

1. Making the Value Case

Creating a Logic Model Guide

The program logic model is a picture of how your organization does its work—the theory and assumptions underlying the program (*Source: W. K. Kellogg Foundation’s Logic Model Development Guide*). It is a valuable planning tool that you can use to document and help clarify and connect the short-term outcomes and long-term impacts you want your program to achieve; identify the program output that enables you to achieve those outcomes and impacts; outline the activities required to generate the program output; and determine the resources needed to conduct those activities. By documenting these important aspects of the program, the model also provides a basis or framework for later program evaluation. Fortunately, you can build a logic model with no special modeling software or tools—you only need a simple document table or spreadsheet.

The table below is a logic model for a diabetes surveillance program and provides examples in each column that you can reference when building your model. When building a logic model with your team, follow these steps to work your way through completing the model.

1. Determine the longer-term impacts you want the project to achieve.
2. Determine the shorter-term outcomes that must occur to support achieving the longer-term impacts.
3. Determine what outputs the surveillance system must generate to achieve the outcomes and impacts.
4. Determine the activities that must be conducted to generate the outputs
5. Identify the resources required to support conducting the activities.

Note: *If conducting surveillance for a condition or event about which you have little knowledge or information of incidence or prevalence, an outcome could be, “Accurate knowledge of the extent of [specify the condition or event] upon which community action and intervention can be based.”*

Example Logic Model for Diabetes Surveillance

Resources	Activities	Outputs	Outcomes	Impact
<i>In order to accomplish our set of activities, we will need the following:</i>	<i>In order to address our problem or asset, we will accomplish the following activities:</i>	<i>We expect that once accomplished, these activities will produce the following evidence, reports or service delivery:</i>	<i>We expect that actions based on these outputs will lead to the following changes in [specify] years:</i>	<i>We expect that if accomplished, these outcomes will lead to the following changes in [specify] years:</i>
<p>Sample data use agreements</p> <p>Legal review</p> <p>Code sets for diagnoses and lab results related to diabetes</p> <p>Requirements for surveillance system</p> <p>Geocoding software</p> <p>GIS/mapping software</p> <p>Other public data sets (e.g., poverty, census) or clinical data sets (e.g., BMI) to use in mapping</p>	<p>Recruit health care partners to provide non-identified lab, clinical and demographic data</p> <p>Negotiate and execute data use agreements</p> <p>Collaboratively define the data elements and structure for transmitting the data or security and other requirements for accessing the data</p> <p>Discuss how the defined data are collected and entered into the EHR, including any limitations of the data with clinical partners</p> <p>Enhance surveillance system to capture, process and report data elements</p>	<p><i>Reports:</i></p> <p>Hemoglobin A1c levels by age, gender, race/ethnicity</p> <p>Fasting glucose tolerance results by age, gender, race/ethnicity</p> <p>ICD-9/10 codes for diabetic retinopathy by age, gender, race/ethnicity</p> <p>Ad hoc reports to look at data in new ways</p>	<p>Ten percent reduction in persons with hemoglobin A1c levels above 6 percent</p> <p>Fifteen percent reduction in African-American and Hispanic persons with hemoglobin A1c levels above 6 percent</p> <p>Ten percent reduction in persons with diabetic retinopathy</p> <p>Fifteen percent reduction in person <40 years old with prediabetes (hemoglobin A1c levels above 5.7 percent or fasting glucose tolerance above 100)</p>	<p>Reduced morbidity and mortality from uncontrolled diabetes</p> <p>Reduced complications (blindness, kidney failure, heart attacks, amputations) from uncontrolled diabetes</p> <p>Reduced health disparities</p> <p>Reduced healthcare costs</p>