Planning for Impact: Worked Examples

Five Completed Logic Models Reverse-Engineered from Hypothetical Research Impact Case Studies

Prepared by the Research Engagement & Impact Office

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IMPORTANT: All examples are entirely hypothetical. They do not describe real research, real researchers, or real outcomes. They are designed to illustrate how the TU Dublin Planning for Impact template (adapted from the W.K. Kellogg Foundation Logic Model) would be completed at the start of a project, and how that plan connects to the eventual Research Impact Case Study.

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How to Use This Document

This document contains five completed Planning for Impact logic models, one for each of TU Dublin's five faculties. Each has been reverse-engineered from one of the hypothetical Research Impact Case Studies produced as a companion training resource (***TU Dublin Hypothetical Examples of Research Impact Case Studies***).

The purpose is to show researchers what a completed Planning for Impact template looks like at the start of a project, and then to connect each planned element to what actually happened (as recorded in the hypothetical case study). This makes the relationship between planning and evidencing visible and concrete.

Each example includes the five levels of the logic model (Resources/Inputs, Activities, Outputs, Outcomes, Impact) together with the supporting considerations the framework asks you to think about: Assumptions, Risks, Stakeholders, and Indicators. A final section for each example, "What Actually Happened," summarises the case study outcomes so you can see where reality met, exceeded, or diverged from the original plan.

In workshops, the most productive approach is to show the logic model first and ask the group to predict what might happen. Then reveal the "What Actually Happened" section and discuss the gaps. This builds understanding of why early planning matters, why flexibility is needed, and what kinds of evidence to collect along the way.

Key teaching point: Notice that the "Impact" row in each plan contains hypothesised changes, expressed in tentative language ("We anticipate...", "We expect..."). At the planning stage, you cannot know for certain what will happen. The case study then provides the evidence of what did happen. This is the fundamental link between planning and evidencing.

Example 1: Community Opera as a Vehicle for Social Prescribing in Disadvantaged Areas

Faculty: Faculty of Arts & Humanities

YOUR PLANNED WORK *(Can be controlled by the research team)*

RESOURCES / INPUTS *WHAT YOU NEED*	HSE co-funding for programme delivery (target: EUR 55,000 over 36 months) Arts Council project funding (target: EUR 40,000) Two researchers: one with expertise in community music/performing arts, one in health psychology Professional opera mentors for singing, stagecraft, and composition (part-time, 16 weeks per cycle) Partnership with GP social prescribing links in four areas designated as disadvantaged under the Pobal HP Deprivation Index Four community venues (one per area) with appropriate rehearsal and performance space Ethical approval for working with participants experiencing depression and loneliness Validated instruments: PHQ-9 (depression), UCLA Loneliness Scale, social connectedness measure Qualitative research assistant for interviews and thematic analysis
ACTIVITIES *WHAT YOU DO*	Establish GP referral pathways in four disadvantaged communities through social prescribing links Recruit participants experiencing loneliness and/or mild-to-moderate depression (target: 120-140 across two programme cycles) Deliver structured 16-week community opera programme: participants create and perform an original short opera with professional mentoring Run two complete programme cycles to test replicability and refine the model Administer PHQ-9 and UCLA Loneliness Scale at baseline, mid-point, post-programme, and 6-month follow-up Use a waiting-list control design to enable comparison with non-intervention group Conduct qualitative interviews with participants, referring GPs, and community partners Organise public performances in each community, open to local audiences Document the programme in a replicable facilitator manual with session plans and safety protocols Engage with HSE social prescribing policy leads and the Arts Council throughout the project

