

Logic models and complex programmes: a brief guide

I THINK YOU SHOULD BE MORE SPECIFIC HERE IN STEP TWO



“The main problem I see in most Better Care Fund areas is that the logic models are often under-developed and or flawed, usually because system leaders have not done enough in the first instance of really thinking through the actual changes in service delivery and how these can actually change the way the system operates. Too often the initial focus is on funding and organisational issues.”

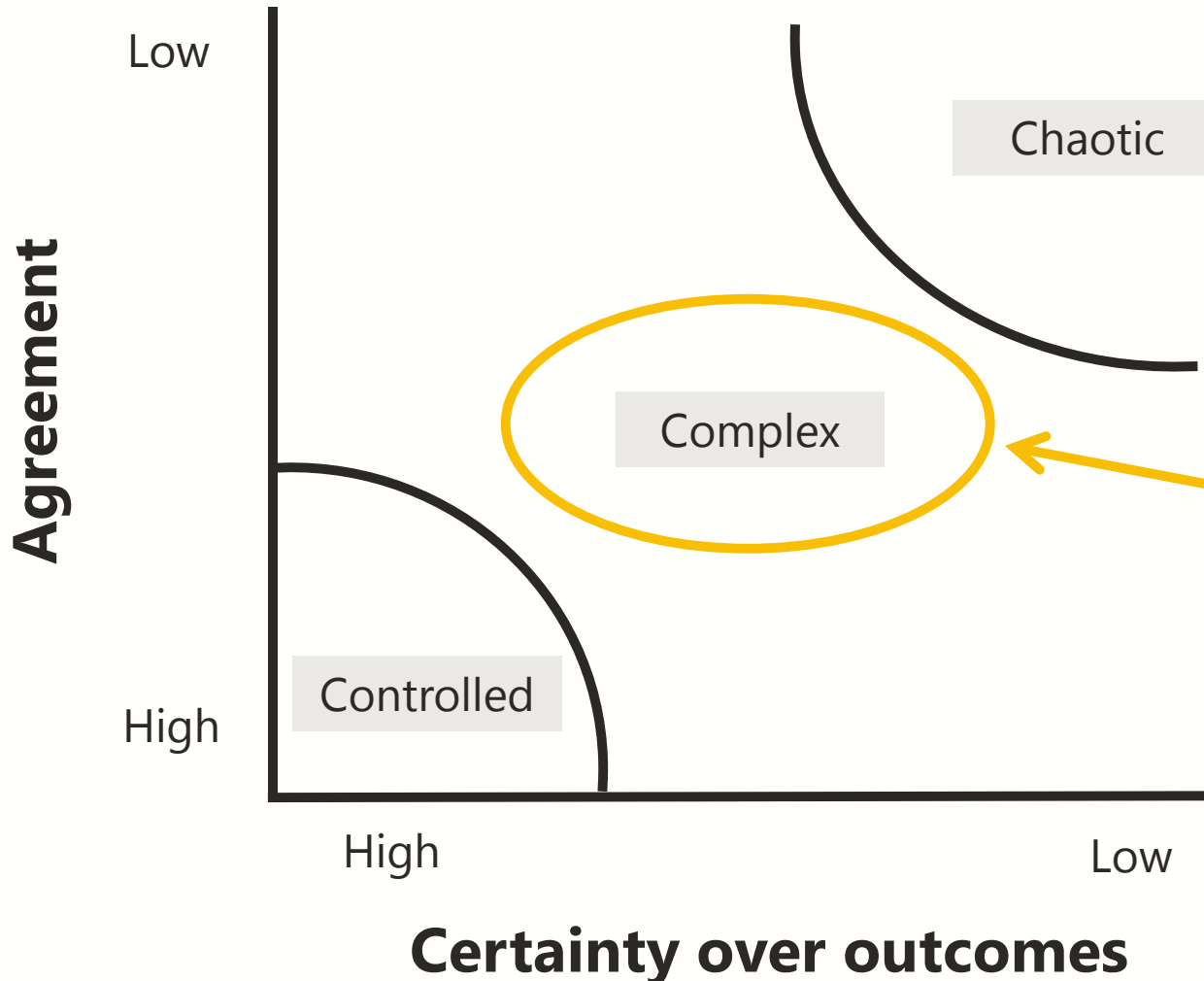
Dr. Nick Goodwin, International Foundation for Integrated Care, The King's Fund (Better Care Fund, 2015)

This slide pack suggests that logic models can help programme design / planning and evaluation.

It has three main messages:

1. Logic models can clarify complex programmes. This makes them easier to describe and therefore evaluate; it also aids programme design and implementation.
2. There is no single template / no 'one best model' to complete, but there are good principles to adopt.
3. You should take an iterative and collaborative approach to developing your logic model (see 1!)

Large scale health and social care programmes tend to operate in the zone of complexity



