

Theory of Change / Logic Model

Target Population <ul style="list-style-type: none"> Youth enrolled in behavioral health home services and their families Youth at risk for out of home placement and their families 		Theory of Change GOAL: Create a network of high-quality, evidence-based services available to youth and families most in need. <ul style="list-style-type: none"> A comprehensive system of care for Maine youth includes access to a high-quality, evidence-based behavioral health services; So, HFW facilitators and supervisors, Youth Peer Support Specialists and Family Peer Support Specialists will receive model and state-specific training and coaching. Parents, caregivers, and community stakeholders will also receive education about the EBPs and information on how to access services; To increase access to evidence-based behavioral health services; So that Maine will have a high-quality workforce and service array to prevent maltreatment and out-of-home child placement. 	
Inputs <ul style="list-style-type: none"> HFW, Youth Move, and PEARLS curricula National Wraparound Implementation Center (NWIC) (model purveyor) Innovations Institute (model purveyor) Youth Move National (model purveyor) Children and families enrolled in HFW Public Consulting Group (COE, trainer and evaluator) 			
Interventions	Outputs	Outcomes	Impact
<ul style="list-style-type: none"> Hire and maintain staffing for 5 HFW facilitators, 5 youth peer support coaches and 5 family peer support coaches; Coordinate training and technical assistance with model purveyors; Provide technical assistance for HFW implementation; Complete routine evaluation of COE and HFW services Develop community partnerships to support implementation 	<ul style="list-style-type: none"> Number of coaches certified in HFW, PEARLS, and Youth Move Number of providers trained Number of youth and families enrolled in programming Number of training and TA requests met 	<ul style="list-style-type: none"> Improved access and participation in evidence-based programs among youth and parents Improved communication, tracking, and reporting of services for ongoing continuous quality improvement Improved HFW fidelity through ongoing coaching, training and measurement Improved family and youth experience as measured by satisfaction surveys Developed well-informed, responsive COE for behavioral health services 	<ul style="list-style-type: none"> Improved access for behavioral health services Improved access to HFW services for youth and families Improved youth and family stability and family preservation