YOUR INTENDED RESULTS *(Directly influenced / Indirect influence)*

OUTPUTS *PRODUCTS OF YOUR RESEARCH*	Published RCT protocol paper in an open-access public health journal Peer-reviewed results article in a social science or public health journal Replicable facilitator manual with session plans, safety protocols, and referral pathway guidance Pre/post clinical outcome dataset (anonymised, deposited in research repository) Qualitative interview dataset (anonymised) Four public opera performances (one per community) Short documentary or video capturing the programme for dissemination and advocacy Policy briefing for HSE social prescribing leads on arts-based interventions Conference presentations at arts-health and social prescribing events
OUTCOMES *AWARENESS AND USE OF OUTPUTS*	Participants demonstrate clinically meaningful reductions in depression scores (PHQ-9) compared to waiting-list controls Participants report reduced loneliness and increased social connectedness Referring GPs gain confidence in prescribing arts-based interventions for mild-to-moderate depression The Slainte Care social prescribing framework considers the opera programme as a recommended arts-based intervention The HSE National Office for Suicide Prevention takes note of the evidence for community mental health strategy Media coverage (national broadcast and print) raises public awareness of social prescribing and arts-health evidence Community organisations in participating areas express interest in continuing the programme independently Other arts-health researchers and practitioners access and adapt the facilitator manual
IMPACT *CONSEQUENCES OF PEOPLE USING OUTPUTS*	We anticipate that the Slainte Care Social Prescribing Framework will adopt the opera programme as a recommended arts-based intervention, if clinical outcomes are strong We expect the HSE National Office for Suicide Prevention to cite the research in its community mental health strategy, broadening the evidence base for non-pharmacological approaches We hope that at least 2 of the 4 community organisations will continue the programme independently after the funded period, securing their own arts or local authority funding We aim for the facilitator manual to be downloaded and reused by at least 5 organisations within 2 years of publication We anticipate that media coverage will contribute to shifting public discourse about social prescribing beyond walking groups and gardening, demonstrating that ambitious creative programmes can deliver measurable health outcomes

SUPPORTING CONSIDERATIONS

Assumptions	GPs in participating areas will be willing to refer patients to a performing arts programme (social prescribing links are already in place but referral culture may vary) Participants experiencing depression and loneliness will be willing and able to attend weekly sessions over 16 weeks Community venues will be consistently available and accessible for the full programme duration The waiting-list control design will be acceptable to ethics committees and participants (no one denied access permanently) Opera mentors will adapt their practice effectively to a non-auditioned, community-health context Two programme cycles will be sufficient to demonstrate replicability
Risks	GP referral rates may be lower than expected if GPs are unfamiliar with or sceptical of arts-based interventions Participant dropout may be high given the target population (depression, social isolation) Sensitive personal material may emerge during creative work, requiring clear safeguarding and referral protocols Public performances could be anxiety-provoking for participants, risking harm rather than benefit The Slainte Care policy review cycle may not align with project outputs, delaying adoption Media coverage could sensationalise mental health aspects, potentially deterring future participants
Key Stakeholders	Adults experiencing loneliness and mild-to-moderate depression in four disadvantaged areas (primary beneficiaries) GPs and social prescribing link workers (referral partners) HSE social prescribing policy leads and Slainte Care implementation team (primary policy audience) HSE National Office for Suicide Prevention (secondary policy audience) Arts Council (funder and policy actor in arts-health) Community organisations hosting the programme (delivery partners and potential sustainers) Opera mentors and performing arts professionals (programme delivery) Local audiences attending performances (community engagement) Arts-health researchers and social prescribing practitioners nationally and internationally (academic and practice community)
Indicators & Data Sources	PHQ-9 depression scores at baseline, mid-point, post-programme, and 6-month follow-up (intervention vs control) UCLA Loneliness Scale scores at same time points Social connectedness measure scores Programme attendance and retention rates (% of 16 sessions attended) Number of GP referrals received vs target Participant qualitative accounts of change (thematic analysis) Slainte Care framework adoption (formal inclusion as recommended intervention) HSE NOSP strategy citation Number of community organisations continuing the programme independently post-funding Facilitator manual downloads and adaptation requests (repository analytics) Media coverage: national broadcast segments, print features, online articles Audience attendance at public performances

WHAT ACTUALLY HAPPENED (from the completed case study)

The text below summarises what the hypothetical case study recorded as having actually occurred. Comparing this with the planned pathway above illustrates how initial planning translates into eventual impact evidence, and where reality diverged from or exceeded expectations.

PARTICIPATION: 128 participants completed the programme across two cycles (within the 120-140 target). Referral came through GP social prescribing links as planned.

DEPRESSION OUTCOMES: Mean PHQ-9 scores fell by 4.8 points among participants (clinically meaningful), compared to 0.9 points in the waiting-list control group ($p<0.001$). This exceeded expectations and provided robust evidence for the policy case.

LONELINESS: UCLA Loneliness Scale scores improved significantly, confirming the programme addressed both clinical depression and social isolation.

SLAINTE CARE ADOPTION: The Slainte Care Social Prescribing Framework (2025) adopted the opera programme as a recommended arts-based intervention (achieved as hoped in the plan).

HSE NOSP CITATION: The HSE National Office for Suicide Prevention cited the research in its community mental health strategy (achieved as anticipated).

