Operation Access in the San Francisco Bay Area Logic Model: Plan and Intended Results for 2011

**GOAL**: To reach a level and range of donated surgical care and specialty services that (1) keeps pace with growing demand, (2) engages more medical volunteers, (3) increases OA’s service capacity.

**Rationale**
- Due to dramatic public health budget cuts and recession, many people have been left without healthcare coverage.
- Demand for outpatient surgeries and specialty care among low-income, uninsured residents has increased sharply in some counties.
- Community clinics that serve this population provide mainly primary care services.
- Operation Access has been steadily expanding its program each year in response to increases in need to help bridge this healthcare gap.

**Assumptions**
- Medical professionals in the San Francisco Bay Area are willing to volunteer locally.
- Hospitals and clinics see value in OA’s facilitation of donated services.
- Access to care, and providing specialty care to underserved populations, is a funding priority for many foundations.
- National healthcare reform will not significantly decrease demand for donated services during the next several years.

**Inputs**
- OA Program Managers, Program Coordinators, and Program Assistants
- Other OA Staff
- OA Board, Advisory Council & Program Committee
- Foundations and their priority areas.
- Community Partners (Clinic Consortia, coalitions & others)
- OA Database & Case Management Protocols
- Communication & Marketing Opportunities
- Evaluation (both internal & external)

**OA Network**
- Hospitals & Medical Centers
- Medical Volunteers
- Referring Community Clinics
- Low-income, Uninsured Patients

**Activities**
- Cultivate strong hospital relationships
- Recruit the participation of new medical centers
- Coordinate a high volume of charity care, with a ROI of 10:1.

**Outputs**
- Up to 15% increase in services provided (2011 over 2010)
- 90% of patients report improved health, quality of life and ability to work.
- 90% of patients report being less concerned & more informed about their condition.

**Outcomes**
- Increased visibility of OA among participating hospitals & increased awareness among prospective hospitals.
- Increased access to quality surgical & specialty care for low-income, uninsured people.
- Positive patient outcomes.

**Impacts**
- A strong, sustainable community network of stakeholders that provides a strengthened safety net.
- A culture of medical volunteerism and community benefit established among participating hospitals.