

# PROGRAM DESIGN

A Practical Guide

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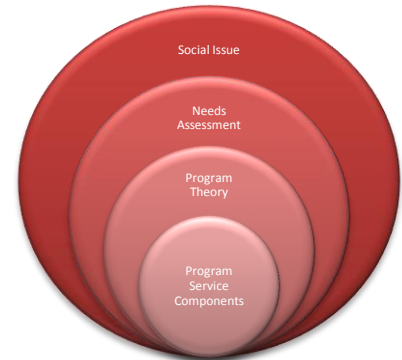
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## INTRODUCTION

Designing social programs is both a science and an art that requires careful analysis and attention to detail. It is a creative problem solving process to complex social problems. Thoughtful program design takes into account sound research knowledge and best practices to determine the critical elements required to meet unique client needs and alleviate a particular social problem. The end goal of program design is to establish the service or combination of services which have the best possible chance of achieving the program objectives and improving quality of life for clients.



It is important to note the difference between planning *new programs*, planning *program changes* to an existing program, or *articulating the design* of an existing program.

**New programs** are typically geared toward finding new solutions to long-prevailing problems. New programs also result from newly emerging problems that arise from changing social, political or economic environments.<sup>1</sup>

**Program changes** in existing programs are geared towards modifying present services to enhance impact for the client and the outcomes that are intended for them.<sup>2</sup> The need for program changes may result from funding cuts or when new funding is secured for expanded services. Examples of program changes may include redefining eligibility criteria, changing the number of clients served, modifying the way services are delivered, or improving quality standards. Program redesign is typically much more intensive than designing a new program.

**Articulating the design of an existing program** is necessary when details of the design may be implicit but need to be made explicit to either facilitate evaluation or to review program fidelity. Articulating an existing design assumes that there may be essential components missing from the overall design such as an articulated program theory or a program logic model.

This manual is intended to be a practical developmental guide in program design for either improving current programs or creating new programs. The content was developed from current literature and best practices in program design specifically for non-profit organizations. Among the approaches that informed this manual, two worth noting are *evidence-informed program improvement* (EIPI) and *effectiveness-based program planning* (EBPP). Both approaches

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<sup>1</sup> Pawlak, E.J., Vinter, R.D. (2004). *Designing & Planning Programs for Nonprofit &*

*Government Organizations*. San Francisco: Jossey-Bass.

<sup>2</sup> Ibid.

emphasize the importance of using precision and research to develop program services which will have the most success in resolving a social problem and meeting the needs of clients.<sup>3</sup>

The program design process begins with problem analysis and needs assessment which will inform the development of a problem theory upon which core program services are built. This manual provides a framework through the steps and components that can be applied to either existing programs or new designs. Examples from one consistent program will be provided whenever possible.

## INITIATION PHASE

The purpose of the Initiation Phase is, first, to assess if your organization is ready for the program design process and, secondly, to identify and gather the information needed to initiate planning. This information includes both qualitative data such as stakeholder interviews and quantitative data such as empirical research. Once you have established that your organization is ready for program design, the data collected in the Initiation Phase will form the groundwork for the program theory.

### Change Readiness

Undertaking program design or redesign requires a commitment of time and a desire to see change happen within the program. To achieve the benefits of program design or redesign, you must be prepared for change as the resulting new design will likely mean leaving behind old ways of doing things. The reward will be a program that is firmly grounded in best practices with the tools needed to demonstrate what the program does and why the program improves quality of life for clients. Some of the signs that indicate it would be valuable for an organization to invest in reviewing a program's design include program issues such as low admissions, lack of funding opportunities, or the desire to improve, through meaningful outcome measures, how program success is articulated.

Program design involves the whole organization. It requires the agreement and commitment of the leadership team, the engagement and participation of staff and stakeholders, and a large investment of time and critical thinking. A **Change Readiness Assessment** is a useful mechanism to evaluate whether or not your organization is ready to embark on a program design review. A copy of this tool can be found in **Appendix A** at the end of this guidebook.

*The ideas embodied in innovative programs are not self-executing.*

~ J. Petersilia

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<sup>3</sup> Kettner, P.M., Moroney, R.M., Lawrence, L.M. (2008). *Designing and Managing Programs*. (3<sup>rd</sup> ed.).

## Gathering Data

Once an organization has deemed itself ready to embark on the program design process, one of the first steps is to identify and gather key data about the program and available research in the field. This information will inform where and how the design process should proceed. Stakeholder interviews should be conducted early in this stage to focus the research.

A conflict resolution plan is also helpful to establish at the outset of planning. For example, if the research highlights a discrepancy between what the program is doing and what best practice guidelines advise, you will need to have a clear plan for addressing and resolving such conflicting issues. Determining at the outset who (the program manager, director, CEO) will make the final decision in cases of disagreement will set up the design process for success.

