County of Los Angeles – Department of Public Health

**ATTACHMENT T - EPS**

Substance Abuse Prevention and Control

**PLANNING LOGIC MODEL**

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| **AGENCY** |  | **AGENCY CODE** |  |
| **CONTRACT TYPE**  | Environmental Prevention Services (EPS) |  **CITY/AREA**  |  |

**PURPOSE:** The purpose of the Planning Logic Model is to translate the Problems, Contributing Factors, and Local Conditions identified in the Problem Analysis Logic Model (PALM) to SMART (Specific, Measureable, Achievable, Realistic, Time-Limited) Goals, Long-Term Objectives (LTO), and Short-Term Objectives (STO) that clearly align with the Goals, LTOs, and STOs of the County. If the results of your PALM indicated that a County Goal, LTO, and/or STO is not a PRIORITY issue for the target community(ies), indicate “not a priority issue” in the corresponding box.

**DIRECTIONS**: Review your findings from the PALM and proceed with translating the allowable alcohol-related Problem, Contributing Factor and Local Conditions to Goals, LTOs, and/or STOs. As a reminder, EPS contractors must address only Goal 1, LTO 1.1, and the associated STOs at this time. This document should focus on your EPS only services and not efforts related to the *SPA-Based Coalition on Alcohol Availability and Accessibility* to reduce underage and binge drinking among local youth and young adults as those priorities/tasks have not been finalized yet.

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| **PROBLEM****(Identified on PALM)** |   | **CONTRIBUTING FACTOR****(Identified on PALM)** |   | **LOCAL CONDITION****(Identified on PALM)** |   |  |
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| **GOAL**A SMART statement that outlines the specific change in substance use over a longer period of time (approximately five years). |   | **LONG-TERM OBJECTIVE**A SMART statement that outlines the specific change in a contributing factor over an intermediate period of time (approximately 2 to 4 years) that should lead to achieving the goal.  |   | **SHORT-TERM OBJECTIVE**A SMART statement that outlines the specific change in a local condition over a shorter period of time (approximately 1 to 2 years) that should lead to achieving the long-term objective.  |   | **STRATEGY**A plan of action designed to achieve a particular goal/objective. The strategy is generally broad whereas associated activities are the details. |
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**STEP 1:** Meet to discuss how the agency’s evaluator will be involved in developing your agency’s alcohol related Goal, LTO, and STOs in the Planning Logic Model and later the process and outcome measures in the Work Plan and Process and Outcome Evaluation Plan. Meet with the evaluator to finalize the plan and begin work as defined.

**STEP 2:** Review the final version of your PALM, and determine if anything needs to be modified based on need and available resources. While the Community Resources & Risk Analysis and/or SWOT (Strengths, Weaknesses, Opportunities, and Threats) Analysis were not submitted to SAPC, agencies who completed these or similar activities could use the findings to support why a STO should not be addressed despite data supporting it as a priority (Note: Goal 1 and LTO 1.1 cannot be removed).

**STEP 3**: Develop a separate underage drinking and binge drinking model for each city/community included in the PALM for your EPS only services. If you now intend to exclude a city/community from the Planning Logic Model, please contact your liaison in advance to discuss the rationale.

**STEP 4:** Develop a SMART Goal to be achieved in approximately **five years** related to underage and/or binge drinking as it relates to youth and young adults.

**STEP 5**: Develop a SMART LTO to be achieved in approximately **two to four years** related to alcohol access and availability as it relates to youth and young adults.

**STEP 6**: Develop STOs to be achieved in approximately **one to two years** for retail access by minors, social access by minors, and/or community availability by minors as identified on the PALM. Insert “Not a Local Priority” for any STO that was not identified as a priority. Note: As these projects are expected to implement significant change over time, your liaison will pay equal attention to the development of a well-defined Goal, LTO and STO(s).

**STEP 7:** For each Goal, LTO, and STO draft a brief (about three to six sentences) rationale on why the indicator and level of expected change was selected and be prepared to discuss with your liaison if requested.

**ADDITIONAL CLARIFICATION**:

**smart format**: The following format and elements should be used when developing your Goals, LTOs and STOs.

(Source: CDC Evaluation Guide Writing SMART Objectives)

“S” – SPECIFIC: What exactly are we doing and for whom?

