Oklahoma MIECHV Expansion Program Logic Model

Assumptions	Inputs/Resources	Activities	Outputs	Short-term Outcomes	Long-term Outcomes	
HV programs target different outcomes Overall MIECHV program outcomes are enhanced when program activities are targeted at neediest populations	OK MIECHV staff & consultants Funders: MIECHV federal agencies Counties: Carter, Comanche, Garfield, Kay, Muskogee, Oklahoma, Tulsa	Revamp referral, intake, triage processes	Central, electronic referral, intake, triage system	Interagency MOUs, universal & central referral system	↑ efficiency & strengthen match of client to provider	Aim 1
		HV interagency coordination	Est. local HV coalitions	Agency meetings, peer-learning	Strengthen client service continuum	
		Dedicate local HV ambassadors	Est. community connector agencies	Interagency MOUs, hire connectors	↑ awareness & use of HV	Aim 2
	Programs (and Models): - C1 (NFP) - Start Right (HFA) - OSDE-PAT (PAT) - OSDH-PAT (PAT) - SafeCare (SafeCare)	Marketing campaign	Est. professional ad campaigns	Radio, TV, web, print, street ads	↑ awareness, appeal, & use of HV	
		Expansion of HV	Increase providers, programs, capacity per county	Increase clients served per county	Greater impact leads to further state expansion	Aim 3
Problem Statement HV programs have greatest impact in high risk communities	State Collaborators: county agencies, model developers, implementation agencies, Smart Start, Child Guidance, Community Connector agencies, MIECHV CoP-E Communities, Sustainable Implementation Committee, HV Parent Partnership Board	New HV enrollment & retention strategies for clients and staff	↓ staff turnover & ↑ professional development; ↑ # families enrolled, served, graduating, & meeting HV goals	Establish best practices on HV enrollment & retention	↑ maternal & child health, school readiness, economic self-sufficiency; ↓ child injuries, abuse, neglect, ER visits, domestic violence	
		Community Needs Assessment	Psycho-social assessment data	Survey instrument developed and disseminated to potential HV clients	Report on service needs for home visitation, developmental delays and autism, sexual behavior problems, abuse & neglect potential, school readiness	Aim 4
	Other local supports	Evaluate effectiveness of HV	Quasi-experimental & instrumental comparison of MIECHV benchmarks & constructs	Baseline benchmark & constructs data collection of community comparison group and HV clients	HV effectiveness findings on benchmarks & constructs	Aim 5
		Other system improvements: Staff trainings, fidelity monitoring, quality assurances	Q.I. feedback loop to stimulate & inform HV system improvements	Survey, focus group & qualitative interview data on desired system improvements	Est. Q.I.Q.C. evaluation system; increased workforce competence	