## Key Documents

Key program information to review at the beginning of the design process includes:

- Mandates and expectations of the organization and the funder(s) in regards to the program
- Organization vision, mission, and strategic plan
- Current organizational chart
- Recent evaluation reports
- Program logic model
- Literature on best practices that current program services are based upon
- Assessment and measurement tools and scales
- Therapeutic and treatment models the program prescribes to
- Client handbook
- Satisfaction Surveys
- Referral and Intake forms
- Program curriculums
- Job descriptions - staff training, certificates and education required for positions

## Identifying Stakeholders

Identify the key stakeholders who should be included in the program planning. Their perspectives enrich the design process by clarifying expectations for the program. Some general tips and guidelines on interviewing are provided in **Appendix B** as well as a "Consent for Research Participation" form in **Appendix C**. Stakeholders may include:

- Program staff and management
- Past and/or current clients in the program
- Board members
- Funders
- Other professionals with expertise in the program's content area
- Community organizations that are linked to the program's services

## Site Visit

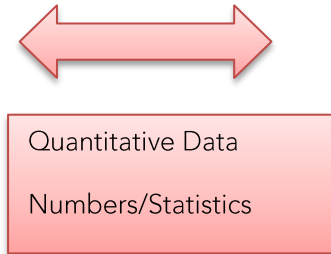
- Arrange time to visit the site(s) and observe the program if it is an existing program

## Quantitative and Qualitative Data

Throughout the design process, both quantitative and qualitative data are used to establish an empirically sound program design. These sources are valuable for understanding the social issue, developing the program theory, determining the program activities, and forming the basis for later program evaluation. To give breadth and depth to the data collected, it is important to include both **quantitative** and **qualitative** indicators.<sup>4</sup>

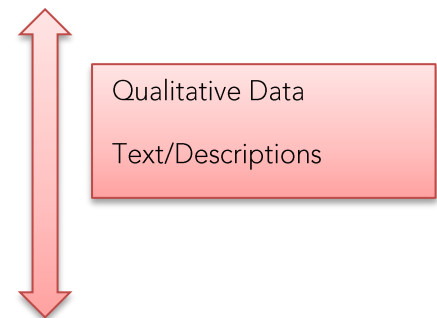
Quantitative research involves literature and statistical data collection. It includes tasks such as:

- Reviewing government, funder, and scientific research and journals that provide information on social issues
- Compiling a resource list of available services that already exist in the community



Qualitative data is collected through surveys and interviews with key stakeholders. The benefits of gathering data through interviewing and surveying help to:

- Identify barriers to utilization of services
- Build awareness and support around the social problem
- Establish a baseline for data and reference points for evaluation later on<sup>5</sup>



## Program Design Literature Review

A **literature review** captures all relevant research about the program's services and forms the basis of the program rationale. The review should include an exploration of key areas such as literature related to the problem, research related to specific interventions for the problem, results of program evaluations, and any other studies related to understanding or examining the problem.<sup>6</sup> The results of the literature review provide an empirical basis for the program design

<sup>4</sup> Ontario Public Health Association. (2009). *Towards Evidence-Informed Practice*. <http://www.teip.hhrc.net/>

<sup>5</sup> Kettner, P.M., Moroney, R.M., Lawrence, L.M. (2008). *Designing and Managing Programs*. (3<sup>rd</sup> ed.). Thousand Oaks: Sage.

<sup>6</sup> Calley, N.G. (2011). *Program Development in the 21<sup>st</sup> Century*. Thousand Oaks: SAGE.

and the program's identified interventions. An overview of how to conduct a literature review for program design is provided in **Appendix D** at the end of this guidebook.

*The need for data to justify predetermined service planning decisions is being replaced by a need for data that will lead to a clearer understanding of social problems and will help in identifying the most effective directions for planning decisions.*

~ P.M. Kettner, R.M. Moroney, L.L. Martin, *Effectiveness-Based Program Planning*

## ANALYSIS PHASE

The purpose of the Analysis Phase is to critically examine the social problem that is being addressed by the program. **Social problems** include existing problems that continue to need resolution (e.g., homelessness, child abuse), problems that have developed new features (e.g., the homeless now includes families) and problems that are critical or emergent (e.g., children with AIDS).<sup>7</sup> Problem analysis is used within this phase to understand the nature and scope of the social problem, to define the target population to be served, to identify and prioritize the needs of the target population, and to determine the services required to resolve the problem. Having a thorough understanding of the problem and its characteristics is critical for creating a strong evidence-based theory which will lead to a program that successfully changes lives.<sup>8</sup>

### Considering Context

Social problems exist within a context of economic, socio-political, and cultural conditions. When considering context, the external factors that are likely to influence the program's ability to achieve its expected results need to be assessed for how the program might mitigate or adapt to such influences.<sup>9</sup>

The contextual factors that a program exists within may affect aspects such as the following:

- Program relationships and capacity
- Program implementation
- Program participants
- The speed and degree to which change occurs

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<sup>7</sup> Pawlak, E.J., Vinter, R.D. (2004). *Designing & Planning Programs for Nonprofit & Government Organizations*. San Francisco: Jossey-Bass.

<sup>8</sup> Kettner, P.M., Moroney, R.M., Lawrence, L.M. (2008). *Designing and Managing Programs*. (3<sup>rd</sup> ed.). Thousand Oaks: Sage.

<sup>9</sup> Ibid.

- Staffing patterns and resources available <sup>10</sup>

## Identifying & Analyzing the Social Problem

It is vital to take the time to understand the situation and to carefully define the problem and its causes. This may be the most important step in program development.<sup>11</sup> Once the problem is identified and clarified, it needs to be analyzed to determine its scope, nature and distribution. This process involves researching literature and surveying key stakeholders:

- What is the social problem?
  - What are the causes of the problem and the factors associated with its presence?
  - What are the social, cultural, economic and political symptoms of the problem?
  - Who judges it to be a problem and why?
  - What are the likely consequences if nothing is done to resolve the problem?
- Who is affected by the problem?
  - Who are they?
  - How many people are affected?
  - What are their demographics?
  - Are there ethnic and gender considerations?
  - Where are they located geographically?
- Who else is interested in the problem?
  - Who are the stakeholders?
  - What other programs or services address this issue?<sup>12</sup>

*Education, learning, and changing are so closely related to problem solving that they may all be the names for the same thing.*

~ George Prince

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<sup>10</sup> Ibid.

