Assessing a Healthcare Program/Policy Evaluation

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**Patient Self-Management Support Programs: An Evaluation**

**Description**

Managing a chronic illness or a disease is a distressing and lengthy procedure. The patients have been documented to care for themselves which often resulted in poor outcomes regarding their already debilitating health. Patient Self-Management Support Programs were created to provide education to the patients by enhancing their ability and skills to manage their affliction (Ganguli, Clewell & Shillington, 2016). Additionally, regular assessment of patients' progress is also documented. These programs aim to bring down the healthcare provision cost and improve healthcare indicators for chronically afflicted patients (Narva, Norton & Boulware, 2016).

 **How was the success of the program or policy measured?**

The measures upon which the success or failure of these programs depends must be in line with the goals of these programs. These multiple measures were consolidated in a single portfolio. This portfolio kept track of all the objectives and goals attained so far in line with the recommendations of the self-management support programs. It also documented if patients got better at managing themselves in the fight against the disease and any change came in their behavior that enabled them to live a prosperous life.

**How many people were reached by the program or policy selected? How much of an impact was realized with the program or policy selected?**

The annual healthcare budget earmarked for chronic illnesses has been swelling for years. Against this background, patient self-support management programs were formulated. The aim of these programs was to target maximum patients. The extent of the impact of the realization of the goals and objectives of the self-support management programs could be understood by the fact that these programs could help to save $3.9 billion on a national level annually.

**What data was used to conduct the program or policy evaluation?**

Primarily, the data of the huge costs that are incurred by the chronically ill patients were collected. The data suggested that chronically ill patients are sustaining huge costs in managing their diseases. Additionally, the progress reports were studied and concluded that patients are performing poorly when they tried to manage themselves.

**What specific information on unintended consequences were identified?**

When a policy or a program is intended to target such a large population, it is imperative to assess any unintended consequences that may arise as a result. While creating self-support management programs, policymakers assessed that healthcare provision could be further fragmented should healthcare providers change health plans.

**What stakeholders were identified in the evaluation of the program or policy? Who would benefit the most from the results and reporting of the program or policy evaluation? Be specific and provide examples.**

Every program in order to be successful must take onboard key stakeholders. The key stakeholders identified while creating the self-support management programs were patients, their families, healthcare professionals such as doctors, nurses and other staff members. Stakeholder patients will be largely affected by the program. For instance, the chronically ill patients that have been poorly performing while managing themselves would be the biggest beneficiaries of the program. That is because they would be educated enough under this program to effectively look after themselves bringing down healthcare costs significantly.

**Did the program or policy meet the original intent and objectives? Why or why not?**

The extensive evidence to evaluate is lacking significant backing to suggest that the self-support programs attained their intended targets. That is because these programs lack structure so far and there exists uncertainty about whether these programs would be useful or not.

**Would you recommend implementing this program or policy in your place of work? Why or why not?**

Definitely, I would recommend this policy and programs to be widely implemented at my place of work. The reason for this is because chronically ill patients perform so poorly when caring for themselves. They have been seen to struggle to cope with the implications related to the affliction. The implementation of this policy would provide the necessary education and give them the skills to manage the disease themselves.

**Identify at least two ways that you, as a nurse advocate, could become involved in evaluating a program or policy after one year of implementation**.

The role that a nurse advocate plays in bringing significant change after the implementation of the policy is undeniable (Kent et.al, 2016). As a nurse advocate, I would furnish relevant data of the patients to concerned bodies and departments to analyze and bring with more effective policies and strategies. Additionally, I would hold a conversation with patients to raise awareness regarding the benefits of such programs (Choi, 2015).

**General Notes/Comments**

Conduct more research that would serve as a launchpad to come up with more unique and cost-effective self-support management strategies.

**References**

Choi, P. P. (2015). Patient advocacy: the role of the nurse. *Nursing Standard (2014+)*, *29*(41), 52.

Ganguli, A., Clewell, J., & Shillington, A. C. (2016). The impact of patient support programs on adherence, clinical, humanistic, and economic patient outcomes: a targeted systematic review. *Patient preference and adherence*, *10*, 711.

Kent, E. E., Rowland, J. H., Northouse, L., Litzelman, K., Chou, W. Y. S., Shelburne, N., ... & Huss, K. (2016). Caring for caregivers and patients: research and clinical priorities for informal cancer caregiving. *Cancer*, *122*(13), 1987-1995.

Narva, A. S., Norton, J. M., & Boulware, L. E. (2016). Educating patients about CKD: the path to self-management and patient-centered care. *Clinical Journal of the American Society of Nephrology*, *11*(4), 694-703.