Figure 1. Project Outcomes Expressed as Logic Model

Situation: Significant gaps exist in knowledge, skills, policy and practice related to the use of augmentative and alternative communication systems (AAC) that prevent individuals with dementia from having equal access to opportunities for health, function and participation.
Priorities: To evaluate the effectiveness of a research utilization program involving the implementation of best practices related to the use of AAC for persons with dementia that is based on research outcomes of a current NIDRR Field Initiated Research project.

Activities	Short-term Outcomes	Beneficiaries	Intermediate Outcomes	Beneficiaries	Long term Outcomes	Beneficiaries
Provide training Provide materials	Increase in awareness and knowledge of AAC for persons with dementia	Licensed long-term care providers	Use of AAC in Alzheimer's Disease Care Units (ADCU) to improve conversations between care providers and residents	Licensed long-term care providers Persons with Alzheimer's disease	Changes in ADCU policies Improvements in training curricula Changes in State of Oregon policies	Persons with Alzheimer's disease
	Evaluation Mechanism Questionnaire administered to long term care providers at baseline, post-training and follow-up (mean improvement of at least 85% post training on awareness and knowledge questions)		**Evaluation Mechanism** Observations of frequency of use of AAC and initiation of conversations by persons with AD (mean of at least 100% increase post training) Caregiver Satisfaction questions administered to long term care providers at baseline, post-training and follow-up (mean improvement of at least 85% post training)		**Evaluation Mechanism** New language in ADCU program policies New material in state training curricula New language in state OARs related to long term care provider licensure	

Assumptions

1. In-service training provided to licensed long term care providers influences their awareness, knowledge and practice.
2. Provision of low-cost materials for constructing AAC boards facilitates implementation of AAC.
3. State and ADCU policies and curricula are influenced by input from care providers, administrators, trainers and research findings.