



Section II

Applying the model – Step 3

- Introduction
- High level logic model of CDPM Framework components
- Mid-level systems logic model - stakeholder roles/responsibilities and components

Step 3 Review the Logic Models.

The Grey Bruce Framework (Figure 2, 3) consists of a high level logic model defining the mission, inputs, components, outputs, outcomes and vision. A mid-level logic model defines roles and responsibilities.

Why a logic model?

If you don't know where you're going, how are you gonna' know when you get there?
–Yogi Berra

A logic model is defined as “a picture of how your organization does its work – the theory and assumptions underlying the program. A program logic model links outcomes (both short- and long-term) with program activities/processes and the theoretical assumptions/principles of the program... a systematic and visual way to present and share your understanding of the relationships among the resources you have to operate your program, the activities you plan, and the changes or results you hope to achieve.” (Kellogg, 2004).

Logic Model Terms

Inputs: Describes those resources that will be allocated to an initiative including knowledge, skills and expertise, financial and human resources (Videre).

Components: Describe the major activities of the program in one or two words (Letts, 1999)

Outputs: Establish the linkages between the current situation and the impact (outcomes) of the initiative (Videre).

Outcomes: Answer the question “What happened as a result of the initiative?” and are useful to communicate the impact of the investments in the initiative (Videre).




A VALUABLE REFERENCE FOR PROGRAM PLANNING USING THE LOGIC MODEL APPROACH:

Innovation Network, Inc. (2005) Logic model workbook
www.innonet.org

A copy of the manual included on the Tool Kit disc.





The Grey Bruce Integrated Health Coalition CDPM Framework Logic Model

The Grey Bruce Health Coalition CDPM Framework Logic Model consists of a number of elements. The high level logic model divides into three distinct but interrelated components:

-  Community Capacity and Integration
-  Individual and Family Capacity and Integration
-  Health Care Organization (HCO) and Provider Capacity and Integration.

The logic model begins with a description of the mission. To achieve the vision outcomes are established but the timelines differ with outcomes set for short-term, intermediate and long-term achievement.

The mid-level logic model maps out the roles and responsibilities for each of the three components' stakeholders but further refines the definitions according to levels of health promotion and prevention:

-  health promotion
-  primary prevention
-  secondary prevention
-  tertiary prevention

Definitions: Levels of Health Promotion and Prevention

The Grey Bruce Integrated Health Coalition CDPM Framework logic model identifies levels of population management for health promotion and prevention:

Health Promotion

Health promotion is the process of enabling people to increase control over, and to improve their health (Ottawa Charter for Health Promotion. WHO, Geneva, 1986). Health promotion represents a comprehensive social and political process, it not only embraces actions directed at strengthening the skills and capabilities of individuals, but also action directed towards changing social, environmental and economic conditions so as to alleviate their impact on public and individual health. Health promotion is the process of enabling people their impact on public and individual health (WHO, 1998).

Primary Prevention (Level 1)

With the right support many people can learn to be active participants in their own care, living with and managing their conditions. This can help them to prevent complications, slow down deterioration, and avoid getting further conditions. The majority of people with chronic conditions fall into this category – so even small improvements can have a huge impact. (Department of Health, 2004)

Secondary Prevention (Level 2)