<sup>11</sup> Planning, Implementing, and Evaluating a Sexual Assault Prevention Program. Colorado Department of Health and Environment's Sexual Assault Prevention program, <http://www.cdph.state.co.us/>

<sup>12</sup> Barkman, S. (2000). Utilizing the Logic Model for Program Design and Evaluation. Knowledge to Go: Purdue Extension, University of Purdue, IN.

## Needs Assessment

When the problem has been analyzed and there is a clear picture of who is affected by it, it then has to be translated into needs. **Need** refers to something that is essential to maintain well-being (e.g. self-esteem or food) or something that is necessary to relieve a state of deficiency or deprivation (e.g. inadequate job skills or homelessness).<sup>13</sup> A **needs assessment** determines if there really is a need in your community for the services your program will offer. It is also essential to establish that the program is not duplicating any existing services within the community. A program will be ineffective if the services are not properly designed to meet a need or if the need does not actually exist. The needs assessment should be established on evidence and supported by the literature review.

Keep in mind that when a social problem is attended to and services are provided, public expectations are raised and demand increases. Potential clients who might need services tend to seek them only when they believe there is a real chance of receiving them.<sup>14</sup>

A needs assessment can be accomplished through research, census data, group forums, interviews, or surveys with program participants, community members and other service providers. The information you gather should support these questions:

- Do any other programs exist that are providing the same service?
- How many potential clients might need the program?
- What are the identified needs of the target population to overcome the problem?
- What are the associated risk and protective factors of the target population?
- Are there any trends that indicate the target population might increase or decrease over the next few years?

Client voice is a crucial component in the design process. Including the viewpoints and experiences of current and future clients not only empowers them to have their voices heard, it provides vital information that will help ensure the success of the program.<sup>15</sup> Clients can offer information about the barriers to services they experience, existing gaps in services, and they may help to identify other clients through peer referral.<sup>16</sup> Other key participants in the program planning process are front-line staff who have an intimate knowledge of the needs and issues their clients struggle with on a daily basis. Staff participation can also support program buy-in and commitment to the change process down the road.<sup>17</sup>

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<sup>13</sup> Pawlak, E.J., Vinter, R.D. (2004). *Designing & Planning Programs for Nonprofit & Government Organizations*. San Francisco: Jossey-Bass.

<sup>14</sup> Kettner, P.M., Moroney, R.M., Lawrence, L.M. (2008). *Designing and Managing Programs*. (3<sup>rd</sup> ed.). Thousand Oaks: Sage.

<sup>15</sup> Nicols, L. (2002). Participatory program planning: including program participants and evaluators. *Evaluation and Planning*. 25, 1-14.

<sup>16</sup> Ibid.

<sup>17</sup> Ibid.

## Establishing Priorities

Program services should be prioritized by how the services fulfill a gap or meet an existing need in the community. Priority setting includes the following considerations:

- What criteria will be used to determine the priorities of the program?
  - Consider organization mission, values, resources, expertise, research
- Who will participate in setting priorities and how will they participate?
  - Input from stakeholders: staff, program participants, community members
- What program components need to shift to bring the program in line with best practices?
  - Consider history of the program and evidence-based research
- What programs are already being offered within the community to address the same social issue?
  - Avoid duplication of services<sup>18</sup>

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<sup>18</sup> Ibid.

## Quality Check-in

Key Question	In Progress	Completed	Comments
Is the social problem and its characteristics clearly identified and supported by research?			
Does the program respond to the identified needs of the target population?			
Has a needs assessment been conducted and primary data collected?			
Does the program fill a unique need in the community that is not met by other programs or services?			
Was the target population actively engaged in the process?			
Were individuals from the community engaged or consulted in the process?			
What does the literature say about best practices to address this problem?			

## Suggested Resources

Source	Website
What is a Needs Assessment and Why Do I Need One for a Nonprofit? Resources for Non Profits: Needs Assessment Tool	<a href="http://nonprofit.about.com/od/nonprofitbasics/f/needsassessment.htm">http://nonprofit.about.com/od/nonprofitbasics/f/needsassessment.htm</a>
How to Conduct a Needs Assessment for Your Nonprofit Program Statistics Canada	<a href="http://www.dummies.com/how-to/content/how-to-conduct-a-needs-assessment-for-your-nonprof.html">http://www.dummies.com/how-to/content/how-to-conduct-a-needs-assessment-for-your-nonprof.html</a>
City of Calgary Statistics – Community Profiles	<a href="http://www.statcan.gc.ca/">http://www.statcan.gc.ca/</a> <a href="http://www.calgary.ca/CSPS/CNS/Pages/Research-and-strategy/Community-profiles/Community-Profiles.aspx">http://www.calgary.ca/CSPS/CNS/Pages/Research-and-strategy/Community-profiles/Community-Profiles.aspx</a>
What Works, Wisconsin Fact Sheets can be used for research about effective practices and strategies for particular types of programs. Best and Promising Practices Research Briefs The City of Calgary (FCSS)	<a href="http://whatworks.uwex.edu/Pages/1factsheet.html">http://whatworks.uwex.edu/Pages/1factsheet.html</a> <a href="http://www.calgary.ca/fcss">www.calgary.ca/fcss</a>
Guidestar has a search engine and data base for American non-profit organizations.	<a href="http://www2.guidestar.org/">http://www2.guidestar.org/</a>
Imagine Canada Nonprofit Library provides <a href="#">resource lists</a> and <a href="#">databases</a> .	<a href="http://library.imaginecanada.ca/home">http://library.imaginecanada.ca/home</a>

