



# Developing Outcome Measures for ICAM Pilot Program

ICAM Grantees are required to develop two *outcome measures* in the following five categories:

1. Increased access to community services and/or appointments
2. Increased awareness of available transportation options
3. Increased transportation coordination for the organization's target population
4. Expansion of current services
5. Decreased number of missed community services and/or appointments

The strongest outcome measures pair a meaningful change (what will improve) with a way to observe that change (how you'll know). A good outcome measure includes:

- The change you expect for riders, partners, or the community
- The population affected
- The indicator you will track (knowledge, behavior, access, coordination, etc.)
- The method for observing it (survey, logs, partner feedback, system data)

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## Tips for developing meaningful performance measures:

### 1. Be Specific About Who and What Will Change

Ensure the expected change is highly specific, especially regarding the *who* and *what*.

- **Define Target Population:** While some examples mention target populations (e.g., older adults, rural residents), explicitly defining the affected population in *every* measure will improve clarity.
  - *Example:* Instead of "Riders will experience increased access," specify, "Riders aged 65+ with low incomes will experience increased access..."
- **Quantify Expected Change:** Where possible, integrate specific numeric goals into the description of the expected change.
  - *Example:* Instead of "demonstrated by a rise in completed trips," aim for "demonstrated by a 15% rise in completed trips to medical appointments within the next 12 months."

### 2. Match the Indicator to the Change You Want to See

Ensure the chosen indicator directly and reliably reflects the expected change, and that the observation method is feasible.

- Distinguish Between Outputs and Outcomes:
  - **Outputs** show what you did such as the number of meetings held, rides given, MOUs signed.

- **Outcomes** show a change in behavior, access, coordination or knowledge. Because of the meetings held, rides given and MOUs signed, *<this change>* occurred.
- *Example:* While MOUs signed are an output, the outcome should be the *result* of that MOU, such as "Increased transportation coordination is demonstrated by a 10% decrease in duplicate service requests between Partner A and the grantee, observed via shared system data."
- Make sure you have the ability to capture the data reliably before making it a required indicator.

### 3. Focus on Behavior or Access, Not Just Awareness

While awareness is important, it is rarely the end goal. True impact manifests as a change in behavior or improved access.

- Increased awareness ideally results in more ride bookings, more completed trips, more referrals, etc.
- *Example:* "Providing 500 flyers and 8 information sessions to people living in 4 subsidized apartment complexes resulted in increased awareness (measured through surveys) which manifested in a 20% increase in bookings by people living in those apartment complexes."

### 4. Use a Mix of Indicator Types Across Categories

To keep measures balanced and meaningful, use different types of indicators:

- **Knowledge/attitudes** (surveys)
- **Behavior** (usage logs, bookings, referrals)
- **Access** (completed trips, reduced wait times, fewer missed appointments)
- **Coordination** (shared processes, reduced duplication)

For expansion measures, don't just count new hours or zones—show **who benefits** and **how**.

- *Example:* "Residents with limited incomes in the new service zone will complete 200 additional trips per quarter."

### 5. Use a Consistent, Strong Structure

Every outcome measure should follow this pattern:

**[Target population]** will experience **[meaningful change]**, demonstrated by **[measurable indicator]** tracked via **[observation method]**.

This structure keeps measures clear - linking the outputs to the outcomes - and shows the true impact of the project.

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## Examples of Outcome Measures in Each of the Five Categories

### 1. Increased access to community services and/or appointments

These reflect outcomes such as increased completed medical trips, improved ability to reach dialysis, behavioral health, primary care, food access or other appointments and services.

