

E.I.P Program Planning Template

Program:

Site(s):

This program is:

* New to Unison
* An existing program at Unison

This is a Fast Track review (see below):

* Yes
* No

Lead Staff Member(s):

Responsible Manager:

# **About this Template**

This template is used for the development and review of new or existing programs. As per the E.I.P. Protocol, a program is a group, community initiative, service delivery initiative (including those with partner organizations).

The purpose of the template is to help ensure that all of Unison’s programs are informed by evidence and that they are relevant, responsive and accountable to our clients and other stakeholders.

A Fast Track review applies to **hosting or delivering a program from an outside agency** that is already evidence-informed OR **replicating a program from another Unison site** that has already gone through the EIP process**.**  For a Fast Track please complete only sections 1 (Situational Assessment), 5 (Evaluative Learning) and 6 (Reporting).

# **Before you begin:**

For new programs, please ensure that a Request for Program Development form has been completed and approved by your Manager.

If you are completing this template for the first time, it is recommended that you speak to Unison’s Health Planner or an EIP Champion. They will provide you with an overview, share examples and answer any questions that you may have.

Ensure that you schedule some uninterrupted time (1-2 days) to complete this template. The actual time required will depend on the nature of the program and your previous experience with program planning.

# **Situational Assessment - The Detective Phase**

The purpose of this section is to describe the specific issues and populations groups that you wish to address through a new or existing program. Although you may already have a specific program in mind, try to think about the issues more broadly as you answer these questions.

1. What specific issues and/or needs do you want to address?
   1. Who are the populations or groups that you intend to reach through the program? What are some differences within the population to keep in mind?

Tip: Differences might include gender, age, language ability, relevant knowledge and skills, etc.

* 1. How do you know that the issues identified in 1.1 are important to the intended population/group?

Tip: Cite data from research, needs assessments, client surveys, program evaluations, etc.

* 1. Use the following chart to identify barriers, assets and opportunities (for the intended client group, in addressing the issues and needs identified in 1.1).

Tip: These do not have to relate specifically to Unison.

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| --- | --- | --- | --- |
| **Level** | **Barriers**  Why are community needs not met?  Why are issues persistent? | **Assets**  What assets help to meet needs or address the issues of concern? What helps move issues forward? | **Opportunities**  What could help with meeting needs or addressing barriers? |
| **Individual and Interpersonal** |  |  |  |
| **Organizational (incl. Unison)** |  |  |  |
| **Community** |  |  |  |
| **Societal/ Government** |  |  |  |

* 1. What do we know from available evidence about best/promising practices that have been used to address this issue(s) with the intended client group?

Tip: Where possible, use credible sources such as journal articles, evaluation reports, literature reviews or systematic reviews. Speak to the Health Planner or EIP Champion if you need assistance.

* 1. Use the following chart to identify key stakeholders (those who are involved or have in interest in this issue and/or population group).

Tip: Stakeholders may include: potential participants, staff members, potential partners, other agencies, volunteers, students, advisors, mentors, funders, networks, local politicians, etc.

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| --- | --- | --- | --- |
| **Stakeholder** | **What is their potential connection to or role in any new or existing programs?** | **What are their priorities and expectations?** | **How have they been consulted or involved in the development of this program or service? If not, how and when will they be consulted?** |
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* 1. What current or past initiatives at Unison have addressed similar issues or populations/groups?
  2. What else is going on in the community related to these issues and/or populations/groups?

# **Goals and Anticipated Outcomes – The Forecaster Phase**

* 1. What is the overall goal of this program?

Tip: A goal is a general statement describing the vision of what you hope to achieve in the longer-term (typically stated in concrete, positive terms). The planning effort is organized around being able to achieve this overall goal.

* 1. What **short-term outcomes** (results) do you expect the program to achieve?

Tips: Short-term outcomes are changes that are expected to occur shortly after the program starts. They may include changes in knowledge, attitudes or skills. They could also include changes in access to services or changes in the barriers participants are facing. List outcomes/results in bullet form. They should be SMART (Specific, Measurable, Achievable, Realistic and Timely). Use "change" words such as: increased/decreased, improved, enhanced, expanded, prevented, maintained, etc.

* 1. What **medium-term/intermediate outcomes** (results) do you expect the program to achieve?

Tip: Medium-term results represent a change that can be brought about in the life of the project given available time and resources. They often include changes in behavior or relationships. They may describe how people use or apply their new skills, knowledge or attitudes. Some programs may also have organizational, network/community and societal/policy level outcomes.

* 1. What indicators will you use to measure the outcomes identified in 2.2 and 2.3?

Tip: Indicators point to the information that you need to gather to know if the project is making a difference. Indicators measure the progress made towards achieving your desired short and medium-term outcomes. Indicators are often quantitative but they can also be qualitative.

