Evidence Based Practice Unit

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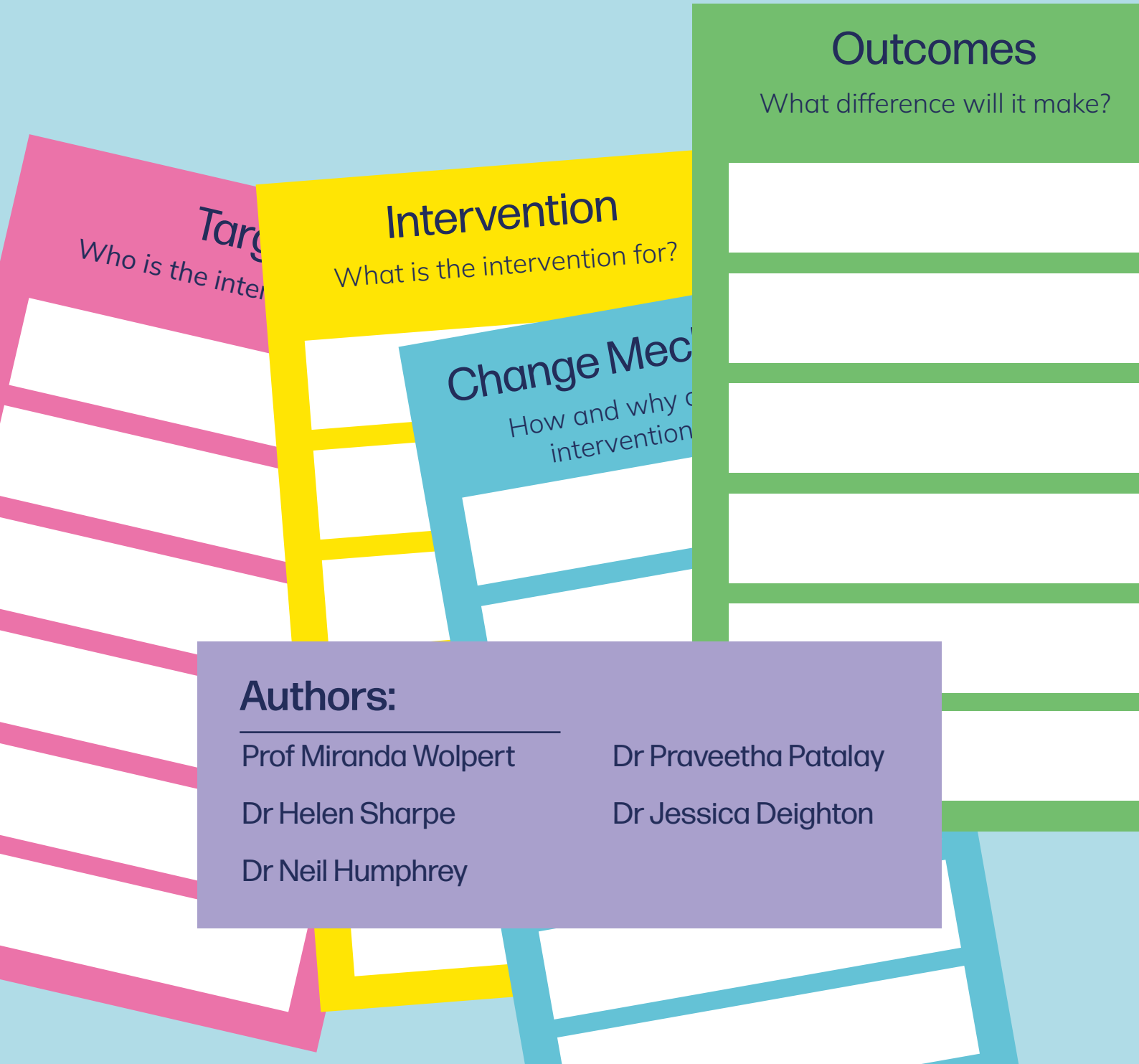
UCL

Logic Model



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EBPU LOGIC MODEL

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Aim of this booklet

Gaining conceptual clarity on the logic underpinning complex interventions is a key priority in child mental health and beyond.[1]

A number of approaches for producing logic models for complex interventions have been developed.[2] We developed the EBPU Logic Model to be as simple and accessible as possible.