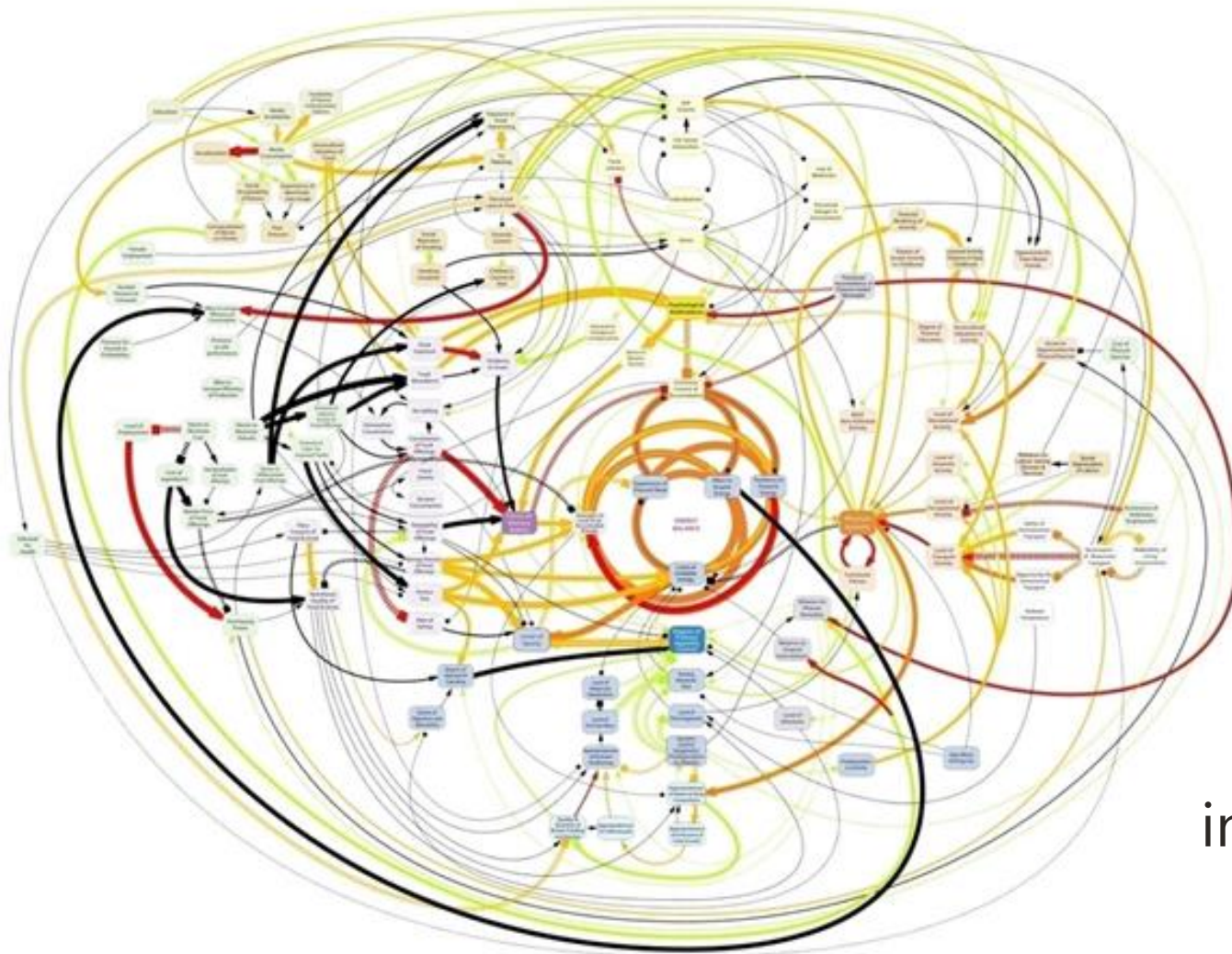
Problems that defy simple / known solutions

Need to generate consensus

Requirement to think 'in systems' (my win cannot be your loss)

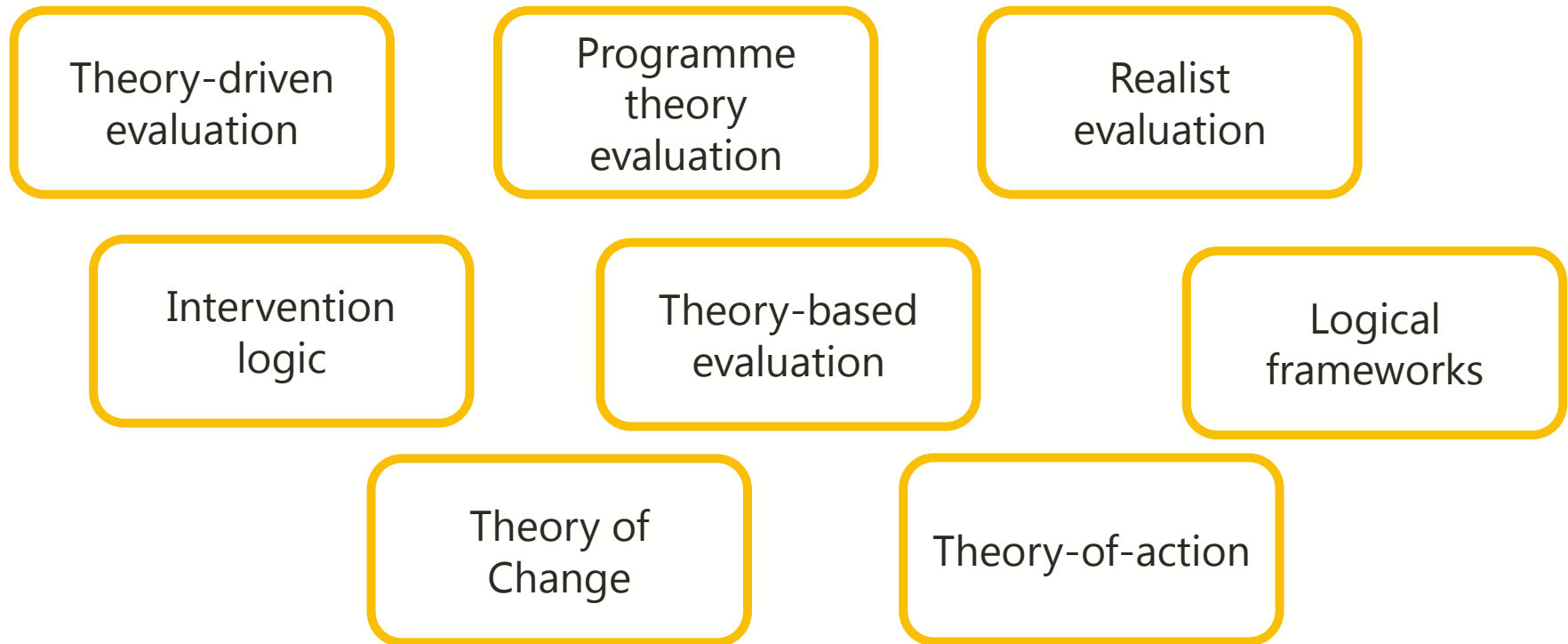
And to act across institutional boundaries to achieve aims

Which means that life looks like this



Hard to
describe;
indescribably
hard to do!

