**Logic Model Instructions**

A Logic Model is a graphic depiction used explain the connection between target population, project activities, and intended effects.

Fill out this Logic Model template to address the following areas: Target Population, Theory of Change, Activities, Outcomes, and Impact. Address each section thoroughly.

**Questions to consider while developing your logic model:**

Target Population

* *Is this population already being served by a separate organization?*
* *Why is this population in need?*

Program Theory

* *What approach will we use to accomplish these goals?*
* *Why is this approach relevant to our target population?*
* *Is there a clear connection between the target population and the issues to be addressed?*

Activities

* *What activities will we complete to accomplish project goals?*
* *Is it clear what data collection and evaluation strategies will be appropriate for each activity?*

Outcomes

* *What measurable outcomes will be accomplished through these activities?*
* *Are these outcomes achievable within the project period?*

Impact

* *What will the long-term and short-term impacts of the project be?*
* *Do these impact goals go beyond the original scope of work?*



**Applicant**:

**Count(ies) Served**:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Target Population** | **Program Theory** | **Activities** | **Outcomes** | **Impact** |
| *The target population consist of:* | *If the services are:* | *And if the program provides:* | *Then,*  | *Ultimately,*  |

**Applicant**: Imperial County Behavioral Health Services

SAMPLE

**Count(ies) Served**: *Imperial*

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Target Population** | **Program Theory** | **Activities** | **Outcomes** | **Impact** |
| *The target* *population consist of:*Individuals with MH and/ or SUD conditions pending release from incarceration | *If the services are:*Facilitate coordination of care and inmate’s linkage to MH/SUD services prior to their release from incarceration to ensure delivery of appropriate services | *And if the program provides:*Add MH staff to be on-site at local county jail. Provide screening and referral services on-site. Educate individuals about MH/SUD services. Provide aftercare linkage to individuals to facilitate connection to services.Facilitate communication between local jail and ICHBS outpatient programs | *Then,* Number of intake assessments by mental health clinics from recently incarcerated individuals will increase each project year.Outreach, education, and aftercare services to recently incarcerated individuals will be increased each project year.  | *Ultimately,* From baseline in Yr 1, linkage to services for the referred population will increase at least 25% by the end of Yr1; at least 30% by the end of Yr 2; and at least 35% by the end of Yr 3. Due to accessing MH and/or SUD services, jail recidivism by formerly incarcerated person served will be reduced 15% by the end of Yr 3 |
| Individuals in need of MH and/or SUD services during and after an Emergency Department (ED) visit to a local hospital or after an inpatient hospital stay. | Ensure individuals at local ED and inpatient hospitalization do not experience lapse in treatment after hospitalization or ED visit through facilitated linkage to MH/SUD services and coordination of care | Add MH staff to be on-site at local EDProvide 5150 pre-screening evaluations and/or interventionsProvide after-care linkage services to MH and/or SUD and other support services after hospitalization or ED visit. | Persons needing MH/SUD services will receive timely entry into care | From baseline in Yr 1 for all referrals, # of intakes to MH and/or SUD services will increase by 10% by the end of Yr 1; by 20% by the end of Yr 2; and, by 30% by the end of Yr 3. Repeat hospital readmissions will be reduced by 30% by the end of Yr 3. |