## **Draft OHP Evaluation Logic Model**

Goal: OHP law will (1) improve access to needed oral health services for low-income, uninsured, and underserved patients; (2) control the costs of education and dental services; (3) preserve quality of care; and (4) protect patients from harm. (Laws 2008, Ch. 298, sec. 29, subd. 3)

INPUTS	OUTPUTS		OUTCOMES		
Funds &	ACTIVITIES	PARTICIPANTS	SHORT TERM	MEDIUM TERM	LONG TERM
Funds & Investments  1) Start-up funds 2) Operating funds 3) Other funds (e.g., state appropriations, grants etc.)  Staffing 1) OHPs 2) Dental practice  Reimbursements 1) Patients 2) DHS 3) Health Plans/Insurers  Other Inputs 1) Outreach	Licensing, Regulation, Evaluation  1) BoD 2) Accrediting bodies 3) MDH 4) Others  Direct Service  Wrap-around Services 1) Outreach 2) Transportation 3) Interpreters	Education U of M MNSCU Others  Licensing, etc. 1) BoD 2) Accrediting bodies 3) MDH 4) Others  Patients  Wrap-around Services 1) Health Plans 2) Social Service Organizations 3) Safety Net providers	Patients Reduce infection rates Increase patient satisfaction Decrease travel time Increase emphasis on preventive care Increase # patients receiving restorative care  Dental Industry/Sector Increase number of patients Increase diversity of OHP to reflect population served  State Government Increase emphasis on preventive care  Education System Increase distribution of program grads Increase resources allocated to initiate OHP program Education programs are of sufficient quality, clinical and theoretical foundations.  Society (PH/social impact) Maintain quality of care	Patients Reduce infection rates Increase patient satisfaction Decrease travel time Increase emphasis on preventive care Increase # patients receiving restorative care  Dental Industry/Sector Increase number of patients Increase diversity of OHP to reflect population served  State Government Decrease cost Increase emphasis on preventive care  Education System Increase distribution of program grads Increase resources allocated to initiate OHP program Education programs are of sufficient quality, clinical and theoretical foundations Society (PH/social impact) Maintain quality of care	Patients Reduce infection rates Increase patient satisfaction Decrease travel time Increase emphasis on preventive care Increase # patients receiving restorative care  Dental Industry/Sector Increase number of patients Increase diversity of OHP to reflect population served  State Government Decrease cost Increase emphasis on preventive care  Education System Increase distribution of program grads Increase resources allocated to initiate OHP program Education programs are of sufficient quality, clinical and theoretical foundations  Society (PH/social impact) Maintain quality of care
			OUTCOME MEASURES		