## PROGRAM THEORY PHASE

Whether implicit or explicit, all social programs have an underlying program theory. The goal of a program theory is to explain *why* and *how* a program will be effective. This is accomplished by articulating the rationale and specific change strategies for the program. Often times, programs are poorly designed because their program theories were based on hunches or personal beliefs and values rather than sound research knowledge.<sup>19</sup> A strong program theory, built on empirical research, increases the probability that the desired outcomes of a program will be achieved. The focus on program evaluation also begins here with the stating of a proposed relationship between the program and the desired outcomes.<sup>20</sup>

### Developing an Effective Program Theory:

- Helps focus programs on problems rather than on activities
- Helps make explicit the assumptions about the program expectations
- Provides a basis for long range planning
- Provides a framework for that can be used to bring internal consistency to the program<sup>21</sup>

In recent years, the *theory of change* approach has been widely embraced by funders, evaluators and non-profit program managers. Although both logic models and theories of change help to tell the story of a program, there is a distinct difference between the two:

*Logic models* usually start with a program and graphically illustrate its components (inputs, outputs, activities, and outcomes) so you can see at a glance if the outcomes are out of sync with inputs and activities, but they don't show WHY activities are expected to produce outcomes. An advantage of logic models lies in their structural support for planning and measurement.<sup>22</sup>

*Theories of change* may start with a program, but are best when starting with a goal, before deciding what programmatic approaches are needed. Theories of change link outcomes and services to explain HOW and WHY the desired change is expected to come about. When programs are successful, theories of change indicate why they worked.<sup>23</sup>

There are many ways to create a program theory of change. Some theories of change involve intense critical analysis and incorporate a comprehensive framework of elements. For the

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<sup>19</sup> Brouselle, A., Champagne, F. (2011). *Program theory evaluation: Logic Analysis*. Evaluation and Program Planning. 34, 69-78.

<sup>20</sup> Ibid.

<sup>21</sup> Ibid.

<sup>22</sup> Developing a Theory of Change: A Framework for Accountability and Learning Social Change. <http://portals.wi.wur.nl/files/docs/ppme/KeystoneTool-DevelopingaTheoryofChange.pdf>

<sup>23</sup> Ibid.

purposes of this manual, theory of change will explicitly serve the purposes of program design and is geared to support the development of outcomes measurement.

*Alice: Would you tell me please, which way I ought to go from here?*

*Cat: That depends a great deal on where you want to get to.*

~ Lewis Carroll

## Program Goals

Program goals reflect organizational priorities and provide a clear direction for future action. The **program goal** is a general statement representing the ideal or “hoped for” outcome. It should be phrased in terms of the ultimate outcome for the program rather than a summary of services provided.<sup>24</sup> While it may be tempting to have more than one goal, only one clear solution needs to be articulated for the problem statement.<sup>25</sup> Other goals of the program may be stated as long-term outcomes. Goals should:

- Include the intended results of the program
- Specify the target population
- Be compatible with the organization mission statement and illustrate that the program is a step towards the overall organization mission
- Be responsive to the problems and needs of the clients
- Be a statement that stakeholders can rally around to gather support for the program<sup>26 27</sup>

Examples of goal statements including a goal for our guidebook example, a men’s residential treatment program:

- *All men recover from addiction and lead healthy productive sober lives.*
- *To ensure that economically disadvantaged students have access to safe, affordable, nutritious food.*
- *All girls grow up to be strong, healthy, empowered women.*

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<sup>24</sup> Ibid.

<sup>25</sup> The Logic Models Workbook. (2001). *The Health Communication Unit at the Centre for Health Promotion, University of Toronto.* <http://www.thcu.ca/infoandresources/publications/logicmodel.wkbk.v6.1.full.aug27.pdf>

<sup>26</sup> Ibid.

<sup>27</sup> Kettner, P.M., Moroney, R.M., Lawrence, L.M. (2008). *Designing and Managing Programs.* (3<sup>rd</sup> ed.). Thousand Oaks: Sage.

## Change Strategies

Establishing the program theory requires capturing the specific strategies the program will use to promote change for clients. These are called change strategies. The most practical method to accomplish this is to capture the components using the 5 W's (Who, What, Where, When, Why, and How). Change strategies are based on research and best practices and should be detailed as specifically as possible.