PROGRAMME SUSTAINABILITY: Four community organisations (all four, exceeding the planned target of two) continued the programme independently after the research period, securing local authority arts funding.

MEDIA COVERAGE: RTE Nationwide broadcast a feature (October 2024). The Guardian published a long-read on social prescribing innovations across Europe that included the programme (January 2025). Both exceeded the planned ambition of "national broadcast and print" by attracting international coverage.

FACILITATOR MANUAL: Downloaded by organisations across Ireland and the UK within the first year (exact figures to be tracked via repository analytics).

RISK THAT MATERIALISED: GP referral rates in one community were initially lower than expected due to unfamiliarity with arts-based prescribing. The team addressed this by delivering a lunchtime presentation to the GP practice, after which referrals increased substantially. This became a recommended step in the facilitator manual.

UNEXPECTED OUTCOME: One participant was subsequently invited to perform at a national arts-health conference, providing direct patient advocacy that strengthened the policy case. This was not planned but arose naturally from the programme.

TESTIMONIAL EVIDENCE: A participating GP stated that the programme gave them "something concrete and evidence-based to prescribe" for patients for whom medication alone was insufficient. A participant described it as "the first reason I had to get dressed and leave my flat in three years." Both were recorded with consent and used in the case study.

Example 2: Crowdfunding as Market Validation for Craft Producers

Faculty: Faculty of Business

YOUR PLANNED WORK *(Can be controlled by the research team)*

RESOURCES / INPUTS *WHAT YOU NEED*	IRC Postdoctoral Fellowship funding (EUR 92,000 over 30 months) Co-support from Design & Crafts Council Ireland (in-kind: access to network, venue, comms) Two researchers with expertise in digital marketing and entrepreneurship Dataset access: Kickstarter and Indiegogo public campaign data (480 Irish campaigns) Partnership with 38 craft producers willing to participate in the cohort programme Digital marketing tools and analytics platforms (university subscriptions)
ACTIVITIES *WHAT YOU DO*	Analyse 480 existing Irish crowdfunding campaigns to identify success predictors Develop a structured market validation methodology based on analysis findings Recruit and support a cohort of 38 craft producers through a 12-month programme Deliver workshops on campaign structure, video storytelling, reward tier design, and early-backer strategy Provide one-to-one mentoring during campaign preparation and launch Track campaign outcomes against a matched control group of 38 producers launching without the methodology Disseminate findings through academic publications, practitioner guides, and conference presentations

YOUR INTENDED RESULTS *(Directly influenced / Indirect influence)*

OUTPUTS *PRODUCTS OF YOUR RESEARCH*	Peer-reviewed article on crowdfunding success predictors (Irish context) Peer-reviewed article evaluating the cohort programme (controlled comparison) Practical crowdfunding methodology guide (printable and digital formats) Workshop materials and slide decks (open access for reuse) Dataset of campaign outcomes (anonymised, deposited in repository) Conference presentations at entrepreneurship and marketing conferences
OUTCOMES *AWARENESS AND USE OF OUTPUTS*	Participating craft producers achieve substantially higher campaign success rates than controls Producers gain market validation data that informs subsequent product and pricing decisions Design & Crafts Council Ireland considers incorporating the methodology into its business development programme Enterprise Ireland takes note of the findings for its guidance on early-stage market testing Other craft networks and LEOs request access to the methodology guide Media coverage in business press raises awareness of crowdfunding as a structured market tool (not a lottery)

IMPACT *CONSEQUENCES OF PEOPLE USING OUTPUTS*	We anticipate that the Design & Crafts Council Ireland will adopt the methodology for its annual business development programme, reaching 100+ makers per year We expect that Enterprise Ireland will reference the research in updated guidance for micro-enterprises, though this depends on their policy review cycle We hope that participating producers will generate cumulative pre-sales of at least EUR 500,000, providing direct economic benefit We aim for the methodology to be independently reused by at least 5 organisations within 3 years