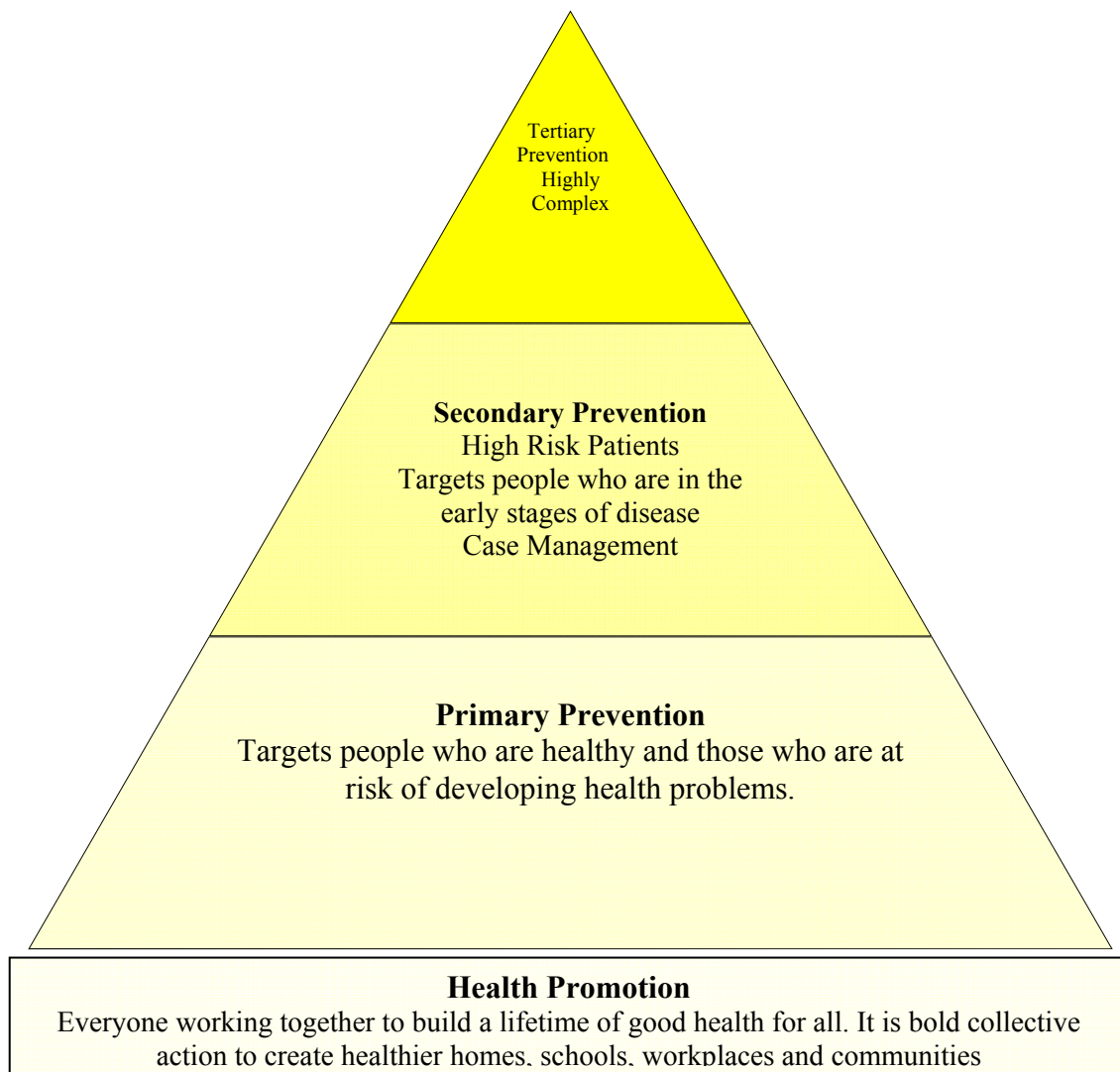
Disease/care management, in which multidisciplinary teams provide high quality evidence based care to patients, is appropriate for the majority of people at this level.

This means proactive management of care, following agreed protocols and pathways for managing specific diseases. It is underpinned by good information systems – patient registries, care planning, and shared electronic health records (Department of Health, 2004).

Tertiary Prevention (Level 3)