### *What is it the program will do?*

- Articulate the type of interventions or services the program will offer
- Program services should be developmentally appropriate and strength-based

### *Who will the program serve?*

- Specify the program eligibility criteria to ensure target population is being served
- Identify client risk factors and strength profiles

### *Who will provide the services?*

- Specify the type of staff who are the best fit to serve the targeted clientele
- Staff demographics, degrees, training, certification and experience needed to serve the target population (look for specific staff competencies recommended by industry standards)
- Specify the minimum staffing model requirements for the program based on best practices (look for accreditation and industry standard recommendations)

### *Where is the program offered?*

- Site is accessible in terms of location, service hours and minimal barriers
- Site is determined to be the best setting which will affect client improvement most

### *When and how much of services are offered?*

- How does the program determine if a client is "program-ready"?
- Clients need to be exposed to enough of a program or intervention for it to have an effect. What dosage of services and at what intensity is required for a client to benefit from the program and have a change in their quality of life? Dosage or intensity can be measured in the quantity of contact hours, duration of the total program, intensity and complexity of the program's activities, and participants' level of engagement. Generally, the more severe or entrenched the problem or issue being addressed the greater the dosage and intensity need to be.<sup>28</sup> Dosage should be determined by best practices and empirical research.
- When is a client considered to have received the full menu of services and finished with the program?

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<sup>28</sup> Small, S.A., O'Connor, C., & Cooney, S.M. (2008). Evidence-informed program improvement. *What Works, Wisconsin Program Improvement Manual*. Madison, WI: University of Wisconsin-Madison/Extension.

## *How will services be delivered?*

- How does the program respond to the statement: “This is the way we work with our clients”?
- The program should use established evidence-based perspectives and approaches for working with specific populations (i.e., using a trauma-informed perspective for working with domestic abuse victims)
- Programs use developmentally appropriate and strength based approaches in their delivery of services

## Determining Rationale

The **program rationale** describes *why* these particular change strategies will be the most effective services for a population struggling with a specific issue. The rationale is based on research, program history, and best practices about *how change occurs*.<sup>29</sup> The rationale takes into account the unique needs of the target population and can include empirically based approaches and methodologies.

For example, part of the rationale for a men’s residential treatment program includes:

*Because addiction affects so many aspects of a person's life, treatment must address the needs of the whole person to be successful. The best programs incorporate a variety of rehabilitative services and therapies to provide comprehensive treatment regimens. Recovery involves making substantial changes to whole patterns of living. Treatment methods need to resemble those of a chronic disease model of care rather than an acute care medical model (White, Boyle & Loveland 2002). This process can take months and years rather than days and weeks (Sellman, 2009).*

## Identifying Assumptions

**Assumptions** are the underlying beliefs about the program, the people involved and the way the program will work. They can refer to facts about the target population or special circumstances in the community or field.<sup>30</sup> It is important to recognize the role of beliefs and assumptions as they impact the choices about strategies that are made for the program. Differences about assumptions can also vary significantly between the program managers and the staff that work at the front line level. Making your assumptions explicit greatly enhances a program’s chances for success.

Assumptions can come from two sources. They can arise from knowledge through research and theory. They can also come from personal beliefs, values and experiences outside of empirical knowledge. The most viable assumptions for a successful program represent a combination of

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<sup>29</sup> Logic Model Workbook. Innovation Network, Inc. (2002-2011). <http://www.innonet.org>

<sup>30</sup> Ibid.

practice, experience, research and theory.<sup>31</sup> When capturing assumptions, consider the following principles, beliefs, and ideas that are held about:

- The social problem
- The resources and staff
- The way the program will operate
- Why the program will work
- Why clients will be motivated to participate in the program
- What the program expects to achieve<sup>32</sup>

To uncover the assumptions held about a program, it's helpful for stakeholders to articulate their assumptions within a group setting. In this way, assumptions can be examined, critiqued, and agreed upon by the group. Assumptions also tend to arise throughout the brainstorming process as group members think out loud. As the stakeholders come to consensus, assumptions can be fully articulated and applied to the program theory that has been developed thus far.

Examples of program assumptions for a men's residential treatment program are:

- *Individuals struggling with addiction need support not only for managing their addiction but they need a wide range of comprehensive services to rebuild their lives and achieve long term sobriety*
- *Employment is a key protective factor for men overcoming addiction*
- *Long term supportive housing increases men's chances for long term sobriety*

## Theory of Change Statement

The theory of change statement is ultimately an explanatory *if/then statement* which evolves from the causes and factors associated with the problem and the interventions that will best address the needs arising from that problem. These if/then statements articulate the rationale as well as the targeted services that will be provided to alleviate the problem and meet the needs of the client.

Example of a theory of change statement for a men's residential treatment program:

*When men are provided with intensive addiction treatment along with support for housing and employment within a supportive environment, they will regain the confidence, self-esteem, and coping skills necessary to live productive healthy lives free of addiction.*

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<sup>31</sup> Wyatt Knowlton, L., Phillips, C. C. (2009). *The Logic Model Guidebook: Better Strategies for Great Results*. Thousand Oaks: SAGE.

