Handling and Mobility Program?
 - c. Do you have suggestions for how monitoring and evaluation of the Safe Patient Handling and Mobility Program could be improved?

Outcomes Evaluation Questions

Questions in this section are appropriate for gathering evidence related to the outcomes of the Safe Patient Handling and Mobility Program in this organization. This generally refers changes that have occurred or impacts that have been felt because of the program.

- 1. Is the Safe Patient Handling and Mobility Program a high quality program?
 - a. Why or why not?
 - b. How might the quality of the Safe Patient Handling and Mobility Program be improved?

Appendix 1.3.6.4 – Trainer Data Collection Tool

This data collection guide is meant to provide guidelines to organizations implementing the Safe Patient Handling and Mobility Program regarding the questions that can be posed to Senior Managers as a means of generating monitoring and evaluation evidence. Questions are categorized into three different phases of evaluation: Implementation, Process² and Outcomes. It is up to the individual organization to determine the approach to posing questions (e.g., survey, interview, focus group, etc.) and which questions are most important for their organizations needs around monitoring and evaluation. Depending on the chosen method for data collection it may be necessary to modify the questions slightly; for example, the manner in which questions are posed during a face to face interview may be quite different than on a survey. In considering the data collection methods that will be used it is important to take into account the time and cost of each approach, the resources available to analyze the data produced, and Managers' response to different formats. There is no right or wrong data collection method, but the pros and cons associated with each should be considered and an informed and strategic choice made.

Implementation and Process Evaluation

Questions in this section are appropriate for gathering evidence related to the implementation of the Soteria Strains organization. This generally refers to the startup, planning and early phases of getting a program underway.

- 1. Was planning for training carried out as intended?
 - a. How was training planned for?
 - b. Did you face any challenges in planning for training? How were those challenges resolved?
- 2. Was training delivered as intended for all training components?
 - a. Did you face any challenges in training delivery? How were those challenges resolved?
- 3. Was training evaluated as intended?
 - a. Did you face any challenges in evaluating training? How were those challenges resolved?
- 4. Have peer champions been developed and implemented as intended?
 - a. How many organizations using the Safe Patient Handling and Mobility Program have peer champions?
 - b. Did you face any challenges in developing or implementing peer champions? How were those challenges resolved?

² Implementation and process questions are combined in a single section for this data collection tool

5. Is there an efficient plan in place for providing training on Soteria Strains?

Outcomes Questions

Questions in this section are appropriate for gathering evidence related to the outcomes of the Safe Patient Handling and Mobility Program in this organization. This generally refers changes that have occurred or impacts that have been felt because of the program.

- 1. Has the Safe Patient Handling and Mobility Program increased knowledge of MSIs and injury prevention?
- 2. Is the training provided for the Safe Patient Handling and Mobility Program of high quality?
- 3. To what extent is training offered in an applied and continuous manner through peer champions?



Appendix 1.3.6.5 – Health Care Worker's Data Collection Guide

This data collection guide is meant to provide guidelines to organizations implementing the Safe Patient Handling and Mobility Program regarding the questions that can be posed to Health care workers as a means of generating monitoring and evaluation evidence. Questions are categorized into three different phases of evaluation: Implementation, Process and Outcomes. Within each evaluation phase the questions are sub-categorized into topic groups.

It is up to the individual organization to determine the approach to posing questions (e.g., survey, interview, focus group, etc.) and which questions are most important for their organizations needs around monitoring and evaluation. Depending on the chosen method for data collection it may be necessary to modify the questions slightly; for example, the manner in which questions are posed during a face to face interview may be quite different than on a survey. In considering the data collection methods that will be used it is important to take into account the time and cost of each approach, the resources available to analyze the data produced, and Health care workers' response to different formats. There is no right or wrong data collection method, but the pros and cons associated with each should be considered and an informed and strategic choice made.

Implementation evaluation

Questions in this section are appropriate for gathering evidence related to the implementation of the Soteria Strains organization. This generally refers to the startup, planning and early phases of getting a program underway.

General Implementation of the Soteria Strains Program

- 5. Was the Safe Patient Handling and Movement program implemented within the intended time frame?
- 6. How well was the Safe Patient Handling and Movement program accepted by staff and management in your organization?
- 7. What impact has implementing the Safe Patient Handling and Movement program had on the organization's human resources?
- 8. Overall, do you consider implementation of the Safe Patient Handling and Movement program a success?

Implementation - Hazards and Risks Component

- 9. Were the hazard identification activities of the Safe Patient Handling and Movement program implemented as intended?
 - a. Did the organization face any challenges in implementing the hazard identification component? How were those challenges resolved?
- 10. Were the risk assessments implemented as intended?
 - a. Did the organization face any challenges in implementing the risk assessments? How were those challenges resolved?

Implementation - Training Component

- 11. Generally, was training for the Safe Patient Handling and Movement program implemented as intended?
- 12. Were all components of the training implemented as intended?
- 13. Was training evaluated as intended?
- 14. Did training result in peer champions for the Safe Patient Handling and Movement program?
- 15. Did the organization face any challenges related to training? How were those challenges resolved?