This one-page template for a logic model was first developed by Dr Helen Sharpe when she was working at the Evidence Based Practice Unit and has since been used in a wide variety of projects.

We find that the EBPU Logic Model helps people to clarify their thinking and enables them to debate appropriate evaluation strategies more clearly.

We have also found that even in this simplified form it still takes some time to understand how to use it and to include the right level of information in each column. We have produced this booklet to guide others through the process.

This booklet comprises the following sections:

- A blank template for the EBPU Logic Model
- A step-by-step guide on how to complete a logic model
- A worked example.

It should be possible to apply the model to any intervention.

We are interested to hear from you if you use this template. Please let us know how you find it: ebpu@annafreud.org

Miranda Wolpert, Helen Sharpe, Neil Humphrey, Praveetha Patalay and Jessica Deighton (February 2016)

1 Senn, B., Kirsch, M., Sanz, C. C., Karlou, C., Tulus, K., De Leeuw, J., & Ringner, A. (2013). Developing and evaluating complex interventions: the new Medical Research Council guidance. *Studies,*59, 587–592.
2 De Silva, M. J., Breuer, E., Lee, L., Asher, L., Chowdhary, N., Lund, C., & Patel, V. (2014). Theory of Change: a theory-driven approach to enhance the Medical Research Council's framework for complex interventions. *Trials,* 15(1), 267.

Logic Model

Target

Who is the intervention for?

Intervention

What is the intervention for?

Change Mechanisms

How and why does your intervention work?

Outcomes

What difference will it make?

Moderators

What factors will influence the change process?

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Completing a logic model

We suggest you complete the model in the following order (NOT simply left to right)

Target

Who is the intervention for?

1. Target population

Who is the intervention for? Who will receive the intervention?

Think about who the intervention is aimed at.

This may be one group of people or several different groups (e.g. parents and children).

Put in as much detail as possible about each group (e.g. age, professional characteristics, any other key attributes).

Intervention

What is the intervention for?

2. Intervention

What exactly is the nature of the intervention(s)?

Ensure that all aspects of the intervention are listed and include as much information as you can about what each component entails.

To do this, you may find it helpful to supplement the logic model with a TIDieR[3] framework for each intervention. This helps you to record the name of the intervention, why it is being used, what materials are involved, what procedures are involved, who provides it, who receives it (covered in the logic model by the target population column), how it is provided, where it is provided, when it is provided and how much of it is provided, and any tailoring undertaken for the particular context.

3 Hoffmann, T. C., Glasziou, P. P., Boutron, I., Milne, R., Perera, R., Moher, D., ... & Lamb, S. E. (2014). Better reporting of interventions: template for intervention description and replication (TIDieR) checklist and guide. BMJ, 348, g1687.

Completing a logic model

Outcomes

What difference will it make?

3. Outcomes

What do you hope will happen as a result of the intervention?

The outcomes are what you hope to achieve as a result of the intervention; what impact you want to have. Make sure that your outcomes are exactly worded and agreed by all relevant stakeholders.

When designing an evaluation, it is important that you consider how quickly you would expect to see a change for a particular outcome (e.g. within a week, a month, six months). You might want to star or code outcomes as short term or long term, using whatever definition of short and long is relevant in your context.

Change Mechanisms

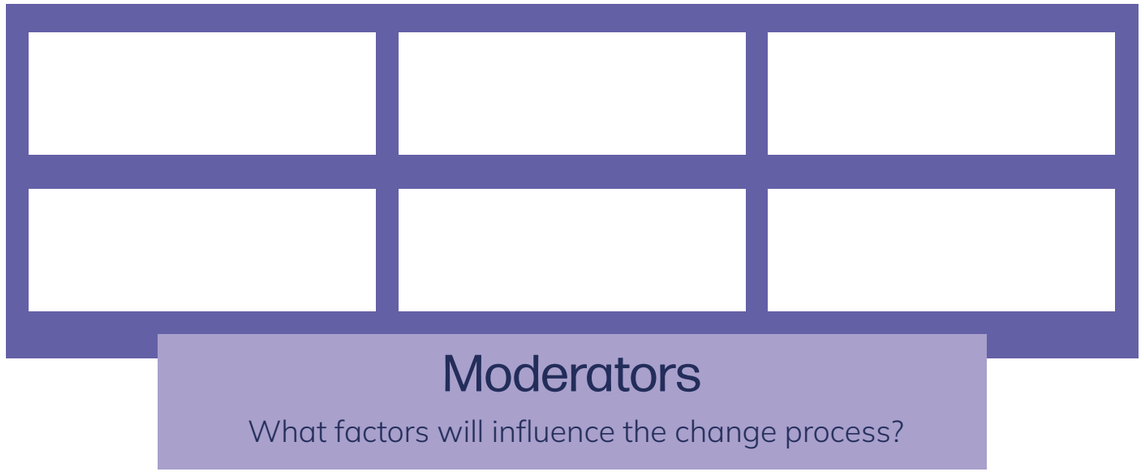
How and why does your intervention work?