“M” – MEASURABLE: Is it quantifiable and can we measure it?

“A” – ATTAINABLE/ACHIEVABLE: Can we get it done in the proposed time frame with the resources and support available?

“R” – RELEVANT: Will this objective have an effect on the desired goal or strategy?

“T” – TIME BOUND: When will this objective be accomplished?

**Sample Format**: By \_\_\_/\_\_\_/\_\_\_, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ from \_\_\_\_\_\_\_\_ to \_\_\_\_\_\_\_\_

 (“T” The When) (‘S” The Who/What) (“M” The Measure - #, Rate, Percent Change from Baseline)

**process vs. outcome measures**: The Planning Logic Model includes “Outcome” not “Process” focused Goals, LTOs and STOs.

**RESOURCES**: Additional resources are listed below. Please also review materials provided by CCAT and seek additional resources independently to ensure accurate completion of this document. Note*: Not all documents or statements within the documents clearly align with SAPC expectations and/or requirements but should provide more information on the topics.*

1. CPI (Community Prevention Initiative) Website: <http://www.ca-cpi.org/> or <http://www.ca-cpi.org/resources/>

The SPF Tip Sheets *Developing Goals and Objectives, Determining Prevention Priorities and Problem Statements,* and *Conducting a Needs Assessment* are available at: <http://www.ca-cpi.org/resources/other_publications.php>

1. CADCA (Community Anti-Drug Coalitions of America) Website: <http://www.cadca.org/>

The CADCA Primer Series includes guides on each SPF Step including: *Assessment Primer: Analyzing the Community, Indentifying Problems, and Setting Goals* and *Planning Primer: Developing a Theory of Change, Logic Models and Strategic and Action Plans* available at: <http://www.cadca.org/resources/series/Primers>

1. Prevention by Design including TIPS Logic Models <http://socrates.berkeley.edu/~pbd/planning_guide.html>
2. Centers for Disease Control and Prevention: State Program Evaluation Guides: Writing SMART Objectives. Available at:

<http://www.cdc.gov/dhdSP/programs/nhdsp_program/evaluation_guides/smart_objectives.htm>

1. My Prevention Community Website: [www.mypreventioncommunity.org](http://www.mypreventioncommunity.org)

**NEXT STEPS:** After the Planning Logic Model is approved, Contractors will next develop the Prevention Work Plan. This will include determining what strategies and associated activities are needed to systematically achieve the STO(s), LTO, and then the Goal. The *Process and Outcome Evaluation Plan* will be concurrently developed to ensure that the STOs, LTOs, Goals, Process Measures, and Outcome Measures included on the Prevention Work Plan are consistent and evaluated properly.

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| Associated with SAPC Goal 1; Long Term Objectives 1.1; and Short-Term Objectives 1.1.1, 1.1.2, and 1.1.3 |
| **Planning Logic Model: Underage and Binge Drinking among Youth and Young Adults (12-24)** |
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| **GOAL** |  | **LONG-TERM OBJECTIVE** |  | **SHORT-TERM OBJECTIVE**  |  | **STRATEGIES** |
|  |  |  |  |  |  |  |
| **PART A: UNDERAGE DRINKING****City/Community #1:** **[insert name]**Insert a SMART Goal here that could be achieved in about 5 years that addresses underage drinking if it was a priority in the target city/community. |  |  |  |  |  |  |
|  | **🡫 ACCESS AND AVAILABILITY** |  |  |  |  |
|  | Insert a SMART long-term objective here that could be achieved in 2-4 years that addresses access and/or availability.  |  |  |  |  |
|  |  | **🡫RETAIL ACCESS BY MINORS** |  | If selected as a priority, insert a brief description of possible strategies to address the short-term objective. |
| If a top priority, insert a SMART short-term objective that could be achieved in 1-2 years. |
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|  |  | **🡫SOCIAL ACCESS BY MINORS** |  | If selected as a priority, insert a brief description of possible strategies to address the short-term objective. |
| If a top priority, insert a SMART short-term objective that could be achieved in 1-2 years. |
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|  |  | **🡫COMMUNITY AVAILABILITY BY MINORS** |  | If selected as a priority, insert a brief description of possible strategies to address the short-term objective. |
| If a top priority, insert a SMART short-term objective that could be achieved in 1-2 years. |