Evaluation (birthplace of the logic model) has a series of approaches to bring some clarity to this complexity



Each with their differences of emphasis (etc), but underpinned by the same basic thought...

...that all programmes are theories*...

“Programmes are...products of the human imagination: they are hypothesis about social betterment. Programmes chart out a perceived course whereby wrongs might be put to rights, deficiencies of behaviour corrected, inequalities of condition alleviated.

Programmes are thus shaped by a vision of change and they succeed or fail according to the veracity of that vision.”

Ray Pawson and Nick Tilley 'Realist Evaluation' (2004)

* Not 'theory' in a grand, all encompassing sense, but a description of the ways in which Intervention Y is expected to achieve Effects A, B, C.

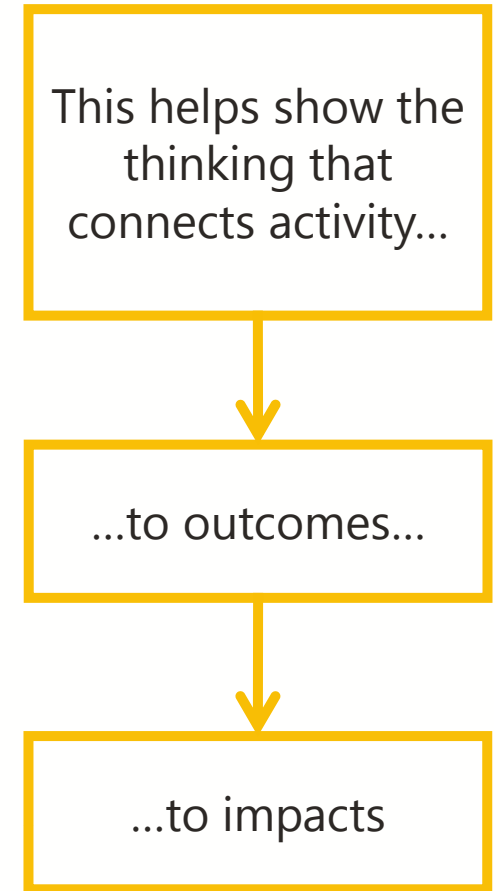
...and that these theories suggest: *'If x, then y and so z'*

"If we deliver our training package, then we will improve the care planning skills of care homes staff..."

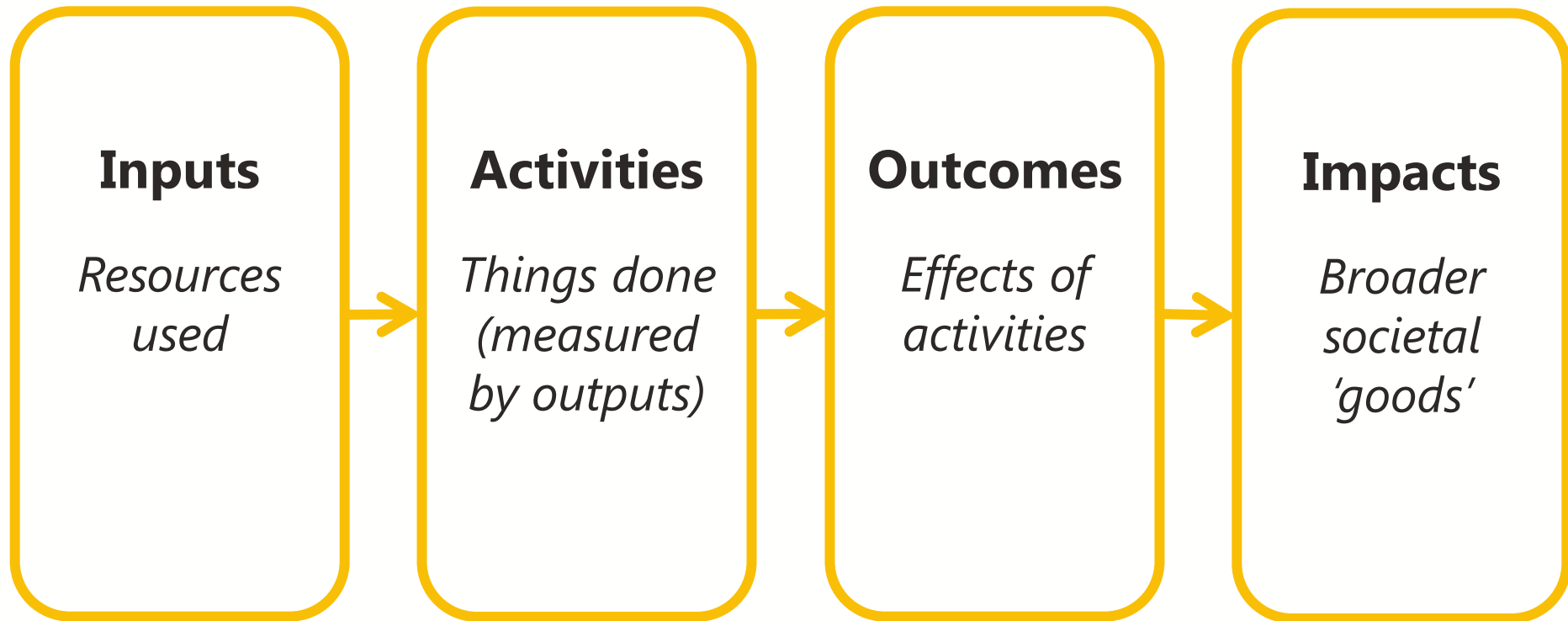
"If staff have better care planning skills, then they will be more able to cope in the event of a crisis..."