<sup>32</sup> *Planning, Implementing, and Evaluating a Sexual Assault Prevention Program*. Colorado Department of Health and Environment's Sexual Assault Prevention program, <http://www.cdph.state.co.us/>

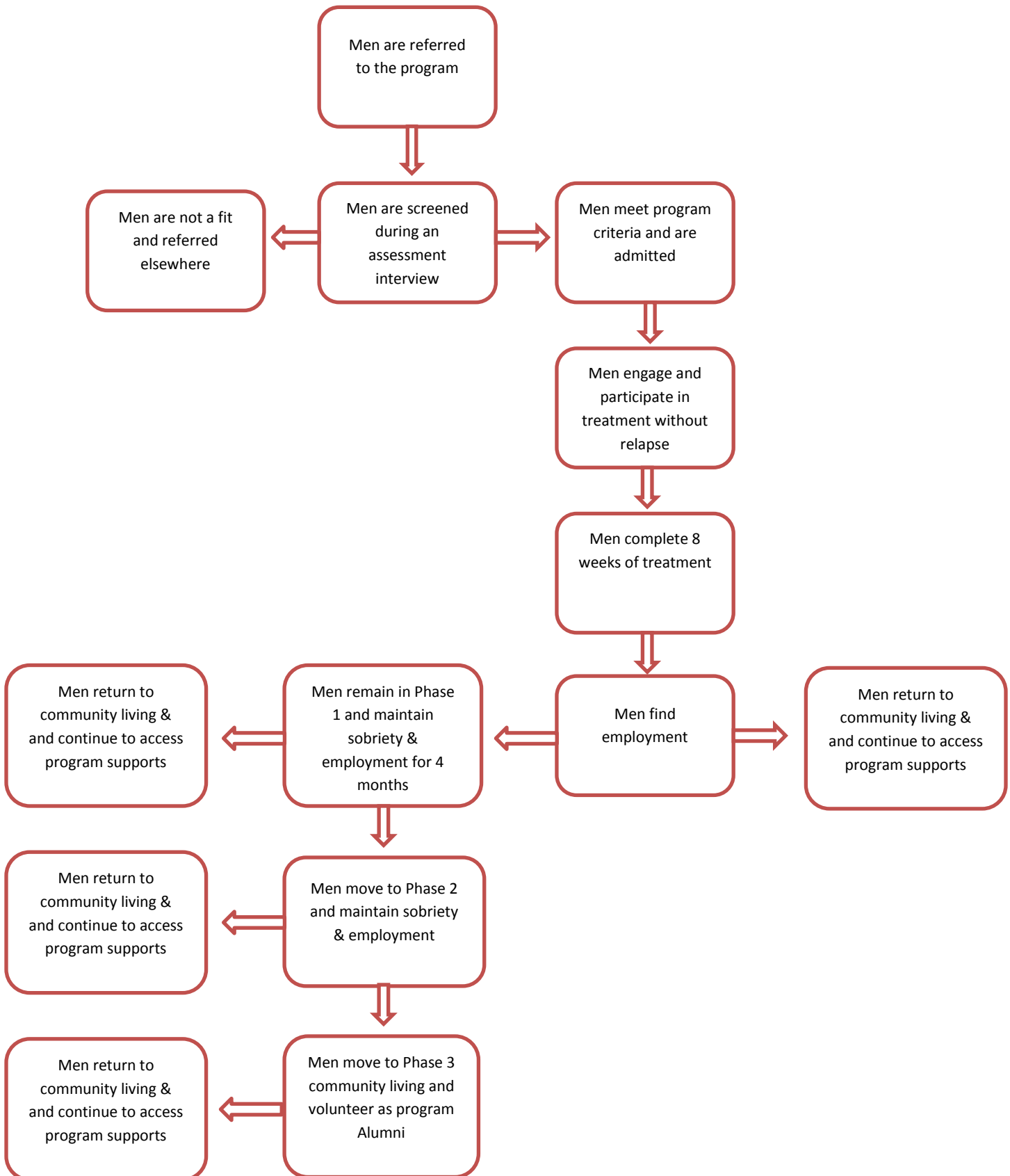
## Client Service Pathways

In most cases, program services tend to follow a progressive order. It is helpful in the design stage to develop a flowchart that maps the client's pathway through the program from entry to exit. Specifying the pathway allows planners to apply precision and create uniformity in services while also identifying any bumps or glitches that clients may experience during participation in the program.<sup>33</sup>

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<sup>33</sup> Kettner, P.M., Moroney, R.M., Lawrence, L.M. (2008). *Designing and Managing Programs*. (3<sup>rd</sup> ed.). Thousand Oaks: Sage.

An example of a client pathway through a men's long term residential treatment program:



## Quality Check-in

Key Question	In Progress	Completed	Comments
Is there a theory guiding the program? Is there research to support the theory's validity?			
Which risk and protective factors does the program target? Does research indicate that these factors are the most relevant to address?			
Can you clearly articulate the program's theory of change and how it operates to achieve the program's intended outcomes?			
Are the chosen services adequate to fulfill the needs of the target population – do services provide enough intensity and dosage to impact change?			
Does the program rationale logically explain why the services will work for clients?			
Do staff have the knowledge and skill to offer the services or carry out the change, and, if not, can they be adequately trained, or can new staff be hired?			

