

## **DIVISION OF BEHAVIORAL HEALTH**

### **FY14 Treatment and Recovery Grant Programs**

#### **Logic Model Resource Guide**

##### **What is a Logic Model?**

The Logic Model is useful in planning, implementation, evaluation, and communication. It can be equally useful for describing group work, team work, community-based collaboratives, and other complex organizational processes seeking to promote results-based performance. The Logic Model is a graphic tool that displays the sequence of actions that describe what a program is and will do – how investments and activities link to results. It is:

- Practical and realistic. The Logic Model prevents planners from proposing activities than they cannot reasonably accomplish or outcomes over which they have no control;
- Data-focused. It helps programs identify data they can use to evaluate success accurately and reliably;
- Oriented towards measurable outcomes. It helps staff see whether what they are doing is having a positive impact on the individuals and the communities they serve;
- A logical and coherent picture of an organization's plan that is easily communicated with staff, Board members, and funding entities.

A program Logic Model is an evaluation tool. Foraker training uses the following definition of evaluation: "Evaluation is the systematic assessment of the operation and/or outcomes of a program or policy, compared to a set of explicit or implicit standards, as a means of contributing to the improvement of the program or policy" (Weiss, 1998). Building a Logic Model forces you to think about program evaluation and measurable outcomes right from the beginning. Instead of proposing a lot of activities and calling it good, the Logic Model requires you to answer these questions:

- How can I use the Logic Model to make improvements in my clinical outcomes or business management?
- Can I identify a particular goal that I want to accomplish?
- What would I need to produce, deliver, or complete to meet the goal?
- What resources do I have (or need to find) to conduct these activities?
- How will I know that I accomplished the goal? What outcomes could I measure that would show progress?

The advantage of the Logic Model is that the manager has considerable control over choosing goals, activities, outputs, and outcomes that fit the agency. Additionally, a completed Logic Model chart makes an evaluation plan easy to develop: the outcomes have already been thought out and only indicators and data collection strategies need to be identified.

## **Definitions**

The Logic Model uses terms such as “outputs” which may not be familiar. It also uses familiar words, such as “outcomes,” in a specific way that it is important to understand. The following definitions will assist you to complete your FY14 Logic Model.

**Identified Challenge or Problem:** The identified challenge or problem is a description of an ineffective or inefficient administrative or clinical process that fails to have the desired effect or produce the desired result.

**Resources:** Resources are the means or assets you have (or will need) to achieve the outcomes necessary to appropriately effect the identified problem. These resources may include (but are not limited to) grant funding, a community organization, potential collaborating partners, existing organizational or interpersonal networks, agency staff, volunteers, as well as time, facilities, equipment, and supplies.

**Activities:** Activities are what you will do (the actual acts, processes, proceedings, measures, or events) to reach or accomplish your goal. Activities and outputs are what will be produced by the resources deployed and may include, but are not limited to, products (materials, policies and procedures), services, and infrastructure outputs (communications, transportation).

**Outputs:** Outputs are the products of your activities, not the activities themselves. Outputs include (but are not limited to) documents that you will produce, the number of patients served, the number of participants trained, events coordinated, etc.

**Outcomes:** Outcomes are the changes that will occur in behavior, beliefs, attitudes or knowledge as a result of your activities and outputs. An outcome should start with a “measurement” word, such as “increase,” “decrease,” “reduce” “expand” or “improve.” You can propose short-term outcomes (that will happen within 3-6 months) and longer term outcomes (that will take 9-12 months or more to achieve).

**Goal:** A goal aims to achieve organizational, community and / or system level changes as a result of the activities identified in the logic model.

**Evaluation Plan:** In an evaluation plan you must be sure to identify the performance indicators that will measure progress on your outcomes (i.e., how will you know you were successful in reaching the various outcomes?). For example, would you compare FY13 outcome measures to FY12 measures to show improvement? Think about the data collection strategies you will need to measure your performance. It is best to use data you can easily obtain, so as not to make the evaluation process too burdensome.

### **FY14 Logic Model Requirements for CBHTR grant programs:**

In the FY14 CBHTR grant application, applicants are required to submit one Logic Model that addresses their overall CBHTR proposal.

Goals and Outcomes should incorporate those identified in the Introduction and Program Goals and Anticipated Outcomes section of this RFP. Activities should include the particular selected services identified in the Program Services/Activities section that the applicant proposes to deliver. Indicators must be identified and, at minimum, should include the following measures, all of which are tracked through AKAIMS Minimal Data Set and Client Status Review reports available on AKAIMS Report Manager.

- Average number of days from screening to first treatment service.
- Clients delivered treatment services within 30 days of program enrollment.
- Enrolled clients not served within 135 days.
- Client Improvement in Life Domains over Time
- Client Improvement in Quality of Life Domains
- Clients Perception of Quality of Services Received
  - I was treated with respect
  - I was able to get all the services I needed.
- Clients Perception of Quality of Services Received:
- The services improved the quality of my life.