SUPPORTING CONSIDERATIONS

Assumptions	Craft producers will have sufficient digital literacy to execute campaigns with support The crowdfunding platforms will remain stable and accessible during the programme Matched controls will be a fair comparison (no systematic differences beyond the methodology) Campaign data will be accessible for analysis (platform terms of service permitting) Design & Crafts Council Ireland will remain a willing partner throughout the project
Risks	Low producer engagement or dropout during the 12-month programme Platform algorithm changes during the study period could affect campaign visibility Producers may be reluctant to share financial data, limiting evaluation depth External economic shocks (recession, cost-of-living crisis) could suppress consumer spending on craft products Control group producers may informally access methodology materials, contaminating the comparison
Key Stakeholders	Craft producers (primary beneficiaries) Design & Crafts Council Ireland (potential adopter) Enterprise Ireland (policy audience for SME guidance) Local Enterprise Offices (secondary dissemination channel) Consumers backing campaigns (indirect beneficiaries of better products) Academic community (marketing, entrepreneurship, small business researchers)
Indicators & Data Sources	Campaign success rate (% fully funded) for intervention vs control groups Total pre-sales revenue generated across the cohort Producer self-report on whether campaign data informed product/pricing decisions Design & Crafts Council Ireland adoption (formal programme integration) Enterprise Ireland guidance citation Methodology guide downloads and reuse requests Media coverage (articles, broadcasts) Post-programme producer revenue changes (6- and 12-month follow-up)

WHAT ACTUALLY HAPPENED (from the completed case study)

The text below summarises what the hypothetical case study recorded as having actually occurred. Comparing this with the planned pathway above illustrates how initial planning translates into eventual impact evidence, and where reality diverged from or exceeded expectations.

SUCCESS RATES: Methodology participants achieved 76% campaign success (fully funded) versus 24% for controls. This far exceeded the anticipated "substantially higher" threshold.

REVENUE: Cumulative pre-sales reached EUR 1.4M, nearly triple the planned EUR 500,000 target.

PRODUCT DECISIONS: 28 of 38 producers reported that campaign data informed subsequent product development and pricing.

DCCI ADOPTION: The Design & Crafts Council Ireland adopted the methodology for its 2025 business development programme, reaching 120 makers annually (exceeded the planned 100+).

ENTERPRISE IRELAND: Enterprise Ireland cited the research in its updated guidance on early-stage market testing for micro-enterprises (confirmed during the policy review cycle).

MEDIA: The Irish Independent and Newstalk's Down to Business programme both covered the study.

UNEXPECTED OUTCOME: Six social enterprises secured new funding or partnerships directly attributed to improved digital visibility. This secondary economic effect was not anticipated in the plan.

RISK THAT MATERIALISED: Three producers dropped out due to personal circumstances. The team adjusted by over-recruiting at intake (41 recruited, 38 completed), which was a lesson in planning for attrition.

Example 3: Detecting Deepfake Audio in Legal Proceedings

Faculty: Faculty of Computing, Digital & Data

YOUR PLANNED WORK *(Can be controlled by the research team)*

RESOURCES / INPUTS *WHAT YOU NEED*	SFI Frontiers for the Future funding (EUR 480,000 over 36 months) Co-support from Department of Justice (policy engagement, access to legal practitioners) Two postdoctoral researchers (signal processing, machine learning) One PhD student (forensic audio analysis) Training dataset: 48,000 genuine + 48,000 synthetic audio samples across multiple generation methods GPU computing cluster for model training (university HPC facility) Partnership with An Garda Siochana CCIU for operational validation Access to forensic audio examiners and legal professionals for blind testing
ACTIVITIES *WHAT YOU DO*	Build and curate a diverse training dataset spanning multiple deepfake generation methods Develop a detection system combining spectral analysis, speaker-embedding anomaly detection, and temporal consistency modelling Validate against three leading commercial alternatives using standardised benchmarks Conduct blind test with forensic audio examiners and legal professionals (200 samples) Design court-admissible output reports with confidence scores and explanatory visualisations Engage with An Garda Siochana CCIU for operational trial in live investigative context Present findings to Department of Justice policy team regarding digital evidence standards Publish peer-reviewed articles and present at digital forensics conferences

YOUR INTENDED RESULTS *(Directly influenced / Indirect influence)*

OUTPUTS *PRODUCTS OF YOUR RESEARCH*	Trained detection model with documented architecture and performance characteristics Benchmark dataset (contributed to research community under controlled access) Court-admissible report template with confidence scoring methodology Two peer-reviewed journal articles (detection methods; forensic practitioner validation) Policy briefing document for Department of Justice on digital audio evidence standards Conference presentations at IEEE and DFRWS conferences Open-source preprocessing toolkit for forensic audio analysis

