Agency Name

Program

**Evaluation Plan**

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Prepared by:

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# Project Summary

Description of the project to be evaluated included:

* How long has it been operating?
* Goals and objectives
* Key activities involved in achieving goals and objectives

# Evaluation Scope and Purpose

* Describe what is to be learned from the evaluation
* Who will benefit
* How will the results be used and communicated

## Stakeholder engagement

* Who are the stakeholders in the evaluation?
* How will they be involved?

## Evaluation questions

# Methods

Describe the approach, methods or strategy for conducting the planning or evaluation project

* Recruitment and consent procedures
* how will participants be selected?
* How many participants will be included?
* Who will be excluded (if any) and why?
* How will you approach people to participate?

Describe how data will be collected and analyzed

## Program Evaluation Framework

|  |  |  |  |
| --- | --- | --- | --- |
| **Evaluation Questions** | **Indicators** | **Data Sources** | **Method** |
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# Potential harms and ethical issues

If the answer to any of the following questions is “yes”, then ethics approval should be sought from a Research Ethics Board.

* Is there an explicit requirement for review of this project by a research ethics board (REB) as part of a funding arrangement?
* Does any organization or individual involved have a requirement for review of this project by a research ethics board?
* Will the result of this project be published in an academic journal?

## Risk and Risk mitigation

Answer risk mitigation screening questions in Appendix A. (Remember to delete Appendix A from the final evaluation plan). Address any questions where the answer was “yes” with the following:

* Describe the potential risks for participants.
* Describe the potential benefits to participants.
* Describe the potential risks for your organization.
* Describe the potential benefits for your organization.
* Describe steps to minimize (i.e., decrease the number of them) or mitigate risk (i.e., decrease the severity of the remaining ones), as described above, for both the participants and your organization.
* Describe how you intend to protect the privacy and confidentiality of participants in your project and/or how to intend to give credit to and value peoples’ information and input.

# Privacy, confidentiality and data access

* Describe how you intend to protect the privacy and confidentiality of participants in your project and/or how to intend to give credit to and value peoples’ information and input.
* Describe how you will retain, store, and secure the data and/or how data will be given back to the community or individuals.
* Describe how you will determine whether or not informed consent is needed in this project.
* If consent is needed, describe how you will obtain it and how it makes sense in the context of the relationship with and between participants. ATTACH ANY FORMS AND/OR SCRIPTS THAT WILL BE USED.

*Sample text for data collection*

All data collected will be stored electronically on a password protected computer at Health in Common’s office (200-141 Bannatyne), the data will also be stored on Health in Common’s password protected Google Drive and the physical information will be kept in a locked file cabinet at Health in Common’s office at (200-141 Bannatyne). All data gathered is the property of **Program Name** with co-investigators having access to the data for publication and knowledge exchange purposes. Upon completion of the final evaluation report, all data will be securely transferred to **Program Name** and stored for up to five years at which time it will be destroyed.

# Dissemination

# Limitations

# Activities & Timeline

|  |  |  |
| --- | --- | --- |
|  | Responsible | Timeline |
| 1) Evaluation planning and tool development |  |  |
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| 2) Data collection |  |  |
| *2a)* |  |  |
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| *2b)* |  |  |
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| *2c)* |  |  |
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| 3) Data analysis |  |  |
| *3a)* |  |  |
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| *3b)* |  |  |
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| 4) Reporting |  |  |
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# Budget (if applicable)

Include full evaluation budget including Health in Common’s fees (from schedule A) and any additional expenses (e.g. food, honoraria, travel etc.)

|  |  |
| --- | --- |
| **Description** |  |
| Deliverable |  |
| Contract fee |  |
| Other (specify) |  |
|  |  |
| **Total** |  |

# Appendix A – Risk Mitigation Screening Questions

Answer these questions to determine level of risk then delete this page from the final evaluation plan

1. Does the project impose any additional burdens on participants beyond what would normally be expected or experienced during the course of care, program participation or role expectation?
2. Does your project involve collection, use or disclosures of health information, biological samples, or other personal or private information where we are requesting that the requirement for informed consent be waived?
3. Deception of intended incomplete disclosure of the nature of the project?
4. Possibility that a breach of confidentiality could place participants at risk of legal liability, denial of insurance or other damage to financial standing, employability or reputation?
5. Questions or procedures that might cause participants psychological distress, discomfort or anxiety beyond what a reasonable person might expect in day-today interactions?
6. Questions that involve sensitive issues such as sexual orientation or practices, illegal behaviour stigmatizing conditions or diagnoses, religious or cultural beliefs or practices?
7. A power relationship between the investigator and participants (manager/employee, therapist/client, teacher/student)?
8. A real or potential conflict of interest between an investigator and the sponsor of the investigation?
9. Special populations or any individuals or groups in a socially vulnerable position?
10. Use of personally identifiable data, documents, records or specimens originally collected for therapeutic purposes?
11. Collections of data from voice, video or image recordings?
12. The use of tests, survey procedures, interview procedures, oral history, focus groups or observation of public behaviour where the participants can be identified directly or indirectly through information recorded?
13. The use of tests, survey procedures, interview procedures, oral history, focus groups or observation of public behaviour where the participants would like to be credited for their information?
14. Is this a student research projects?
15. A person who does not normally have access to participants records for clinical care and whose use of records is for a secondary purpose?
16. Is the information to be collected already available elsewhere?