#### Examples:

- Riders (*indicate target population*) will experience increased access to healthcare services, demonstrated by a X% rise in completed trips to medical, behavioral health, and preventive care appointments (*specify appointment type as able*).
- Community members will have increased access to essential services (*can specify food, pharmacy, social services, etc.*), demonstrated by more (*indicate number or percent increase*) successful trip completions to those destinations. (*track trip destinations*)
- Older adults and individuals with disabilities (*indicate target population*) will report increased ability to reach needed services, demonstrated by improved self-reported access in rider surveys.
- Rural residents will experience increased access to specialty care, demonstrated by more long-distance medical trips completed through coordinated transportation and self-reported satisfaction in rider surveys. (*define long-distance trips*)

**Common indicators:** Completed trips, trip logs by destination type, rider surveys, partner-reported access improvements.

### 2. Increased awareness of available transportation options

These reflect outcomes such as increased use of mobility apps, increased calls for information, and improved understanding of available services after outreach or travel training.

#### Examples:

- New Mobility Manager's engagement with older adults in 4 senior apartment buildings will lead to an increase of awareness (*noted by survey*) of NEMT transportation options, resulting in an increase in NEMT trips booked with our service. (*track rider addresses*)
- Target populations will demonstrate increased awareness of available transportation options, shown by improved scores on pre/post knowledge surveys.
- Community members will show increased awareness of how to schedule rides, demonstrated by more (*% increase*) calls, app uses, or online bookings.
- Riders will report increased understanding of eligibility, service hours, and trip types, demonstrated by survey responses or reduced information-seeking calls.
- Caregivers and case managers will demonstrate increased awareness of transportation resources, shown by increased referrals or correct use of booking tools.

**Common indicators:** Pre/post surveys, app usage data, call center logs, outreach engagement metrics.

### 3. Increased transportation coordination for the organization's target population

These reflect outcomes such as new referral pathways, shared scheduling systems, new coordination agreements, and improved communication between transit and partners.

#### Examples:

- Coordination between transportation providers and healthcare/social service partners will increase, demonstrated by more *(include number or % increase)* coordinated referrals or shared scheduling processes.
- Cross-agency communication will improve, demonstrated by regular coordination meetings *(include #)* and documented protocols for trip scheduling or data sharing.
- Partner organizations will demonstrate increased alignment in serving the target population, shown by new or updated MOUs, workflows, or integrated technology systems.
- The community will benefit from increased coordination, demonstrated by reduced duplication of services or more efficient routing across providers. *(need way to track these indicators)*

**Common indicators used in ICAM projects:** Number of partner meetings, referrals, shared systems implemented, agreements signed, coordination protocols adopted.

### 4. Expansion of current services

These reflect outcomes such as expanded service hours, new trip types, new geographic coverage, new vehicles, and new technology platforms.

#### Examples:

- Transportation services will expand for the target population *(define)*, demonstrated by an increase of 20 weekly service hours, the addition of Saturday service, and the inclusion of three new rural communities in the service area.
- Riders will experience expanded trip options, demonstrated by new trip purposes added *(specify food access, social services, behavioral health, etc.)*.
- The four new vehicles resulted in an expansion of services as evidenced by an 50% increase in capacity and a 30% increase in older adults utilizing on-demand transportation in the targeted community compared to the year before implementation.
- Community members will benefit from expanded mobility options, demonstrated by a 25% increased ridership in newly added service areas or times.

**Common indicators:** Service hours and zones, trip types, new vehicles deployed, ridership in expanded areas or during expanded service hours.

## 5. Decreased number of missed community services and/or appointments

These reflect outcomes such as reduced missed medical appointments, fewer no-shows, and improved appointment adherence due to transportation support.

### **Examples:**

- Riders in target population (*specify*) will miss fewer medical appointments, demonstrated by a reduction in missed or cancelled appointments at ABC Clinic.
- Target population will experience fewer missed social service or behavioral health appointments, demonstrated by partner-reported reductions in no-shows (*% change*).
- Patients (*specify*) will demonstrate improved appointment adherence, shown by increased on-time arrivals for scheduled care at ABC Clinic.
- Healthcare partners (*specify which ones*) will report fewer transportation-related disruptions, demonstrated by X% reduction of same-day cancellations.

**Common indicators:** Missed appointment logs, no-show rates, partner reports, rider self-report.