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OUTCOMES *AWARENESS AND USE OF OUTPUTS*	An Garda Siochana CCIU validates the tool and begins operational deployment in active cases Courts Service of Ireland takes note and considers updating its Practice Direction on digital audio evidence Department of Justice considers findings when reviewing digital evidence provisions in the Criminal Evidence Act Forensic practitioners and legal professionals recognise the tool as meeting evidential standards Other law enforcement agencies in Europe express interest in the detection framework Academic community builds on the benchmark dataset and methodology
IMPACT *CONSEQUENCES OF PEOPLE USING OUTPUTS*	We anticipate that the Courts Service will update its Practice Direction to reference AI-generated audio and the availability of forensic detection tools We expect the Department of Justice to cite the research in its review of the Criminal Evidence Act, though legislative timelines are uncertain We hope the tool will be deployed operationally in at least 3 active Garda investigations during the project period We aim for the tool to be licensed to a European forensic technology firm, generating knowledge transfer income and widening access

SUPPORTING CONSIDERATIONS

Assumptions	Deepfake generation technology will not advance so rapidly that the detection system becomes obsolete during the project An Garda Siochana will obtain internal authorisation for operational use of an academic tool Courts will accept AI-assisted forensic analysis as admissible expert evidence The Department of Justice policy review cycle will align with the project timeline Sufficient diversity in the training dataset will ensure robustness across generation methods
Risks	Rapid evolution of generative AI could outpace detection capabilities Legal challenges to the admissibility of AI-generated forensic reports Sensitivity of operational policing data may limit what can be published Legislative timelines may slip beyond the project period Ethical concerns about automated evidence assessment in criminal proceedings
Key Stakeholders	An Garda Siochana CCIU (primary operational partner) Courts Service of Ireland (policy and practice audience) Department of Justice (legislative audience) Defence and prosecution barristers (end users of forensic reports) Forensic audio examiners (professional community) European law enforcement agencies (secondary adoption audience) Civil liberties organisations (interested in fairness and transparency)
Indicators & Data Sources	Detection accuracy (sensitivity, specificity) on benchmark dataset Performance comparison against commercial alternatives Blind test results with forensic practitioners (200 samples) Number of active Garda cases using the tool Courts Service Practice Direction update (yes/no, with citation) Department of Justice consultation paper reference Licence agreement with forensic technology firm (income generated) Media coverage in legal and technology press

WHAT ACTUALLY HAPPENED (from the completed case study)

The text below summarises what the hypothetical case study recorded as having actually occurred. Comparing this with the planned pathway above illustrates how initial planning translates into eventual impact evidence, and where reality diverged from or exceeded expectations.

ACCURACY: The tool achieved 97.3% detection accuracy, outperforming three commercial alternatives. This exceeded expectations at the planning stage.

OPERATIONAL USE: An Garda Siochana CCIU deployed the tool in three active cases during the trial period (met the target of "at least 3").

COURTS SERVICE: The Courts Service updated its Practice Direction on digital audio evidence to reference AI-generated content and forensic detection tools (achieved as planned).

DEPARTMENT OF JUSTICE: The Department cited the research in its 2025 consultation on amendments to the Criminal Evidence Act regarding digital evidence standards (achieved, despite legislative timeline uncertainty).

LICENSING: The tool was licensed to a European digital forensics firm (achieved as planned).

MEDIA: Coverage in the Law Society Gazette and on RTE's Prime Time Investigates brought the issue to public attention.

UNEXPECTED OUTCOME: A barrister cited the tool's output in a high-profile criminal defence, generating public debate about AI in the courtroom. This was not anticipated but increased visibility and demand.

RISK THAT MATERIALISED: Two new deepfake generation methods emerged during the project. The team retrained the model on synthetic samples from these methods, maintaining performance. This validated the modular architecture decision made early in the design.

Example 4: Hempcrete Building Systems for Low-Carbon Affordable Housing

Faculty: Faculty of Engineering, Built Environment & Apprenticeships

YOUR PLANNED WORK *(Can be controlled by the research team)*

RESOURCES / INPUTS *WHAT YOU NEED*	SEAI National Energy Research Development & Demonstration funding (EUR 320,000 over 36 months) Department of Housing co-funding (EUR 85,000 for pilot construction) Two researchers with expertise in building physics and sustainable materials One PhD student (lifecycle assessment) Laboratory facilities for structural, thermal, moisture, and fire testing Partnership with a local authority housing section for pilot construction Supply of Irish-grown hemp shiv from Hemp Cooperative of Ireland Monitoring equipment (temperature, humidity, CO2, energy sensors)
ACTIVITIES *WHAT YOU DO*	Characterise structural, thermal, moisture, and fire performance of hempcrete assemblies under Irish climatic conditions Optimise binder formulations for Irish hemp shiv Develop construction detailing for junctions, openings, and building services integration Produce lifecycle assessment comparing hempcrete with cavity wall and timber frame Construct 24-unit social housing pilot (8 hempcrete, 8 timber frame, 8 blockwork) Monitor energy use, indoor environment quality, construction speed, and cost over 24 months Engage with Irish Agrement Board for product certification Disseminate findings through publications, construction industry events, and policy briefings