Implementation - Communication, Promotion and Engagement

- 16. Were communication plans developed and implemented as intended?
- 17. Are communications plans being maintained as intended?

Implementation - Controls

- 18. Were controls identified and implemented as intended?
 - a. Did the organization face any challenges in identifying and implementing controls? How were those challenges resolved?

Implementation - Policy and Procedures

- 19. Were policies related to the Safe Patient Handling and Movement program developed as intended?
- 20. Was policy awareness implemented as intended?
- 21. Were policy enforcement protocols implemented as intended?
- 22. Did the organization face any challenges related to implementing the policy component of the Safe Patient Handling and Movement program? How were those challenges resolved?

Implementation - Monitoring and Evaluation

- 23. Was planning for evaluation and monitoring implemented as intended for the Safe Patient Handling and Movement program?
 - a. Did the organization face any challenges in planning for evaluation and monitoring? How were those challenges resolved?
- 24. Were protocols for data collection and analysis implemented as intended?
 - a. Did the organization face any challenges in implementing protocols for data collection and analysis?

Process Evaluation Questions

Questions in this section are appropriate for gathering evidence related to the processes of the Soteria Strains organization. This generally refers to the activities, how the activities are carried out and documented and the outputs that are produced by those activities.

Process - General

- 1. To what extent is the manner in which the Safe Patient Handling and Movement program is provided consistent with the Safe Patient Handling and Movement program guide?
- 2. To what extent has the Safe Patient Handling and Movement program been carried out in a timely manner?
- 3. To what extent are questions about the Safe Patient Handling and Movement program answered in a timely manner?
- 4. To what extent is there adequate staff to manage the Safe Patient Handling and Movement program?
- 5. To what extent do staff and management have the appropriate knowledge, skills and ability for operating the various components of the Safe Patient Handling and Movement program?
- 6. Is there adequate orientation and training on the Safe Patient Handling and Movement program for staff and management?
- 7. To what extent does "turf protection" or "organizational politics" affect the Safe Patient Handling and Movement program in this organization?
- 8. To what extent is there effective information sharing with other organizations/ stakeholders regarding the Safe Patient Handling and Movement program?
- 9. To what extent is there effective coordination with other organizations/ stakeholders regarding the Safe Patient Handling and Movement program?
- 10. To what extent do the policies and procedures of this organization support the Safe Patient Handling and Movement program?
- 11. Is there regular monitoring of the Safe Patient Handling and Movement program with feedback from the appropriate stakeholders?
- 12. To what extent is data to inform decision making around the Safe Patient Handling and Movement program available?
- 13. To what extent is the Safe Patient Handling and Movement program being evaluated?
- 14. What have been the benefits or opportunities to the organization as a result of the Safe Patient Handling and Movement program?
- 15. What have been the challenges in operating the Safe Patient Handling and Movement program?

Process - Hazard identification and risk assessment

- 16. Is there a process in place for hazard identification?
 - a. Where is this process documented?
 - b. Is the process efficient?
 - c. Is the process followed?

- d. Have you faced any challenges with this process? How have these challenges been resolved?
- e. How many hazards have been identified using this process?
- 17. Is there a process in place for risk assessment?
 - a. Where is this process documented?
 - b. Is the process efficient?
 - c. Is the process followed?
 - d. Have you faced any challenges with this process? How have these challenges been resolved?
- 18. How many risk assessments have been completed since the Safe Patient Handling and Movement program has been implemented?
 - a. Has this number changed from before the Safe Patient Handling and Movement program was implemented?

Process - Training

- 19. Is there a plan in place for providing training on the Safe Patient Handling and Movement program?
 - a. What do you think of the training plan?
 - b. Is the plan generally followed?
 - c. How many training session have been implemented?
 - d. How many trainers are available in your organization?
- 20. Have you received any training? Which sessions?
 - a. How satisfied are you with the opportunities you've had to receive training on the Safe Patient Handling and Movement program?
 - b. To what extent has training been provided in accordance with the Safe Patient Handling and Movement program guide?
- 21. Was Safe Patient Handling and Movement program training evaluated?
 - a. What process was used for evaluation?
 - b. How many competency assessments have been completed?
 - c. Have you faced any challenges with evaluation of the training? How have these challenges been resolved?
- 22. How many peer champions for the Safe Patient Handling and Movement program are present in your organization?
 - a. Have you faced any challenges with peer champions in your organization? How have these challenges been resolved?

Process - Controls

- 23. Is there a process in place for identifying appropriate controls?
 - a. Where is the process documented?
 - b. What types of controls have been identified?
 - c. How many controls have been identified for your organization?

d. Has your organization faced any challenges with identifying controls? How have those challenges been resolved?