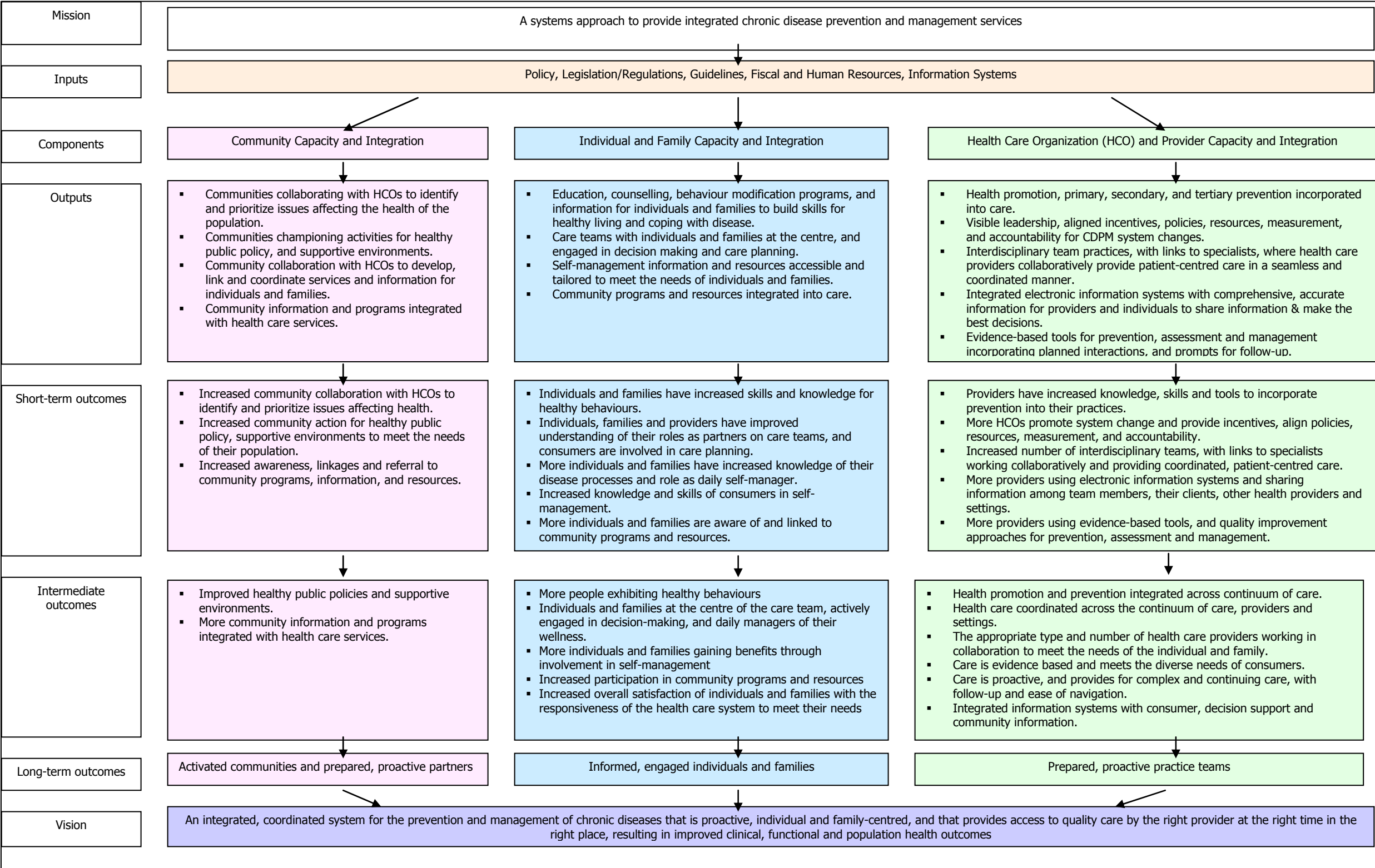
As people develop more than one chronic condition (co-morbidities), their care becomes disproportionately more complex and difficult for them, or the health and social care system, to manage. This calls for case management – with a key worker (often a nurse) actively managing and joining up care for these people (Department of Health, 2004).

Levels of Health Promotion and Prevention



(Adapted from Department of Health, 2004)

Glossary of Terms used in Grey Bruce Health Coalition CDPM Logic Model (See Appendix A)



| | | | |
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| Mission | A systems approach to provide integrated chronic disease prevention and management services | | |
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| | Roles and Responsibilities | | |
| Components | Community Capacity and Integration | Individual and Family Capacity | Health Care Organizations |
| <p>Health Promotion</p> <p>Is everyone –people, communities and governments – working together to build a lifetime of good health for all. It is bold, collective action to create healthier homes, schools, workplaces and communities</p> | <p>Leadership role in health promotion awareness and education activities</p> <p>Organize skill building opportunities</p> <p>Create environmental supports – healthy homes, schools, workplaces and eating establishments</p> <p>Create healthy and safe communities</p> <p>Engage in establishing healthy public policy</p> <p>Support healthy community development</p> <p>Enhance and build social capital</p> <p>Advocacy to address the social determinants of health issues</p> <p>Participate in participatory action research</p> | <p>Engaged in healthy lifestyle behaviours</p> <p>Engage in low risk behaviours</p> <p>Participate and promote awareness and education opportunities</p> <p>Experience skill building opportunities</p> <p>Remain socially connected within the community</p> <p>Community champion of wellness</p> <p>Consumers involved in wellness planning</p> <p>Participate in participatory action research</p> | <p>Collaborates with the community to develop a system of promoting health and preventing illness, disease and injury</p> <p>Support community health promotion awareness and education activities</p> <p>Offer skill building opportunities</p> <p>Ensure consumers have clean water and air</p> <p>Engage with the community to develop environmental supports for healthy lifestyles</p> <p>Provide resources to support creating healthy environmental supports – healthy homes, schools and workplaces, eating establishments and safe communities</p> <p>Advocate for healthy public policy development to address the social determinants of health issues</p> <p>Create opportunities for knowledge transfer amongst health care professionals</p> <p>Play an active role to establish healthy “health care organizations” workplaces</p> <p>Leadership role in research, surveillance and evaluation</p> |