"If staff are more able to cope in a crisis, then there will be fewer unplanned admissions to hospital..."

"If there are fewer unplanned admissions, then more people will die in a setting of their choice..."

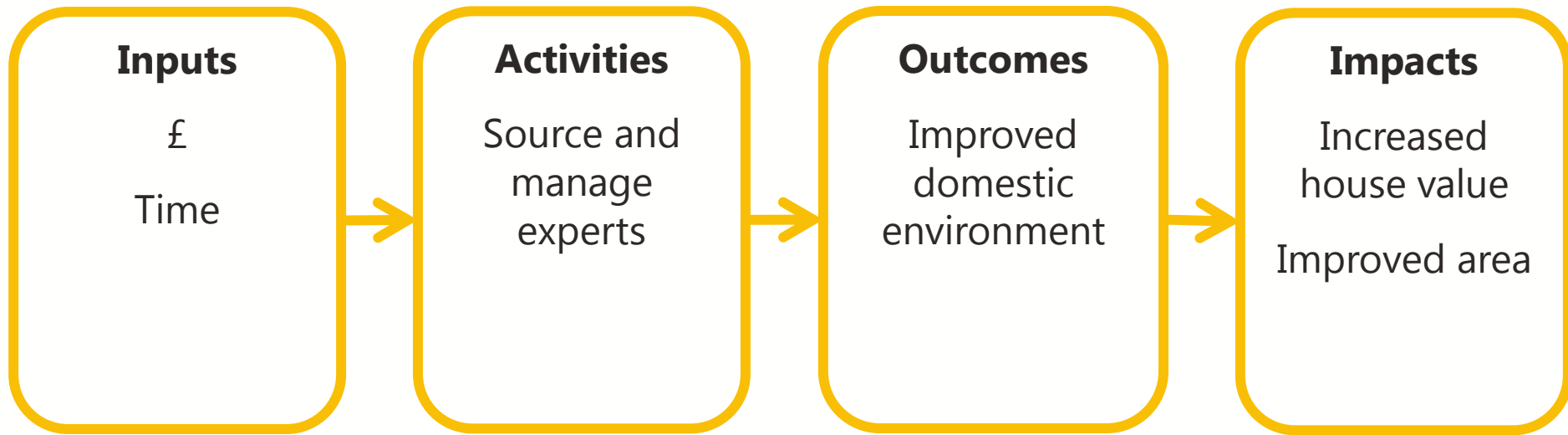


Logic models capture and summarise this description. There are many different approaches, but all share core elements*

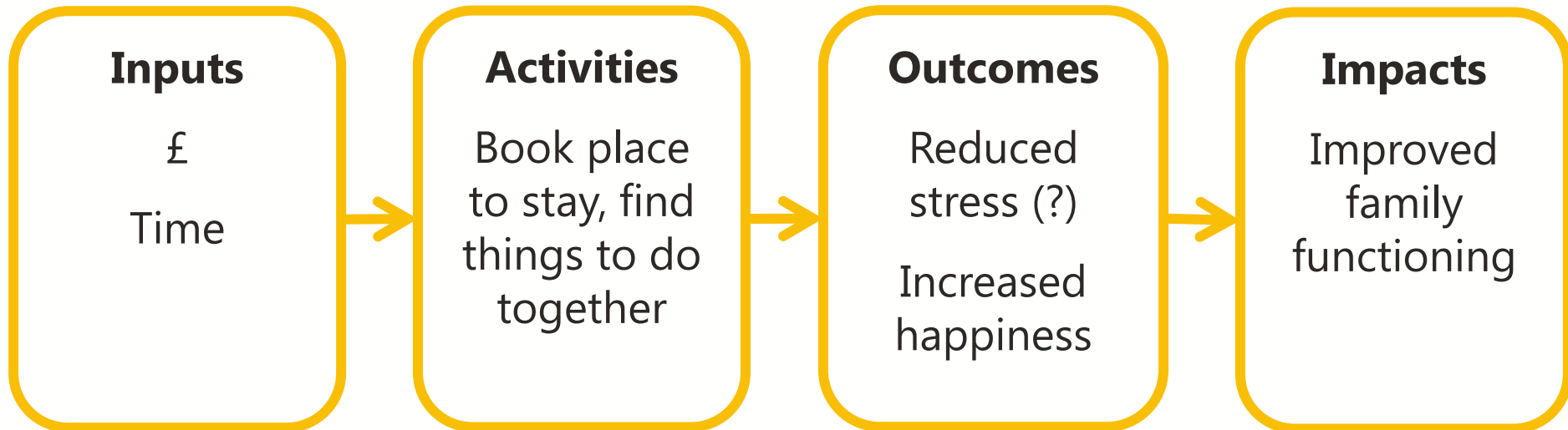


* Terminology varies but basic concepts remain constant

Simple logic model for refurbishing a house (the lazy way)...



...or going on a family holiday



Even at this very simple level of description, we are given a powerful question for planning (and evaluation)

What is your 'theory of change'?

How (and why) do you expect your activities to achieve the desired results?