Process - Communication

- 24. Is there an effective plan in place for communicating about the Safe Patient Handling and Movement program?
 - a. Where is the communication plan documented?
 - b. Has the communication plan been carried out as intended?
 - c. What types of communications have been planned/ implemented about the Safe Patient Handling and Movement program?

Process - Policy and procedures

- 25. Are there any policies in place in your organization that support the Safe Patient Handling and Movement program?
 - a. If so, are staff aware of the policy and its implications?
 - b. Is the policy enforced?
 - c. Have you faced any challenges with this policy? How have those challenges been addressed?

Process - Monitoring and evaluation

- 26. What data collection processes are in place of gathering evidence related to the Safe Patient Handling and Movement program?
 - a. What types of data are being collected?
 - b. What tools/ measures for data collection are being used?
 - c. How is data analyzed?
 - d. Has your organization faced any challenges related to data collection and/or analysis? How were those challenges addressed?
- 27. What monitoring or evaluation reports are produced relating to the Safe Patient Handling and Movement program?
 - a. Who is responsible for producing these reports?
 - b. How are the reports used?
 - c. Has your organization faced any challenges in the development or utilization of these reports? How have those challenges been addressed?

Outcomes Evaluation

Questions in this section are appropriate for gathering evidence related to the outcomes of the Safe Patient Handling and Movement program in this organization. This generally refers changes that have occurred or impacts that have been felt because of the program.

Outcomes - General

- In general, how satisfied are you with the Safe Patient Handling and Movement program?
- 2. Do you feel that the Safe Patient Handling and Movement program has enhanced work quality of life for you in any way?
- 3. Do you feel that the Safe Patient Handling and Movement program is of high quality? Why or why not?
- 4. To what extent are the goals of the Safe Patient Handling and Movement program being met in your organization?
- 5. To what extent has the Safe Patient Handling and Movement program impacted on the following aspects of human resources in your organization:
 - a. Demand on health care workers time
 - b. Increase/ decrease in number of staff
 - c. Increase/ decrease in overtime
 - d. Increase / decrease in sick time used
 - e. Increase/ decrease in hiring
 - f. Changes in staff complement (i.e., ratios of FTE, PTE, temporary health care workers, etc.)
- 6. To what extent has the Safe Patient Handling and Movement program contributed to increased value for money in your organization?
 - a. Are there cost savings attributable to the Safe Patient Handling and Movement program?
 - b. What is the return on investment for the Safe Patient Handling and Movement program?
- 7. Has the Safe Patient Handling and Movement program impacted the use of health care services amongst health care workers?
- 8. Has the Safe Patient Handling and Movement program impacted the use of health care workers compensation services amongst health care workers?
- 9. Has the Safe Patient Handling and Movement program impacted workplace health indicators amongst health care workers?
- 10. Has the Safe Patient Handling and Movement program impacted key health indicators amongst residents/ patients?
- 11. Do you think the Safe Patient Handling and Movement program could be implemented with the same level of success in other organizations, with other health care workers and residents/patients, at another time?
 - a. What contextual factors need to be considered in generalizing the Safe Patient Handling and Movement program?

- b. How might contextual factors be replicated in other organizations?
- 12. How sustainable is the Safe Patient Handling and Movement program?
 - a. What are the challenges to sustainability of the Safe Patient Handling and Movement program? How might these challenges be addressed?

Outcomes - Hazards and Risks

- 13. To what extent has the Safe Patient Handling and Movement program increased knowledge of hazards and risks in the workplace?
- 14. To what extent has the Soteria Program affected this organization's ability to identify hazards and conduct risk assessment?

Outcomes - Training

- 15. Has the Safe Patient Handling and Movement program increased your knowledge of MSIs and injury prevention?
- 16. Is the training provided for the Safe Patient Handling and Movement program of high quality?
- 17. To what extent does training about MSIs and injury prevention happen in an ongoing and continuous manner through the use of peer champions in your organization?

Outcomes - Communication

- 18. Has the communication plan (assuming there is one) increased awareness about the Safe Patient Handling and Movement program?
- 19. Has the Safe Patient Handling and Movement program increased your understanding of MSIs and injury prevention?

Outcomes - Controls

- 20. Has the Safe Patient Handling and Movement program increased your understanding of controls?
- 21. Has the Safe Patient Handling and Movement program increased your capacity to use controls?

Outcomes - Policy and Procedures

- 22. Do you feel you have a clear understanding of your role and responsibility as an employee with regard to the prevention of MSIs in your organization?
- 23. Do you feel managers have a clear understanding of their role and responsibilities with regard to prevention of MSIs in this organization?
- 24. Has the Safe Patient Handling and Movement program increased your awareness of policies and procedures related to MSIs and injury prevention?

Outcomes - Monitoring and Evaluation

- 25. Has the Safe Patient Handling and Movement program increased availability of data about MSIs and injury prevention in your organization?
- 26. Has the Safe Patient Handling and Movement program increased your understanding of MSIs and injury prevention?

27. Has the Safe Patient Handling and Movement program increased your motivation to engage in safe resident/ patient handling and injury prevention?