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| <p>Primary Prevention</p> <p>Targets people who are healthy and those who are at risk of developing health problems</p> | <p>Provide programs to address social determinants of health</p> <p>Participate in determining/identifying community population health needs</p> <p>Organize and promote strategies to improve determinants of health</p> <p>Engage consumers in disease prevention strategy development</p> <p>Organize and promote opportunities for knowledge and skill development for residents in healthy lifestyle strategies, self-care, behaviour modification – i.e. libraries and health care providers offering information resources</p> <p>Promote use of evidence-based information resources</p> <p>Organize and promote strategies supporting healthy lifestyles, self-care – i.e. walking programs in the workplace, for seniors; healthy meal choices for school-age children</p> <p>Target risk reduction strategies for diseases prevalent within community population</p> <p>Organize and promote screening programs</p> <p>Foster and build partnerships to support community primary prevention strategies</p> | <p>Work towards establishing healthy lifestyle behaviours</p> <p>Engage in behaviour modification programs</p> <p>Attend self management education opportunities</p> <p>Consumers involved in wellness planning</p> <p>Participants involved in research studies</p> <p>Participate in screening and risk identification opportunities</p> | <p>Provide immunization clinical services</p> <p>Promotes and provide screening for early detection of disease</p> <p>Provide behaviour modification programs</p> <p>Provide group/individual assessment and teaching</p> <p>Offer multidisciplinary programming i.e. Stroke strategy/ Diabetes strategy initiatives</p> <p>Provide injury prevention initiatives</p> <p>Provide episodic care</p> <p>Health care providers are incorporating health lifestyle teaching</p> <p>Leadership role in research, surveillance and evaluation</p> |
| <p>Secondary Prevention</p> <p>Targets people who are in the early stages of disease</p> | <p>Engage consumers in disease management planning and strategy development</p> <p>Organize and promote opportunities for knowledge and skill development for residents in chronic disease self-</p> | <p>Attend self-management education and behaviour modification opportunities</p> <p>Where appropriate, attend disease specific secondary prevention programming</p> | <p>Provide diagnosis</p> <p>Develop early intervention plan of care to help minimize the negative impacts and prevent disease progression</p> |

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| <p>Care management</p> <p>Goal: To move consumers to optimal well-being</p> | <p>management geared to diseases prevalent within the community</p> <p>Educate consumers on expected impact of secondary prevention strategies on individual wellness and community health care system</p> <ul style="list-style-type: none"> - individual – fewer acute exacerbations - health care system – fewer emergency visits due to acute exacerbations <p>Promote, engage in and support development of disease specific education and management strategies and programs – i.e. diabetes, CV, stroke</p> <p>Organize and promote strategies supporting disease self-management – i.e. walking programs, restaurants offering heart healthy choices</p> <p>Educate consumers in use of community secondary prevention strategies/programming</p> | <p>Seek out quality, evidence-based disease management information</p> <p>Client, family, caregiver participate in care planning to optimize well-being and reduce complications</p> <p>Advocate for self/client in care planning with health providers</p> <p>Utilize social support and health resources as planned/needed</p> | <p>Provide programs such as Cardiac Rehab program, Stroke clinic, Diabetes Clinics</p> <p>Provide active follow up</p> <p>Consumers receive multidisciplinary care that is high quality easily accessible</p> |
| <p>Tertiary Prevention</p> <p>Case Management (highly complex patients)</p> | <p>Educate clients/patients in use of health system – i.e. expectations at tertiary level and movement between secondary and tertiary</p> <p>Work with client/patient to plan for future needs – i.e. supportive care, end of life planning</p> <p>Promote and support strategies (when appropriate) to integrate the client/patient back into the community using linkages and defined roles and responsibilities</p> | <p>Optimize functioning with limitations of conditions/diseases and reduce complications</p> <p>Client, family, caregiver participate in care planning anticipating future needs</p> <p>Client, family, caregiver engage/utilize system navigation, social support and health resources as planned/needed/required</p> <p>Family/caregiver participate in caregiver support opportunities</p> | <p>Provide a set of measure to reduce the impact of the disease</p> <p>Prevent worsening of the disease avoid acute episodes and complications, and to maximize the consumers health and quality of life.</p> <p>Provide supportive care</p> <p>Provide palliative/end-of-life- care</p> |

