

PHIG TTA Logic Model

INPUTS	ACTIVITIES	OUTPUTS	OUTCOMES	IMPACT
Funding from PHIG	Planning Strategic planning Develop and tailor TTA resources to contexts/recipients, proactively and responsively 	Resources such as webinars and toolkits	TTA Outcomes Knowledge & Learning • Increased knowledge of TTA available offerings/support • Increased knowledge around the FPHS • Increased peer sharing of recommended policies, processes, and programs	Strengthened Capacity of Health Departments
 Human Resources & Expertise Network of Subject Matter Experts (SMEs), subcontractors, sub-partners 	Coordination PHIG Evaluation Peer Networking Coordination across NPs and TA providers TA Triage and Proactive TA workgroup Peer networks 	Provision of relevant/timely TTA to publicly funded health departments	Relationship & Trust Building • Increased trust in TA providers • Increased recipient outreach to TA providers Use & Dissemination	Enhanced preparedness for future public health emergencies
Infrastructure • Access to resources (e.g., readiness assessments, cost	TTA Provision & Implementation • Provide timely TTA to the satisfaction of recipients	High satisfaction with TA from	 Increased utilization of TTA services by recipients Appropriate recipient progress toward PHIG outcomes 	Increased Trust in PH by the public
assessments, workforce calculators, etc.) •PHIVE platform	• Identify (proactive) and disseminate (responsive) TTA products to a broader audience	recipients and health departments	Strategy Outcomes Workforce Improved policies and mechanisms for recruitment, hiring, and staffing Strengthened leadership capabilities in the public health workforce	Increased Sustainability of Health Department Infrastructure
Coordination Mechanisms Access to resources (e.g., readiness assessments, cost assessments, workforce calculators, etc.) PHIVE platform 	 Develop Standard Operating Procedures (SOPs) Ensure linkages between evaluation data and TTA implementation(proactive and responsive) 	Utilization of best practice tools and resources provided during delivery of TTA	 Improved employee satisfaction ratings Establishment of a workforce pipeline program Foundational Capabilities Increased readiness for accreditation Increased adoption of Foundational Capabilities Development of organizational culture focusing on Foundational Capabilities in health departments 	Development of sustainable partnerships
Existing Knowledge Base	 Collect data and analyze themes across responsive TTA requests and proactive TTA Identify implementation barriers and successful peer practices Evaluate outcomes of TTA intervention 	CQI-focused data available: Monthly PHIVE data, Recipient Survey, PHIVE satisfaction survey, etc.	Data Modernization • Increased DMI capacity • State and local interoperability, including data-sharing mechanisms, particularly for tribes.	Accreditation achieved by all PHIG recipients

Assumptions

•Sustainability of grant activities beyond 5-year PHIG grant •Publicly funded health departments willingness and interest in receiving training and technical assistance