# **Program Design – The Architect Phase**

* 1. Program Details:

Group Lifespan:

* Time-limited number of sessions

Expected start date:

Expected end date:

* Open-ended (continuing group)

Expected start date:

Group Membership:

* Closed/recurring membership (same participants returning each session)
* Open membership (new members may join at any time)
  1. What are the planned activities for this program or initiative?

Tip: Include all major activities that will be carried out including outreach, partnership development, program activities, evaluation, etc.

* 1. What are the budget requirements for this program?

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| --- | --- | --- | --- |
| Budget Item | Estimated cost  (per program cycle) | Budget Source (confirmed) | Other Potential Sources |
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* 1. What steps will you take to make the program accessible to participants?

Tip: Removing barriers to accessibility may include the provision of culturally appropriate programs and services, providing interpretation, offering childcare, optimal location and design of facilities in compliance with the accessibility legislation, extended hours and on-call services.

* 1. What steps will you take to create a safer space/environment for participants (based on anti-racist and anti-oppressive frameworks/practices)?
  2. How will this program incorporate and build on community leadership, knowledge, and the lived experiences of community members and partners to contribute to the health of their communities?
  3. Use the following chart to identify risks or challenges might you encounter and how can you prevent or prepare to deal with them.

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| --- | --- |
| Possible risks or challenges | Steps you can take to prevent or deal with this risk or challenge |
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* 1. List any formal or informal partners in the program and what is their anticipated role?

Tip: For formal partnerships with another organization, it is recommended that you develop a partnership agreement. A template is available to assist you with this.

* 1. How and when will you promote or communicate about the program with interested stakeholders over the course of the project? What are the key messages that you want to communicate to each stakeholder?

Tip: Consider using the Promotions Plan template to further develop an approach that includes stakeholder engagement and community development.

# **4. Logic Model or Theory Of Change (Optional) - The Artist Phase:**

* 1. Draw/complete a logic model or theory of change diagram (a one page program/process snapshot) and attach it to this template

Tip: Speak to the Health Planner or EIP Champion to get a copy of the Unison Logic Model template or if you need assistance.

**Note: This phase is optional.**

# **5. Evaluative Learning Plan - The Researcher Phase**

At Unison we are committed to evaluating all of our programs and initiatives to promote learning and continuous improvement.

* 1. What is the **main** purpose of the evaluative learning activities?
* Outcome evaluation: to assess whether the program is achieving intended outcomes/benefits for participants.
* Process or implementation evaluation: to determine how program activities are working and to help us understand the experience of participants/clients (important for new or pilot programs).
* Other (please describe):
  1. What specific questions do you want to answer through these activities? (What do you want to learn about and document?)

Tip: These are the questions that will guide the evaluation, not the specific questions you will ask clients or other stakeholders (the latter may be included in question 5.5)

* 1. Who needs to be involved in the evaluation and how?

Tip: consider how staff, clients and partners can be involved in co-leading the process

* 1. What considerations should you keep in mind to ensure the evaluation activities are appropriate for the program and accessible to the participants?
  2. How and when will you collect data for evaluative learning? (use the following table)

Tip: Consider a mix of formal and informal evaluation activities, including “check-in & check-out”, session debriefs, exit interviews, suggestion box, participatory evaluation discussion, survey questionnaires, focus groups, pre/post-tests, arts-based activities.

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| --- | --- | --- | --- |
| **How will you collect data for evaluation (methods)?** | **When will data be collected?** | **Key Questions**  *(attach tools if applicable)* | **Who is responsible for this activity?** |
| Group Program Feedback form[[1]](#footnote-1) |  |  |  |
|  |  |  |  |
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* 1. What resources are needed to conduct the evaluation?
  2. How and when will your evaluative findings/learnings be used to identify changes or actions?
  3. How and when will you share evaluative findings/learnings with program stakeholders (identified in section 1.6)?

# **6. Monitoring and Reporting - The Reporter Phase**

* 1. How will you keep track of program activities (e.g., dates, # registered, attendance, etc.)?
* In NOD (registered group)
* In NOD (unregistered group)
* Other (please describe):
  1. For previously existing programs only:

1. Submit a completed report template (blank copies can be found on the S drive) OR similar descriptive, evaluative and/or financial documents.
2. To what extent have program indicators been met (i.e. outputs and outcomes)? Please include reference to any performance data reports.
3. What do evaluative learnings, performance data and other reports suggest in terms of impacts, challenges, and future directions related to this program?

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This form includes some questions that are mandatory for all group programs led by Unison.

A registered group is one where participants attending the group are registered in NOD as Unison clients and linked to the group as a member with attendance recorded at group sessions. The initial state and outcomes for each individual client are documented. Participants will be asked to complete a **socio-demographic information form** at the time of registration.

For non-registered groups, participants do not have to be registered as clients in NOD. Attendance is not taken, although a count of attendees is taken at each session. These groups are designed to capture the provision of a service or activity where the identity of participants is not feasible or is impractical to record.

1. [↑](#footnote-ref-1)