4. Mechanisms

How will the intervention lead to the outcomes that you expect?

The mechanisms are the things that link the intervention to the outcomes. Think about why it is that you think the intervention works. It is good practice to consider the academic literature when determining likely mechanisms. Your intervention may also be based on a theoretical model that can help to inform potential mechanisms.

Completing a logic model



5. Moderating

What factors will influence whether the intervention leads to the outcomes you hope for?

Consider what factors might support or derail the intervention. You might think that the intervention will work well in particular settings or might be less effective with particular groups of individuals.

6. Coherence

Does everything connect together?

Consider if there is a mechanism or outcome reflecting each element of the intervention? If there is more than one target group (e.g. parents and children), is this reflected in the outcomes?

7. Choosing

What measures might be used to measure elements in each of 1 – 5 above?

Once you have a logic model, you can start to build a strategy for evaluating the intervention. This means measuring as many components of this model as you can. For a smaller evaluation you should focus on the outcomes. For each outcome consider how you will measure it.

Remember that you may be able to use information that is already being collected (e.g. school attendance data). If not, you may need to consider introducing a new way of measuring it (e.g. a questionnaire).

A training initiative for schools and mental health professionals

Worked Example

Target

Who is the intervention for?

- School senior leadership team
- Educational psychologists
- Clinical commissioning group mental health lead
- School leadership team
- NHS child mental health provider
- School nurses and school counsellors

Intervention

What is the intervention for?

- Two face-to-face CASCADE workshops
-
- Sharing best practice national events
-
-
-

Make sure you have a separate TIDieR framework for every discrete intervention.

Change Mechanisms

How and why does your intervention work?

- Airing issues
-
- Increased sense of agency of all target groups to make best use of limited resources
- Facilitation of relationships
- Encouraging and validating practice
-

Don't feel every box needs to be filled.

Outcomes

What difference will it make?

- Shared view of strengths and limitations of capabilities and capacities of all target groups
- More knowledge of resources to support mental health of target groups
- More effective use of existing resources
- Improved joint working between target groups
-
-

If you run out of space put multiple groups in one box. Key is to have everything on one page.

Moderators

What factors will influence the change process?

- Resource capacity across target
-
-
- Target group engagement
- Policy promotion of joined-up working
-
- Existing joint working
- Structures in place to support joint working
-
- Allocation of school funding
- Mental health already in schools
-

Worked Example

A training initiative for schools and mental health professionals

1. Target population

The training is for mental health professionals and for school staff.

2. Intervention

Here we list the key components of workshops, online resources and events. We have also separately described the components in detail using the TIDieR approach.

3. Outcomes

These are worded in collaboration with the commissioners of the training. We focused on outcomes that were achievable within the time frame of the project.

4. Mechanisms

These draw on academic literature and stakeholder views about why and how we think the intervention will lead to the outcomes.

5. Moderating factors

These are shared with funders and those undertaking the intervention to ensure that these are considered as part of the evaluation of outcomes.

6. Coherence check

We checked that the mechanisms and outcomes reflected each of the target populations and each of the components of the intervention.

7. Choosing measures

We agreed to use questionnaires and interviews that specifically addressed the four key outcomes and (where possible) the mechanisms.

Notes

Evidence Based Practice Unit

A partnership of

Anna Freud UCL

Founded in 2006 as a collaboration between UCL Faculty of Brain Sciences and Anna Freud, the Evidence Based Practice Unit (EBPU) bridges cutting-edge research and innovative practice in children's mental health.

We conduct research, develop tools, provide training, evaluate interventions and disseminate evidence across four themes: risk, resilience, change and choice. Our vision is for all children and young people's wellbeing support to be informed by real-world evidence so that every child thrives.

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