

# Logic Model Template

## Program Name: Counselling and Support Services

Successes

Potential Improvements

Objective			
Provide support to individuals (16+) living with mental health and/or addictions issues			
<b>Inputs</b> <ul style="list-style-type: none"> <li>Individuals, Couples and families</li> <li>Consulting supervising clinicians</li> <li>Manager</li> <li>7 FTE clinician (RSW)</li> </ul> <b>Future:</b> <ul style="list-style-type: none"> <li>OT, psych, registered</li> <li>Meeting space (40% in person)</li> <li>Hardware, Software, Zoom, Phone</li> <li>PPE provisions, tests (COVID)</li> <li>Financial resources (private care, necessity)</li> </ul>	<b>Activities</b> <ul style="list-style-type: none"> <li>Equity – consider stigma, cultural norms, language, personal needs v system one-size solutions, Each person is unique (maintaining wellness)</li> <li>Online (ZOOM) caregiver group – talk about strategies, ideas, resources</li> <li>Professional dev</li> <li>Intake</li> <li>Assessment</li> <li>Clinical supervision</li> <li>Peer supervision</li> <li>Up to 2 years, support (Connect to professional – SELF CARE - share openly, problem solve, validation, expression)               <ul style="list-style-type: none"> <li>Psychotherapy (Tech: Zoom, supportive listening)</li> <li>Group Support</li> <li>Intensive case management (housing, legal, support, knowledge building, system navigation, advocacy, self care, addressing shame)</li> </ul> </li> <li>Integrating services</li> <li>Documentation, e.g.:               <ul style="list-style-type: none"> <li>letters</li> <li>ODSP admin</li> <li>clinical notes</li> </ul> </li> <li>Discharge planning</li> <li>Post discharge follow as required</li> </ul>	<b>Outputs</b> <ul style="list-style-type: none"> <li>Therapy</li> <li>Peer connections</li> <li>Community support</li> <li>Case management (access, support, across sector)               <ul style="list-style-type: none"> <li>Advocacy for service access (immigration, medication, ODSP, court)</li> <li>Financial as appropriate</li> <li>Additional supports (PSW, friends and neighbours)</li> </ul> </li> <li>Connection to services -set-up cell phones or tablets</li> </ul>	<b>Outcomes</b> <b>Short-Term</b> <ul style="list-style-type: none"> <li>Reduces stigma around therapy</li> <li>Improve system usage -medical appointments online</li> <li>Symptom reduction</li> <li>Health outcomes</li> <li>Navigate services</li> <li>Life stability (housing, custody, benefits, work/school) - boundary setting (interpersonal stress)</li> <li>Personal Safety</li> <li>Respite</li> <li>Reduction in social isolation</li> </ul> <b>Mid to Long-Term</b> <ul style="list-style-type: none"> <li>Quality of life improved</li> <li>Inner peace</li> <li>Reduced system usage (ED, distress lines, etc)</li> <li>Belonging and inclusion in the community</li> <li>Reduction in social isolation</li> </ul>

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### Ideas

- Respite: relationship with org that provide monthly care (e.g.\$300)
- Increase OAS to an amount of money that realistically supports what people need in order to live a life with dignity and this money would increase the greater the person's needs were
- (call and get service in timely manner) Greater ease in accessing counselling supports to protect burn out, improve self care, boundaries, managing family dynamics - currently our wait list is very long and closed - addressing this and ensuring our team is fully staffed
- Providing free technology to clients to access programs virtually; this could also be internet access, phones, tablets
- More income for staff to manage staff retention and institutional/organizational memory
- (more staff=more groups) Psychotherapeutic groups targeting building social networks; boundaries; increasing interpersonal effectiveness;
- more psw's with pay that is equal and respectful to the amazing work that they do.
- Increased access to material resources – grants based? – to support costs that may not be covered by other sources of funding (groceries, late bill payments, medical costs) - this may be especially important for caretakers who feel pressure to also financially support dependants

### Session Feedback – What's Next?

- Focusing on the needs of caregivers for 90 minutes, think about population, brushed aside because we have a team for that – they are taken care of elsewhere.
- Brought up frustration of systemic issues, organizational issues – what now?
- Don't' really think about caregiver – different take for me
- Problem: how will this be implemented (is there going to a change?) Monies to move things along.
- Happy these ideas are down on paper. Biggest barrier: money.
- Helpful to have an opportunity to reflect on bigger picture issues. Understanding a new way. Connect to the program – response and limits.
- Frustration: access to resources, cuts to funding
- Humbling to hear it from the frontline – very different perspective