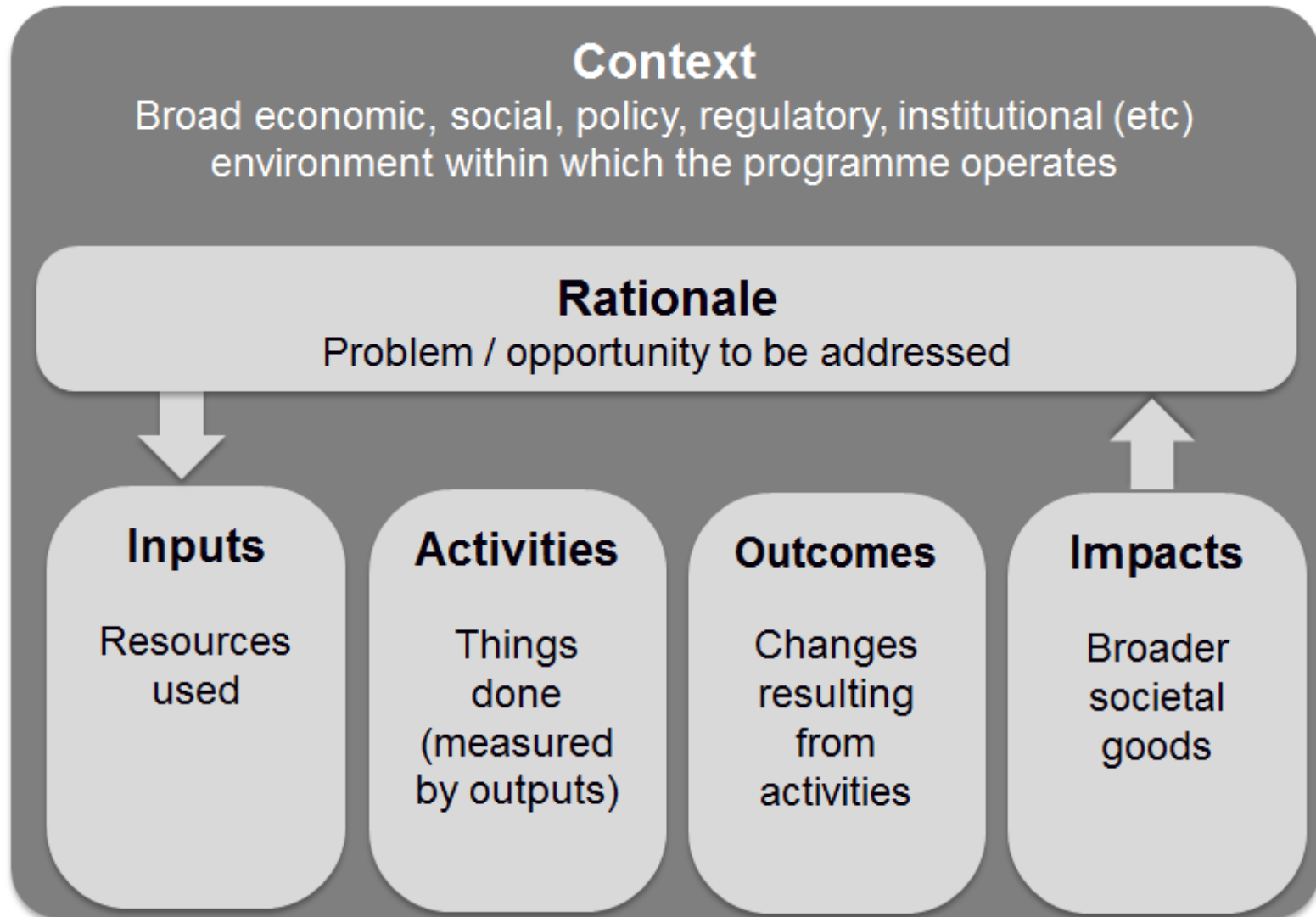
A level of detail down, designing any programme requires answers to what can be tough questions

1. What problem(s) are we attempting to address?
2. Given this, what impact(s) are we ultimately trying to make?
3. So what specific outcomes do we need to achieve?
4. What do need to do to achieve them? And why do we think that these activities will achieve our outcomes?
5. What resources do we need to implement our activities?

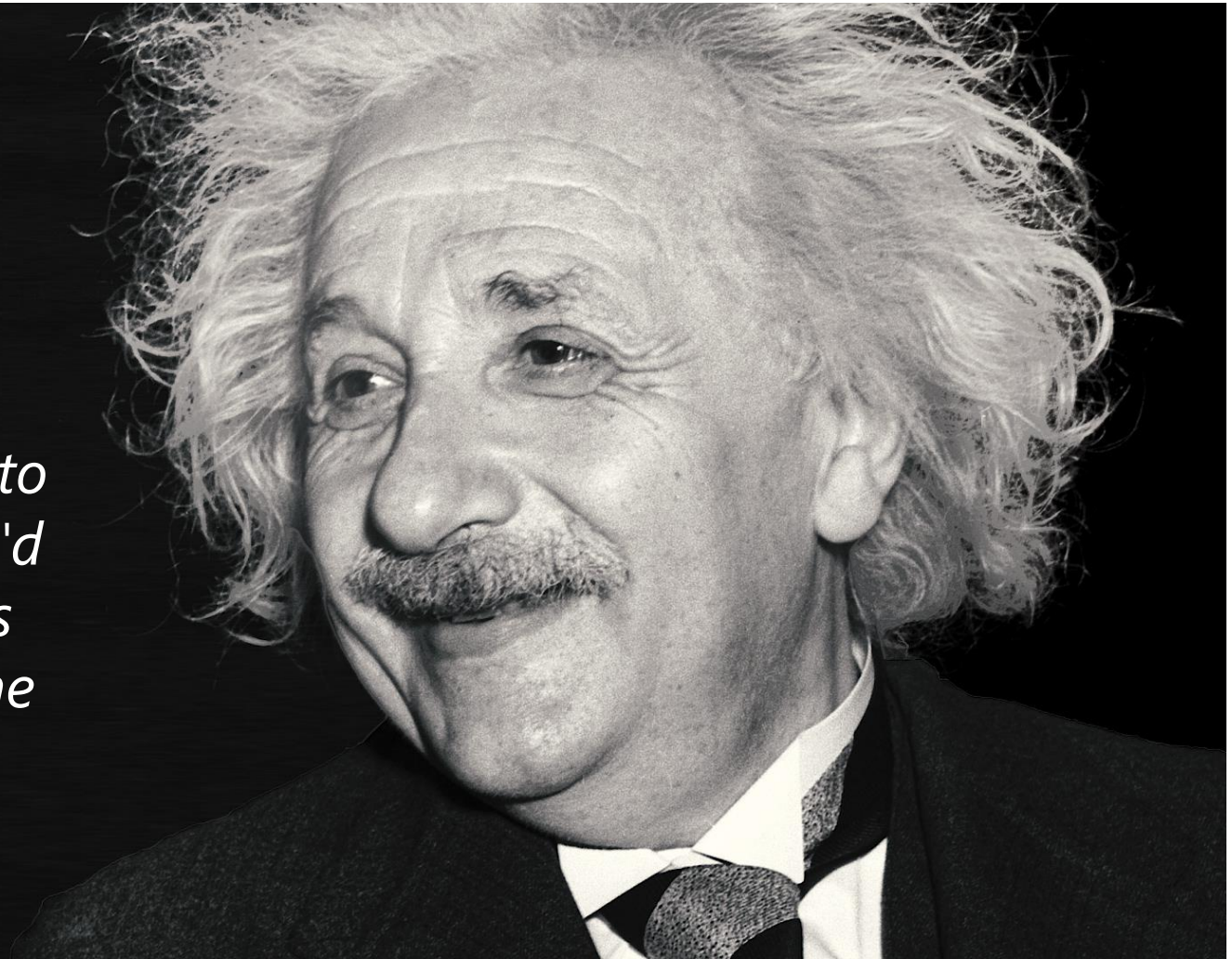
[Practical questions follow]

