

GBCDPM TOOLKIT
POWER POINT
Resource notes

Slide 25: A Systems Level Logic Model

Logic models can be designed using similar elements to describe the relationships between the goals, activities, roles, and products for a system, a program or a service. Although the three model formats included in the toolkit look somewhat different, they all serve that common purpose.

The first logic model (slide #25) is a high level systems model that applies the framework in a way that shows the relationship between the three key groups: community; individuals and family; and health care organizations. These groups work interdependently to create “a systems approach to provide integrated chronic disease prevention and management services”, which is the mission of the system. A Mission is defined as a broad, general statement of the reason for existence. It is the foundation for building this logic model.

Inputs, outputs, outcomes and the vision describe how we achieve the Mission.

Inputs describe resources that are necessary to support the creation and maintenance of the system. Inputs support the components, or 3 key groups. Without supportive policy, legislation, guidelines, fiscal and human resources and information systems, the key groups would not have the capacity to create an integrated system. **(discussion: what do we need to change the system? What is feasible?)**

Components of the system are the 3 key groups. These are the same groups identified as core elements in the CDPM framework. Their contributions to the system are represented by what capacities they have that support an integrated system. **(Who are the key players in each of the component groups?)**

Outputs describe the linkages between the current system, and the future one. Here they describe strategies or a future state of behaviour that results in or enables outcomes reflective of an integrated system. **(in general terms, what do the key groups do that help integrate the system?)** Output considerations should include key audiences to be reached, as well as behaviours and characteristics of the groups.

Outcomes answer the question **“What happened as a result of the changes in individual/organizational behaviours or systems initiatives?”**

Short term outcomes often address increases in awareness, increased knowledge and skills, improved motivation and attitude and can reflect a duration of 0-3 years. Their scope may be smaller (e.g. a pilot program)

Intermediate outcomes often include adoption of processes, guidelines, policies that impact upon key health populations. They can reflect a duration of 3-5 years. Their scope may be larger than a short term outcome (e.g. a regional program or initiative)

Long term outcomes often highlight changes in conditions and impacts to key health populations and can reflect a duration of > 6 years. their scope may be larger than an intermediate term outcome (e.g. a LHIN level or provincial initiative)

The Vision for this model describes the larger goal to which the system aspires.