YOUR INTENDED RESULTS *(Directly influenced / Indirect influence)*

OUTPUTS *PRODUCTS OF YOUR RESEARCH*	Peer-reviewed article on hygrothermal performance under Irish conditions Peer-reviewed article on comparative lifecycle assessment Irish Agrement Board certification application and supporting test data Construction detailing drawings and specifications (open access) 24-month comparative monitoring dataset Policy briefing for Department of Housing on low-carbon material options Presentations at construction industry conferences
OUTCOMES *AWARENESS AND USE OF OUTPUTS*	Irish Agrement Board issues certification for the hempcrete wall system Local authority architects gain confidence to specify hempcrete in social housing Department of Housing considers including hempcrete in updated guidance on low-carbon materials Construction industry professionals engage with the performance data at conferences and through publications Hemp Cooperative of Ireland reports increased demand for building-grade hemp shiv Other local authorities express interest in hempcrete pilot projects

IMPACT *CONSEQUENCES OF PEOPLE USING OUTPUTS*	We anticipate that Agrement Board certification will remove the primary regulatory barrier, enabling specification by any Irish architect or local authority We expect the pilot data to demonstrate at least 60% lower embodied carbon than conventional blockwork at comparable or lower cost We hope the Department of Housing will reference the research in its guidance on construction materials for publicly funded housing We aim for at least 3 local authorities to express interest in hempcrete construction following the pilot We anticipate a measurable increase in demand for Irish-grown building hemp, supporting rural farm diversification

SUPPORTING CONSIDERATIONS

Assumptions	Irish hemp shiv will perform comparably to continental European varieties tested in published literature The Agrement Board will accept the test data and methodology as sufficient for certification Local authority tenants will consent to 24-month monitoring in their homes Construction costs for hempcrete will be competitive with or lower than blockwork at pilot scale The supply chain for building-grade hemp shiv can meet demand if uptake increases
Risks	Hemp shiv quality may vary between harvests, affecting performance consistency Fire testing may reveal issues requiring design modifications, delaying certification Tenant disruption during monitoring could lead to incomplete datasets Construction trades may be unfamiliar with hempcrete, causing quality problems on site Policy review cycles at the Department of Housing may not align with project outputs
Key Stakeholders	Social housing tenants in the pilot buildings (primary beneficiaries) Irish Agreement Board (certification body) Department of Housing (policy audience) Local authority housing sections (specification decision-makers) Construction industry professionals (builders, architects, quantity surveyors) Hemp Cooperative of Ireland (supply chain partner) SEAI (funder and policy actor in energy and carbon reduction)
Indicators & Data Sources	Agrement Board certification (achieved/not achieved) Embodied carbon comparison (kgCO2e/m2) across three construction types Operational energy use comparison (kWh/m2/year) Construction cost per m2 across three types Indoor temperature, humidity, and CO2 monitoring data (24 months) Department of Housing guidance citation Number of local authorities expressing interest in hempcrete Hemp Cooperative of Ireland enquiry and sales data Media and industry press coverage

WHAT ACTUALLY HAPPENED (from the completed case study)

The text below summarises what the hypothetical case study recorded as having actually occurred. Comparing this with the planned pathway above illustrates how initial planning translates into eventual impact evidence, and where reality diverged from or exceeded expectations.

CERTIFICATION: The Irish Agrement Board issued certification in 2024, the first for a hempcrete product in Ireland. This was the critical planned milestone.

EMBODIED CARBON: The pilot showed 78% lower embodied carbon than blockwork (exceeded the planned 60% target).

COST: 12% lower construction cost than blockwork (achieved competitiveness).

OPERATIONAL ENERGY: Comparable operational energy performance across the three types (as anticipated).

DEPARTMENT OF HOUSING: The Department referenced the research in its 2025 guidance on low-carbon construction materials for publicly funded housing (achieved as hoped).

