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| **LOGIC MODEL** | | | | | | | | |
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| **INPUTS** |  | **PROCESS** | | | | **OUTCOMES** | | |
| List of Needed Resources |  | Activities | Outcomes | | | Short-term | Intermediate | Long-term |
| **Financial**  $250,000.00  **Human Resources**   * 2.5 Staff * 12 Volunteers * 3 Peers   **Materials**   * Syringes and other IDU equipment * HIV and HCV Test * Educational materials * Site Poster * 2 computers   **Partnerships**   * Referral Orgs * Law Enforcement |  | Launch | * Convene Quarterly Advisory Board meetings * Hire new staff * Purchase 1 Mobile Van | | | Community input on SSP implementation  Provision of SSP services | Ongoing Stakeholder engagement  Ongoing services | SSP services are an established community resource |
|  | Communication | * Promotion Plan implemented by week 4 * Provide monthly updates to stakeholder groups * Quarterly information dissemination through community mass media | | | Increase and maintain stakeholder and community at large awareness of SSP services and impact | Established 2-way communication channel for informational inquiries and problem solving | Community support for SSP |
|  | Peer Outreach & Navigation Services | * 4 hours/day @ 3 days/week (48 weeks) * 300 referrals and navigation support to syringe and/or social services * 150 referrals and navigation support to screening and healthcare services | | | Increase awareness of SSP, social, healthcare, and social services among PWUD  Increase successful referrals to social, healthcare, and drug use treatment services | Increase local PWUD resource utilization  Increase utilization of social, healthcare, and drug use treatment services | Decrease unsafe injection drug use behaviors |
|  | Mobile Needle Exchange | * # Needles Exchanges * 4 hours/day @ 3 days/week (48 weeks) * Screen 300 PWUD for HIV and HCV * Link 200 participants to supportive social services * Link 200 participants to healthcare, mental health, behavioral health, medically assisted treatment, and/or drug treatment/recovery services | | | Increase access to safe injection drug use equipment  Increase access to safe needle disposal sites  Increased access to wound care  Early Identification and treatment of communicable diseases | Decrease needle sharing and unsafe injection drug use practices  Increase safe disposal of needles and syringes  Improved monitoring and surveillance of communicable diseases | Decrease incidence of communicable disease rates  Decreased negative health impacts (e.g. sepsis)  Improved mental health |
|  | Stationary Needle Exchange Site |

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| **SMART OBJECTIVES** |
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| **ASSUMPTIONS** | **CONTEXTUAL FACTOR** |
| * Funding will remain stable throughout the program period * Promotion of services is best accomplished via word-of-mouth and existing communications channels * Increased access to needles and disposal sites will impact needle use and disposal behaviors * Communicable diseases (HIV, HCV) in the county are primarily due to needle sharing practices * Law enforcement supports needle exchange services | * Existing city ordinances aimed to disrupt homelessness * Target populations socioeconomic status: 65% homeless |