## Suggested Resources

<p>Tamarack – An Institute for Community Engagement</p>	<p><a href="http://tamarackcommunity.ca">http://tamarackcommunity.ca</a></p>
<p>Theories of Change &amp; Logic Models: Telling Them Apart. <b>Acknowledge &amp; Aspen Roundtable on Community Change. A presentation on the key differences between logic models and theories of change.</b></p>	<p><a href="http://www.evaluationtoolsforracialequity.org">www.evaluationtoolsforracialequity.org</a></p>
<p>The Community Builder's Approach to Theory of Change: A Practical Guide to Theory Development <b>This publication explains how to develop a community building theory of change, which draws the links between early and intermediate steps and long range results</b></p>	<p><a href="http://www.aspeninstitute.org/publications/community-builders-approach-theory-change-practical-guide-theory-development">http://www.aspeninstitute.org/publications/community-builders-approach-theory-change-practical-guide-theory-development</a></p>
<p>What Works, Wisconsin Fact Sheets can be used for research about effective practices and strategies for particular types of programs.</p>	<p><a href="http://whatworks.uwex.edu/Pages/1factsheet.html">http://whatworks.uwex.edu/Pages/1factsheet.html</a></p>
<p>Best and Promising Practices Research Briefs The City of Calgary (FCSS)</p>	<p><a href="http://www.calgary.ca/fcss">www.calgary.ca/fcss</a></p>
<p>Guidestar has a search engine and data base for American non-profit organizations.</p>	<p><a href="http://www2.guidestar.org/">http://www2.guidestar.org/</a></p>
<p>What Works, Wisconsin Research on effective practices and strategies for particular types of programs.</p>	<p><a href="http://whatworks.uwex.edu/Pages/1factsheet.html">http://whatworks.uwex.edu/Pages/1factsheet.html</a> <a href="http://whatworks.uwex.edu/Pages/2evidenceregistries.html">http://whatworks.uwex.edu/Pages/2evidenceregistries.html</a></p>

## LOGIC MODEL PHASE

The purpose of the Logic Model Phase is to identify the specific outcomes for the program, and which activities and resources will be required to accomplish those outcomes. Outcomes should be firmly rooted in research and best practices literature. A key component of this phase is to develop an outcome measurement plan with indicators, benchmarks, and measurement tools that will help a program to demonstrate if it is successful in achieving its outcomes. The end result will be a clear illustrated roadmap of what the program is attempting to achieve and how it will measure success.

Although there are many different logic model formats, they generally contain the same core concepts. The format used in this manual is based on the model from United Way of America that has been widely adopted in the last 30 years. The logic model was initially used by program evaluators as a tool for identifying performance measures. Since that time, it has been adapted to program planning as well.<sup>34</sup> A program logic model is a snapshot of the program at one moment in time and should be revisited at least annually as the program is revised or updated.

The logic model is more focused than the theory of change framework. The W. K. Kellogg Foundation defines a **logic model** as "a systematic and visual way to present and share your understanding of the relationships among the resources you have to operate your program, the activities you plan, and the changes or results you hope to achieve." It shows the logical chain of events between inputs, activities, outputs and outcomes. The logic model can be used to support many purposes:

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<sup>34</sup> McCawley, P.F. (2004). *The Logic Model for Program Planning and Evaluation*. University of Idaho Extension.

**Program Planning.** The logic model is a valuable tool for program planning and development. The logic model structure helps you think through your program strategy—to help clarify where you are and where you want to be.

- **Program Management.** Because it "connects the dots" between resources, activities, and outcomes, a logic model can be the basis for developing a more detailed management plan. Using data collection and an evaluation plan, the logic model helps you track and monitor operations to better manage results. It can serve as the foundation for creating budgets and work plans.

- **Communication.** A well-built logic model is a powerful communications tool. It can show stakeholders at a glance what a program is doing (activities) and what it is achieving (outcomes), emphasizing the link between the two.

- **Consensus-Building.** Developing a logic model builds common understanding and promotes buy-in among both internal and external stakeholders about what a program is, how it works, and what it is trying to achieve.

- **Fundraising.** A sound logic model demonstrates to funders that you have purposefully identified what your program will do, what it hopes to achieve, and what resources you will need to accomplish your work. It can also help structure and streamline grant writing.

Source: *Logic Model Workbook* [www.innonet.org](http://www.innonet.org)

It is important to be specific and use clarity when developing program activities – precision is essential to facilitate the implementation stage. If the original planners will not be present during implementation, the information must be clearly understandable with no ambiguity to ensure program fidelity.<sup>35</sup>

## Components of a Logic Model

### Inputs

**Inputs** are the resources needed to achieve the program outcomes. They typically include the following categories: people (clients, staff, partners, and volunteers), material resources (food, clothing, and curriculum), facilities, equipment, collaborations and partnerships. These resources encompass what is needed to implement the activities that are directed towards the program's short-term goals.<sup>36</sup>

Key questions to be answered when determining your inputs:

- Who are the clients you expect will benefit from this program, given the assumptions and the program theory?
- What resources and facilities will be needed to offer and carry out the services for the clients?

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<sup>35</sup> Kettner, P.M., Moroney, R.M., Lawrence, L.M. (2008). *Designing and Managing Programs*. (3<sup>rd</sup> ed.). Thousand Oaks: Sage.

<sup>36</sup> 2007 Canadian Outcomes Research Institute.

- What type of staff should be employed in this program to provide the expected services and serve the target population defined? What degrees, training, certification, and experience should staff have?<sup>37</sup>
- What local, provincial, and/or community organizations should be involved as partners or collaborators to support the needs of clients and achievement of program outcomes?

*These inputs are then converted into...*

## Activities

**Activities** are the means by which desired outcomes will be achieved through the services the program delivers. Activities are main functions or tasks of program staff. The activities should be written in the logic model using verbs such as:<sup>38</sup>

To encourage	To support	To promote
To deliver	To attend	To provide

Key questions to be answered when determining your program activities:

- What kinds of services and methods of intervention are most relevant to address the problems and work for the client population as defined?