The more pet the project, the more challenging these questions seem. Asking them 'to help develop a logic model' makes this more neutral and constructive

One template we often use is based on these questions



"If I had an hour to solve a problem I'd spend 55 minutes thinking about the problem and five minutes thinking about solutions."



Why does something need to be done?

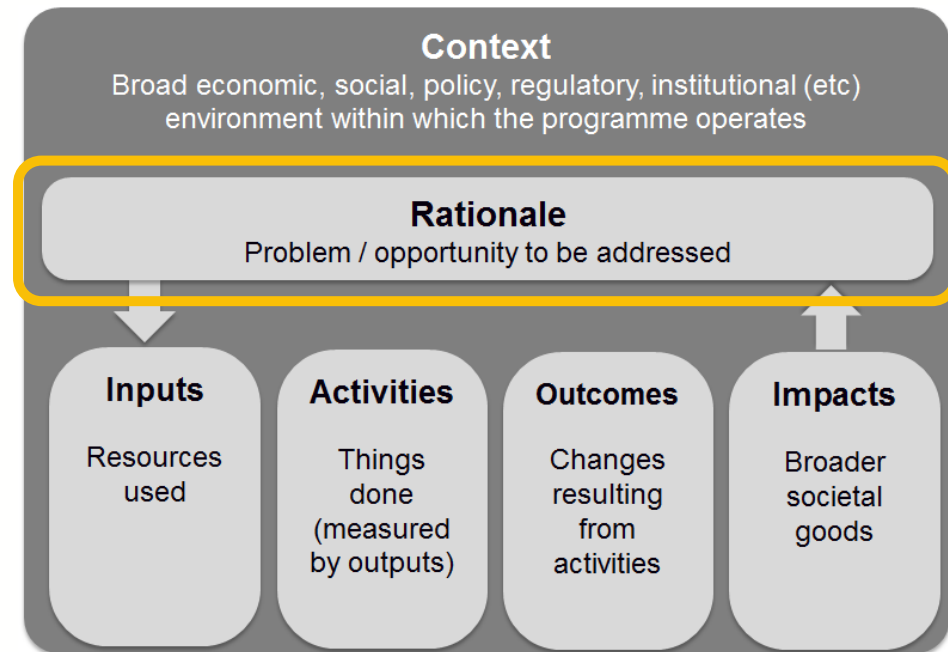
'Rationale' is a summary of the case for acting

Normally expressed in terms of problems / (less commonly in public policy) opportunities

What is the nature / scale of these problems / opportunities?

Who suffers? In what ways?

What will happen if you do nothing / why are current responses inadequate?

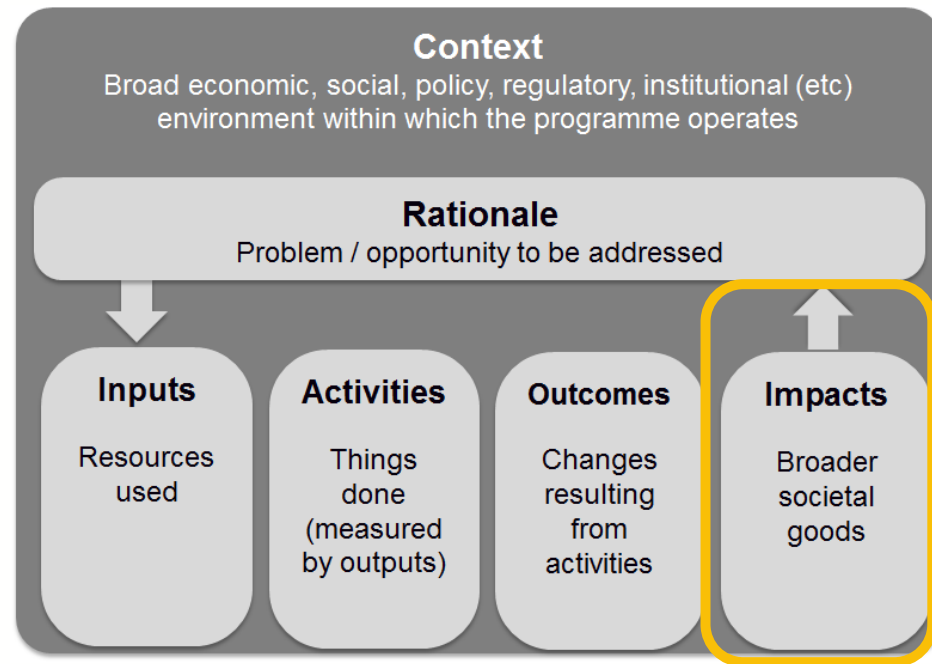


What difference are you ultimately trying to make?