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| Associated with SAPC Goal 1; Long Term Objectives 1.1; and Short-Term Objectives 1.1.1, 1.1.2, and 1.1.3 |
| **Planning Logic Model: Underage and Binge Drinking among Youth and Young Adults (12-24)** |
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| **GOAL** |  | **LONG-TERM OBJECTIVE** |  | **SHORT-TERM OBJECTIVE**  |  | **STRATEGIES** |
|  |  |  |  |  |  |  |
| **PART B: BINGE DRINKING****City/Community #1:** **[insert name]**Insert a SMART Goal here that could be achieved in about 5 years that addresses binge drinking if it was a priority in the target city/community. |  |  |  |  |  |  |
|  | **🡫 ACCESS AND AVAILABILITY** |  |  |  |  |
|  | Insert a SMART long-term objective here that could be achieved in 2-4 years that addresses access and/or availability.  |  |  |  |  |
|  |  | **🡫RETAIL ACCESS BY MINORS** |  | If selected as a priority, insert a brief description of possible strategies to address the short-term objective. |
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| Associated with SAPC Goal 1; Long Term Objectives 1.1; and Short-Term Objectives 1.1.1, 1.1.2, and 1.1.3 |
| **Planning Logic Model: Underage and Binge Drinking among Youth and Young Adults (12-24)** |
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| **GOAL** |  | **LONG-TERM OBJECTIVE** |  | **SHORT-TERM OBJECTIVE**  |  | **STRATEGIES** |
|  |  |  |  |  |  |  |
| **PART A: UNDERAGE DRINKING****City/Community #2:** **[insert name]**Insert a SMART Goal here that could be achieved in about 5 years that addresses underage drinking if it was a priority in the target city/community. |  |  |  |  |  |  |
|  | **🡫 ACCESS AND AVAILABILITY** |  |  |  |  |
|  | Insert a SMART long-term objective here that could be achieved in 2-4 years that addresses access and/or availability.  |  |  |  |  |
|  |  | **🡫RETAIL ACCESS BY MINORS** |  | If selected as a priority, insert a brief description of possible strategies to address the short-term objective. |
| If a top priority, insert a SMART short-term objective that could be achieved in 1-2 years. |
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|  |  | **🡫SOCIAL ACCESS BY MINORS** |  | If selected as a priority, insert a brief description of possible strategies to address the short-term objective. |
| If a top priority, insert a SMART short-term objective that could be achieved in 1-2 years. |
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|  |  | **🡫COMMUNITY AVAILABILITY BY MINORS** |  | If selected as a priority, insert a brief description of possible strategies to address the short-term objective. |
| If a top priority, insert a SMART short-term objective that could be achieved in 1-2 years. |

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| Associated with SAPC Goal 1; Long Term Objectives 1.1; and Short-Term Objectives 1.1.1, 1.1.2, and 1.1.3 |
| **Planning Logic Model: Underage and Binge Drinking among Youth and Young Adults (12-24)** |
|  |
| **GOAL** |  | **LONG-TERM OBJECTIVE** |  | **SHORT-TERM OBJECTIVE**  |  | **STRATEGIES** |
|  |  |  |  |  |  |  |
| **PART B: BINGE DRINKING****City/Community #1:** **[insert name]**Insert a SMART Goal here that could be achieved in about 5 years that addresses binge drinking if it was a priority in the target city/community.**INSERT ADDITIONAL PAGES IF MORE CITIES NEED TO BE ADDED** |  |  |  |  |  |  |
|  | **🡫 ACCESS AND AVAILABILITY** |  |  |  |  |
|  | Insert a SMART long-term objective here that could be achieved in 2-4 years that addresses access and/or availability.  |  |  |  |  |
|  |  | **🡫RETAIL ACCESS BY MINORS** |  | If selected as a priority, insert a brief description of possible strategies to address the short-term objective. |
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