**Organizations must continually monitor progress and *update* their Logic Model *quarterly* to show continuous quality improvement.**

Although multiple problems or challenges may be addressed, each problem/challenge requires its own Logic Model Worksheet.

**A sample Logic Model is attached below (pages 4 – 6).**

**Please use the Logic Model and the Logic Model Evaluation Plan for grant submission.**



## SAMPLE LOGIC MODEL

**Grantee Name:** Counseling Center of Alaska, Inc.

**Grant Number:** 602-14-007

**Identified Challenge:** A lack of local crisis respite beds to help reduce the number of residents experiencing a psychiatric emergency who must be transferred out of town.

Resources	Activities	Outputs	Outcomes	Goal
<p>Resources are the means or assets you have (or will need) to achieve the outcomes necessary to appropriately effect the identified problem. These resources may include grant funding, a community organization, potential collaborating partners, existing organizational or interpersonal networks, agency staff, volunteers, as well as time, facilities, equipment, and supplies.</p> <p style="text-align: center;">---</p> <p><i>In order to accomplish our set of activities we will need the following resources:</i></p>	<p>Activities are what you will do (the actual acts, processes, proceedings, measures, or events) to reach or accomplish your goal. Activities and outputs are what will be produced by the resources deployed and may include products (materials, policies and procedures), services, and infrastructure outputs (communications, transportation).</p> <p style="text-align: center;">---</p> <p><i>In order to address our identified challenge or problem we will accomplish the following activities:</i></p>	<p>Outputs are the products of your activities, not the activities themselves. Outputs include documents that you will produce, the number of patients served, the number of participants trained, events coordinated, etc..</p> <p style="text-align: center;">---</p> <p><i>We expect that once accomplished our activities will produce the following evidence or service delivery changes:</i></p>	<p>Outcomes are the changes that will occur in behavior, beliefs, attitudes or knowledge as a result of your activities and outputs. An outcome should start with a “measurement” word, such as “increase,” “decrease,” “reduce” “expand” or “improve.” You can propose short-term outcomes (within 3-6 months) and longer term outcomes (9-12 months or more to achieve).</p> <p style="text-align: center;">---</p> <p><i>We expect that if accomplished our activities will lead to the following changes in 3 to 6 months (or 9 to 12 months):</i></p>	<p>A goal aims to achieve organizational, community and / or system level changes as a result of the activities identified in the logic model.</p> <p style="text-align: center;">---</p> <p><i>We expect that if accomplished our activities will lead to the following change(s):</i></p>
<p>BH center psych emergency services staff.</p> <p>24/7 staffed group home and staff.</p> <p>Hospital ED manager (who wants to work with BH agency to improve the community’s emergency response system.</p> <p>Hospital ED nursing and physician staff</p>	<p>BH center director works with center and group home staff to achieve buy in on concept of providing local crisis respite and stabilization services.</p> <p>Work with State Licensing to designate one group home bed for crisis respite care.</p> <p>Cross train case managers on how to provide recipient support services (RSS) for monitoring and supervision of crisis clients.</p>	<p>New policies and procedures for emergency outreach program.</p> <p>One crisis respite bed made available.</p> <p>New MOA with hospital signed.</p> <p>Training for ER docs and RN on psychiatric emergencies.</p>	<p>Increased numbers of emergency clients are stabilized locally.</p> <p>Reduced number of transports to Bartlett Regional Hospital MH Unit or API</p>	<p>Every resident of the local community/region with a behavioral health emergency will receive prompt, coordinated and appropriate care.</p>

Resources	Activities	Outputs	Outcomes	Goal
<p>Examples of emergency protocols from hospital, BH center, P &amp; P's from agency providing local crisis respite services</p> <p>Community support from police, primary care clinic, other human services agencies, and local courts for better way to handle emergencies locally.</p>	<p>Develop protocol collaboratively with hospital ED, so that psychiatric emergency cases are quickly screened and triaged.</p> <p>Develop training module for ED staff.</p>	<p>Case managers and group home staff provide team supervision and monitoring to at least two crisis respite patients by March 2013.</p>		

## SAMPLE

### LOGIC MODEL EVALUATION PLAN

Instructions: Use the outcomes identified in your Logic Model to complete the left-hand column.  
Indicators are the measures which indicate whether you have been successful.

Outcomes	Indicators	Data Collection Strategy(ies)
Increased numbers of emergency clients are stabilized locally.	No. of clients referred to and stabilized in the crisis respite bed in the local group (target result is at least two by the end of March, 2013)	Group home log
Reduced number of transports to Bartlett Regional Hospital MH Unit or API	25% fewer Securitas transports of psychiatric emergency patients from the local community to Bartlett or API.	Data from the Division of Behavioral Health