Impacts are the final effects that you are working towards – e.g. increased life expectancy, reduced health inequality, more sustainable services, etc

Therefore relate very closely to the Rationale and normally expressed at a high level. **Triple / quadruple aim a useful framework**

Changes at this level only indirectly attributable to your intervention – you 'contribute to', rather than 'cause'. Contextual factors a significant influence



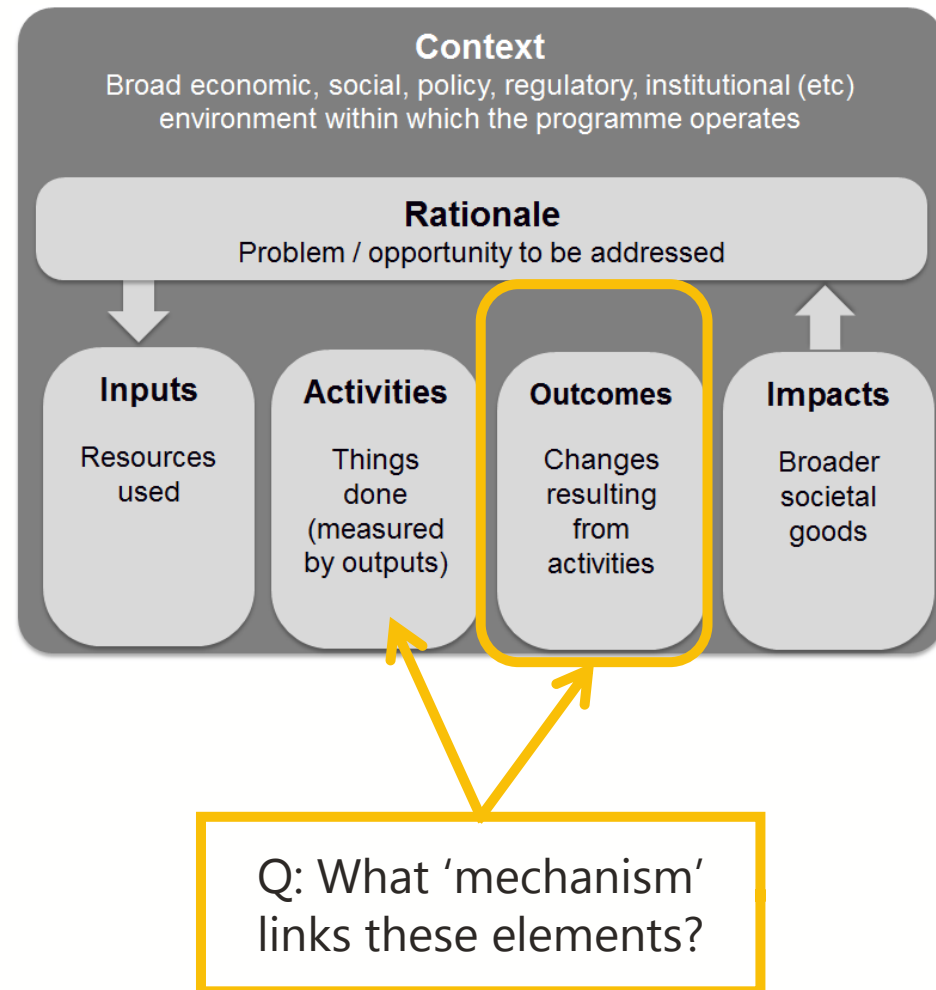
Work backwards: what outcomes do you need to achieve?

These are the changes that you are trying to make / that would (logically!) result from your activities

Can usefully be broken down into:

- Intermediate outcomes – changes in knowledge / awareness / skills / access
- Outcomes – changes in behaviour / condition / status

Language suggesting change is therefore important: reduced, increased, improved, better, worse,



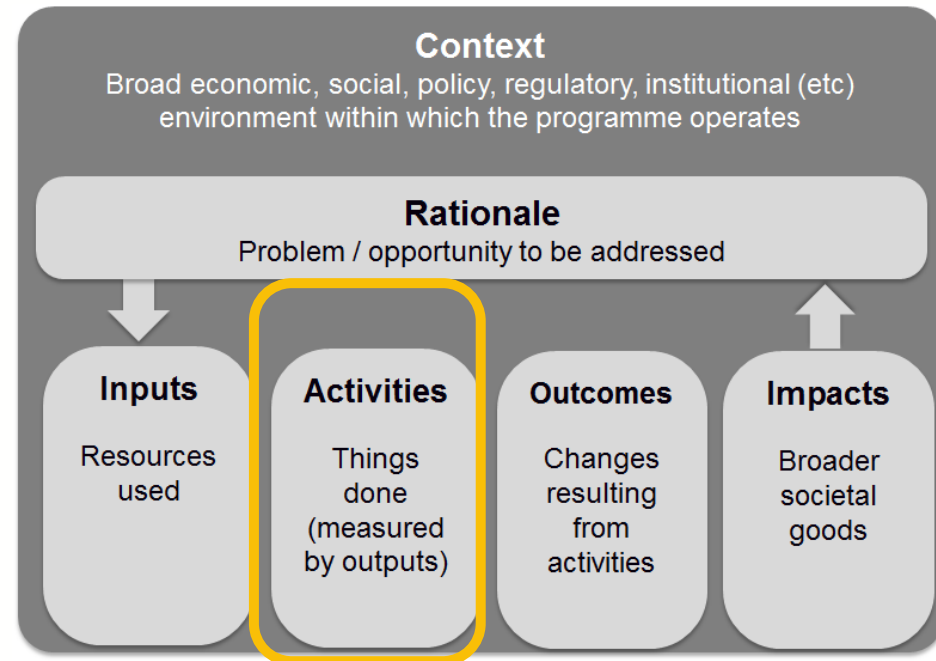
What will you do to achieve these outcomes?

