**PROGRAM DESCRIPTION**

The ***Program Description*** will support you in taking the information you gathered from the “PLAN” phase and turning that into an actionable program. The ***Program Description*** will help you clarify all the elements and intended outcomes of your program. The ***Program Description*** and ***Logic Model*** often work together; the ***Logic Model*** is a visual picture of the ***Program Description***.

For a new program, you can develop a program description after the decision has been made to implement the program. In the Planning and Evaluation Framework, this is after the “PLAN” phase has been completed and at the very beginning of the “IMPLEMENT” phase in the “Describe Program” stage.

For an existing program, you can develop a ***Program Description*** to support you during the “*Establish Key Indicators*” stage of “IMPLEMENT” or during the “*Focus Evaluation*” stage of “EVALUATE.”

Instructions:

* Complete information as directed.
* The ***Program Description*** should be updated as new evidence becomes available and your program changes. Record updates to the ***Program Description*** in the table provided and track versions in the document footer.
* After completing this tool, check the program logic.
  + Do the activities relate to the short term outcomes identified?

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| Brief Program Description |
| Please provide a brief summary of the program, the long-term/population health outcomes, the target populations and interventions. |

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| **Program Mandate** | *Please list the OPHS Program Standard(s)* |  |
| *Also list:*   * *Guidance documents;* * *Legislative requirements;* * *Alignment with the MLHU strategic plan;* * *Board of Health position statements; and* * *Other relevant mandate documents.* |  |

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| **Program Management** | *Where relevant, please list the other teams at MLHU who are responsible for delivering interventions related to this program.*  *Describe how the program is coordinated between the teams listed above including major accountabilities and reporting relationships.* |  |

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| **Community Need and Priorities** | *Please provide a short summary of the following:*   1. *the key data and information which demonstrates the public health issue and the communities’ needs for public health interventions; and* 2. *the local priorities for a program of public health interventions to address the public health issue.*   *If available, use the health need described in the PEF Situational Assessment* |  |

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| **Target and Priority Populations** | Identify the target and priority populations for this program.  For each target and priority population, provide:   1. A description of the population; 2. The associated social determinants of health and/or health inequities; and 3. The process used to identify these populations (e.g. population health data, research evidence, program data, community and political context).   Refer to the PEF Situational Assessment Stage Guide and Health Equity Stage Guide for more information. |  |

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| **Key Partners and Stakeholders** | Please name the specific community partners you will collaborate with to deliver or who are impacted by this program.  Include a description of the contribution / role of these partners in program and service delivery, the mechanism for engagement (e.g. data sharing agreements, committee tables, working groups, etc.) and frequency of engagement.  Please describe any situations where the programming provided by external partners is sufficient so that you have not had to deliver similar programming under the relevant standard.  Refer to the PEF Engage Stakeholders Concept Guide and the Stakeholder Engagement Tool for more information. |  |

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| **Intended Program Outcomes** | **Long-Term / Population Health**  *These goals are the long-term outcomes your program is trying to achieve.*  *These population health outcomes correspond to goals identified in the OPHS (2018). They should also relate to the community needs and priorities identified in the situational assessment.* |  |
| **Intermediate**  *Intermediate outcomes are changes in the determinants of health, notably changes in lifestyles, and living conditions which are attributable to a public health intervention or interventions.*  *They could also correspond to Program Outcome(s) identified in the OPHS (2018).* |  |
| **Short-Term**  *These program short-term outcomes could be objectives highlighted in the research literature you reviewed about selected strategies/activities.*  *They could also correspond to Program Outcome(s) identified in the OPHS (2018).* |  |

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| **Program Interventions / Components** | *Please provide a brief description of each intervention including:*   * *associated activities, procedures and/or processes used in the intervention;* * *who provides the intervention;* * *mode of delivery (e.g. face-to-face, internet, telephone, etc.);* * *where the intervention occurred (e.g. community spaces or other relevant information;* * *how often the intervention is delivered (schedule); and* * *outputs of the intervention.* | | |
|  | [Insert Intervention Name]  [Choose Intervention Type] |  |
|  | [Insert Intervention Name]  [Choose Intervention Type] |  |
|  | [Insert Intervention Name]  [Choose Intervention Type] |  |
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| **Key Assumptions** | What assumptions are you making about the way the program will work?  In public health, assumptions are made when evidence is lacking or conflicting. It is important that you document these assumptions so that as new evidence comes forward to validate or refute your assumptions, you can modify your program as required. |  |

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| **Highlights / Initiatives Planned** | Describe any of the key highlights or initiatives planned for 2019. These initiatives could include the implementation of new interventions, modifications and/or improvements to existing interventions, or upcoming projects. |  |

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| **Program Challenges and Risks** | Describe any challenges, issues and/or risks that are being faced by the program, its priority populations, target groups, key partners and stakeholders and the impact these challenges have on program decisions, service delivery and/or achieving the intended outcomes. |  |

# Updates to Program Description

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| **Date** | **Description of Updates** | **Updates made by:** |
| Click or tap to enter a date. |  |  |
| Click or tap to enter a date. |  |  |
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