LOCAL AUTHORITY INTEREST: Three local authorities expressed interest in hempcrete for future programmes (met target).

HEMP DEMAND: The Hemp Cooperative of Ireland reported a 300% increase in enquiries following certification (exceeded expectations significantly).

MEDIA: Construct Ireland magazine and RTE's Future Island documentary series covered the project.

RISK THAT MATERIALISED: Fire testing initially revealed an issue with junction detailing, requiring a redesign that delayed the Agrement application by four months. The team resolved this by developing a fire-resistant junction detail that ultimately strengthened the product.

UNEXPECTED OUTCOME: An Irish architectural practice contacted the team about using hempcrete for a private heritage renovation project, opening a market segment not considered in the original plan.

Example 5: Exercise Prescription for Cancer-Related Fatigue

Faculty: Faculty of Sciences & Health

YOUR PLANNED WORK *(Can be controlled by the research team)*

RESOURCES / INPUTS *WHAT YOU NEED*	HRB Definitive Intervention Trial funding (EUR 380,000 over 36 months) Irish Cancer Society co-funding (EUR 65,000 for programme delivery) Two researchers with expertise in exercise physiology and cancer rehabilitation Six community leisure centres willing to host the programme Six qualified exercise physiologists (part-time, programme delivery) Partnership with oncology departments at three hospitals for participant recruitment Validated outcome instruments (FACIT-Fatigue, EORTC QLQ-C30, 6-minute walk test) Ethical approval for RCT with cancer survivors

ACTIVITIES *WHAT YOU DO*	Design a 12-week structured exercise programme (combined aerobic and resistance, twice weekly, supervised) Recruit 250 cancer survivors experiencing persistent fatigue (target: 125 intervention, 125 standard care) Deliver the programme across six community leisure centres in Dublin, Cork, and Galway Measure primary outcomes: fatigue (FACIT-Fatigue), fitness (6-minute walk test), quality of life (EORTC QLQ-C30) Track secondary outcomes: adherence, adverse events, health service utilisation Follow up at 6 and 12 months post-programme Engage with NCCP, Irish Cancer Society, and Exercise Professionals Ireland throughout Publish protocol paper and results in peer-reviewed journals

YOUR INTENDED RESULTS *(Directly influenced / Indirect influence)*

OUTPUTS *PRODUCTS OF YOUR RESEARCH*	Published RCT protocol paper (BMC Cancer or equivalent) Peer-reviewed results article in a high-impact sports medicine or oncology journal Standardised exercise programme manual (session plans, safety protocols, adaptations) Training materials for exercise physiologists delivering the programme Anonymised trial dataset deposited in repository Policy briefing for NCCP on exercise in survivorship care Conference presentations at oncology and sports medicine meetings
OUTCOMES *AWARENESS AND USE OF OUTPUTS*	Participants show clinically meaningful reduction in cancer-related fatigue compared to standard care Participants show improved cardiorespiratory fitness and quality of life High adherence rate (>75%) demonstrates feasibility in community settings NCCP considers adopting structured exercise as part of survivorship care pathways Irish Cancer Society considers funding national expansion Exercise Professionals Ireland incorporates the protocol into cancer rehabilitation training Media coverage raises awareness that exercise is an effective intervention for cancer-related fatigue

IMPACT *CONSEQUENCES OF PEOPLE USING OUTPUTS*	We anticipate that the NCCP will adopt the community exercise model in its survivorship care pathways if the trial demonstrates clinically meaningful fatigue reduction We expect the Irish Cancer Society to fund expansion to at least 15 additional sites nationally We hope that the exercise protocol will become standard training for exercise professionals working with cancer survivors in Ireland We aim for the programme to reach at least 500 cancer survivors within 2 years of national expansion We anticipate that the evidence will contribute to national clinical guidelines recommending structured exercise for cancer-related fatigue