The things you do (e.g. establish a hotline, set up a new referral centre, etc, etc)

Measured by outputs (e.g. number of people calling hotline)

One challenge here is the level of abstraction : you don't need to be detailed – just the main strands / types of activity (the logic model is not a programme plan)

Another is showing (if you think you need to) specific connections between 'activity x' and outcomes 'a/b/c' (covered later in the slides)

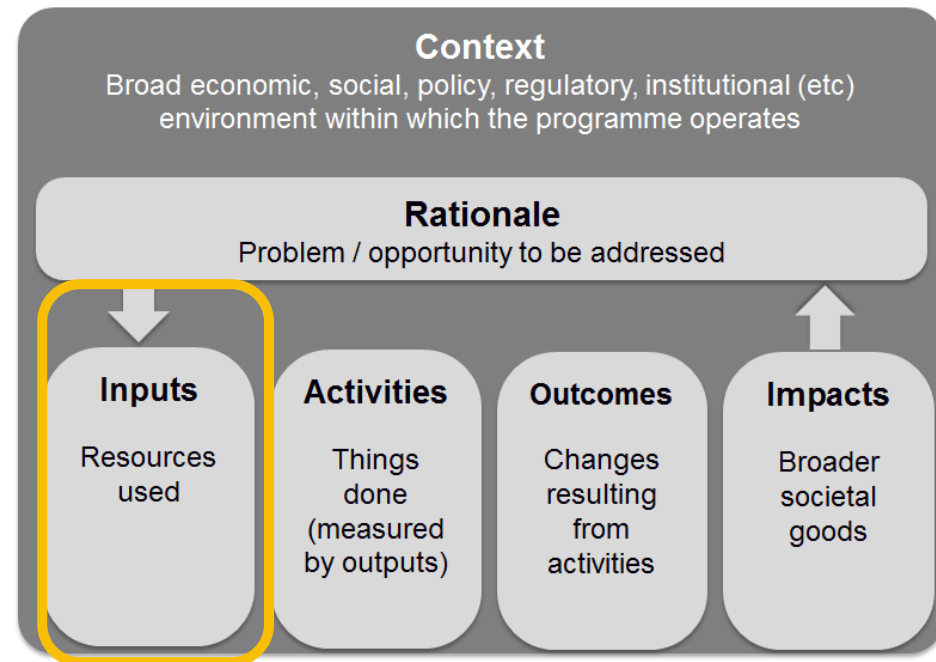


And what resources will you use?

Should be fairly straightforward:
these are the resources you have to
do the things you do

Usually measured in £

For most programmes, cash funding
is the largest element – but maybe
there are in-kind inputs too, e.g. if
partners have assigned staff to your
programme, if you have lots of
volunteers, if you are given 'free'
facilities, etc..



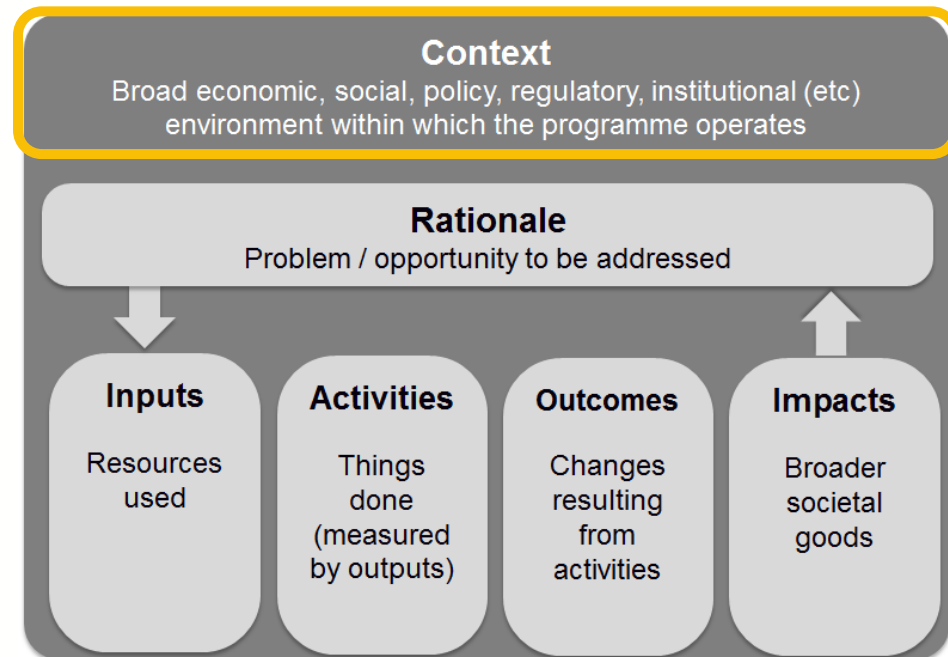
What is 'out there' that might help / hinder you?

(Necessarily) slightly fuzzy definition: the wider environment within which your intervention operates. Might be economic, social, institutional, policy / regulatory, etc

Useful to show that interventions don't exist in a vacuum

Sometimes hard to work out what contextual factors are materially important.

Basic question: what external factors might help / hinder us in trying to achieve our aims?



Finally, take a step back and reflect on:

The **assumptions** that you are making in your model. Could be:

- Practical (e.g. shows significant reliance on recruitment of...)
- Evidential (e.g. implied connection between activity x and effect y)
- Contextual (e.g. that there is no significant change in regulation of x)

Can this information be used in programme planning? E.g. is this showing risks to be managed? What does it mean for evaluation? Would more evidence help design?

Also consider your **overall theory of change**. Policy instruments are often characterised as being either:

- Sticks (beat / regulate things into place)
- Carrots (incentivise / ease the change you want)
- Sermons (eulogise and persuade)

What is the mix in your programme? Does this seem optimal given the task? If not, what is missing and can this be managed somehow?



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