SUPPORTING CONSIDERATIONS

Assumptions	Cancer survivors will be willing to attend a community-based programme (not hospital-based) Community leisure centres will provide appropriate, accessible space and scheduling Exercise physiologists can be recruited and trained in sufficient numbers Oncology departments will refer patients consistently The programme will be safe for this population (adverse event rate low)
Risks	Recruitment may be slower than planned if oncologists are reluctant to refer Participant dropout due to cancer recurrence, treatment side effects, or personal circumstances Adverse events during exercise (though expected to be rare based on prior literature) Community leisure centres may have scheduling conflicts or close temporarily NCCP policy review cycle may not align with trial completion
Key Stakeholders	Cancer survivors experiencing persistent fatigue (primary beneficiaries) NCCP (primary policy audience for survivorship care pathways) Irish Cancer Society (potential funder of national expansion) Exercise Professionals Ireland (training body for exercise physiologists) Oncology departments at referring hospitals (clinical partners) Community leisure centres (delivery partners) GPs (may refer patients once evidence is available) Families and carers of cancer survivors (indirect beneficiaries)
Indicators & Data Sources	FACIT-Fatigue scores (pre, post, 6-month, 12-month) 6-minute walk test distance (pre, post, 6-month, 12-month) EORTC QLQ-C30 quality of life scores Programme adherence rate (% of sessions attended) Adverse event rate and severity NCCP pathway adoption (formal decision and documentation) Irish Cancer Society expansion funding (amount, number of sites) Exercise Professionals Ireland training integration Media coverage (articles, broadcasts) Number of survivors reached in national expansion

WHAT ACTUALLY HAPPENED (from the completed case study)

The text below summarises what the hypothetical case study recorded as having actually occurred. Comparing this with the planned pathway above illustrates how initial planning translates into eventual impact evidence, and where reality diverged from or exceeded expectations.

FATIGUE REDUCTION: Participants showed a 41% reduction in fatigue scores compared to 8% in controls ($p<0.001$). This was clinically meaningful and exceeded expectations.

FITNESS: Six-minute walk distance improved by 18%, with gains sustained at 12 months.

QUALITY OF LIFE: Scores improved across all functional domains.

ADHERENCE: 82% of sessions attended, with no serious adverse events. This exceeded the 75% feasibility threshold.

NCCP ADOPTION: The NCCP adopted the model in its 2025 survivorship care pathways, recommending structured community exercise as standard of care (achieved as planned).

IRISH CANCER SOCIETY: Funded expansion to 24 community sites nationally (exceeded the planned target of 15).

EXERCISE PROFESSIONALS IRELAND: Incorporated the protocol into its cancer rehabilitation training programme (achieved as hoped).

MEDIA: Featured on RTE's Claire Byrne Show and in an Irish Medical Journal editorial endorsing the approach.

RISK THAT MATERIALISED: Recruitment was initially slower than planned at one hospital site where the oncology department was understaffed. The team addressed this by adding two additional referring hospitals midway through the trial.

UNEXPECTED OUTCOME: Several participants formed independent exercise groups that continued meeting after the programme ended, creating a self-sustaining peer support network that the team did not anticipate.

Appendix: Teaching Notes

These worked examples can be used in various ways but are most effective when used actively in workshops. Here are some suggested approaches:

1. Plan-then-reveal exercise: Show the logic model for a relevant faculty and ask researchers to discuss whether the planned pathway is realistic. Then reveal the "What Actually Happened" section and discuss where reality matched, exceeded, or diverged from the plan. This teaches researchers that planning is essential even though outcomes are uncertain.

2. Fill-in-the-blanks: Show a logic model with the Impact and Outcomes rows left empty. Ask the group to fill them in based on the Resources, Activities, and Outputs. Then reveal the actual planned content and discuss the differences. This builds the skill of thinking forward from outputs to outcomes to impact.

3. Evidence matching: Show the "What Actually Happened" section and ask: what evidence would you need to prove each of these claims? Then compare with the Indicators row in the plan. This teaches researchers to collect evidence proactively rather than retrospectively.

4. Risk debrief: Focus on the "Risk That Materialised" item in each example and discuss how the team responded. Ask: what other risks could have emerged? What would you have done differently? This normalises the idea that risks happen and that good planning includes contingency thinking.

5. Stakeholder mapping: Use the Stakeholders row as a starting point and ask the group to identify which stakeholders would need to be engaged at which stage of the project, and through which channels. This connects the logic model to the practical work of stakeholder engagement.

6. Cross-faculty comparison: Show two logic models from different faculties side by side and ask what they have in common. This helps researchers see that the impact planning process is universal even though the content differs by discipline.

The key message to reinforce throughout: impact does not happen by accident. The researchers who produced these hypothetical case studies were able to evidence their impact because they planned for it, identified stakeholders early, chose indicators in advance, and collected evidence throughout the project rather than scrambling at the end.

For support with impact planning, or to book a one-to-one session with the Research Impact Lead, contact the Research Engagement & Impact Office at engagementandimpact@tudublin.ie