## Four Major Service Phases

The four key phases of service delivery (Intake, Screening, Service Planning, and Discharge) do not need to be captured in the logic model but should be considered when developing program activities to inform your program design.<sup>39</sup> Many of these details can be developed during implementation, but consideration of these phases needs to be attended to at the design stage to support fidelity during operationalization of the program. Much of the details in these phases will be informed by your Change Strategies developed during the Program Theory Phase. The components of the four major service phases as identified by Pawlak and Vinter are outlined below.

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<sup>37</sup> Ibid.

<sup>38</sup> 2007 Canadian Outcomes Research Institute.

<sup>39</sup> Pawlak, E.J., Vinter, R.D. (2004). *Designing & Planning Programs for Nonprofit & Government Organizations*. San Francisco: Jossey-Boss.

### *Intake Phase*

These are the activities that focus on securing client participation in the program. If a client is not deemed an appropriate fit for the program there should be a referral to another organization or program.

- Marketing of information about program and services
- Determine the criteria for eligibility
- Determine intake process into the program
  - Factors to be considered for implementation include sensitivity to client needs (cultural considerations, respect, privacy, confidentiality of documentation, informal vs. formal procedures, refusal of services and redirection, accreditation requirements)<sup>40</sup>

### *Screening Phase*

The purpose of the screening phase is to evaluate clients' behaviour, status, condition, and situation. This information leads to the development of a service plan for the client and includes the client's choices and decisions. Factors to consider when screening potential clients include:

- Purpose of screening
- Sources of client information
- Who conducts the screening
- Means of screening (interview, checklist, tests)
- Timing of the screening (prior to or at same time as intake)
- Site of the screening
- Analysis of screening information and development of service plan
- Management of client information and confidentiality
- Completion of screening process with consideration for client sensitivity<sup>41</sup>

### *Intervention Phase*

These are the benefits, resources, and services clients will receive to achieve their desired change.

- Benefits and services to be provided are identified in the client's service plan
- Location of where services will be provided

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<sup>40</sup> Pawlak, E.J., Vinter, R.D. (2004). *Designing & Planning Programs for Nonprofit & Government Organizations*. San Francisco: Jossey-Bass.

<sup>41</sup> Ibid.

- Duration, Time Span, Length and Frequency of Contacts
- Procedures for recording services based on evaluation requirements (case logs, assessments)<sup>42</sup>

### *Discharge Phase*

This phase includes the steps needed to reach and implement a decision to end services for the client, including follow up activities when required.

- Organization discharge policies and procedures
- Client role in the discharge process
- Timing of discharge (either predetermined or other circumstances)
- Location of discharge<sup>43</sup>

You can't do "good" evaluation if you have a poorly planned program.

~ Beverly Anderson Parsons

*These activities are then converted into...*

## Outputs

**Outputs** are the measurable and tangible deliverables of the program activities (e.g., providing products, goods, and services to program participants). They help lead to desired outcomes—but are not themselves the changes you expect the program will produce. Outputs include deliverables such as the number of workshops, presentations, or counseling hours that result from the program activities. Whenever possible, outputs should always be expressed in terms of the number or scope of services and products delivered by the program.<sup>44</sup>

Key questions to be answered when determining program outputs:

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<sup>42</sup> Pawlak, E.J., Vinter, R.D. (2004). *Designing & Planning Programs for Nonprofit & Government Organizations*. San Francisco: Jossey-Bass.

<sup>43</sup> Ibid.

<sup>44</sup> Logic Model Workbook. *Innovation Network, Inc.* (2002-2011). <http://www.innonet.org>

- Given program expectations, what is the minimum quantity of services that could be expected to produce a measurable result?
- How much of a service or product does a client require to receive the full menu of services?

Outputs include the following aspects:

1. Units of Service
  - These include the number of client contacts (referrals, attendance), number of products (meals served), or the amount of services (hours of counselling sessions).
2. Service Completion (or the final output)
  - The main question to answer at the initial design stage is “when is a client finished with a service?” Some long term care programs (residential) may not find it useful to define final outputs in terms of exit or completion but use milestones instead.
3. Quality
  - Usually addressed through the use of standards which are imposed externally (accreditation, licensing requirements). Some programs may develop their own quality standards from research (Martin’s Dimensions of Quality 1993) or use client satisfaction surveys to assess the quality of services and products received by clients.<sup>45</sup>

*These outputs are then converted into...*

## Outcomes

**Outcomes** are the *changes* that occur for the clients you serve. Outcomes answer the questions: “What happened as a result of the program? What does success look like?” Due to the complexity of social problems, outcomes are expressed in hierarchal terms – short, medium, and long term objectives.<sup>46</sup> These short, medium, and long term outcomes form a chain of cause and effect events.

For example, in a residential treatment program for men, *if* a client becomes educated about coping skills as a short term outcome, *then* they will use the coping skills to manage stress that typically triggers them to use substances. *If* a client uses coping skills to deal with stress as a mid-term outcome, *then* they will achieve sobriety as a long term outcome.

One of the key questions to consider when developing outcomes is: “How much reach or influence does a program have while clients are in the program?” By considering this question, you can then determine what you will need for short, mid, and long term outcomes.

<sup>45</sup> Kettner, P.M., Moroney, R.M., Lawrence, L.M. (2008). *Designing and Managing Programs*. (3<sup>rd</sup> ed.). Thousand Oaks: Sage.

<sup>46</sup>Logic Model Workbook. *Innovation Network, Inc.* (2002-2011). <http://www.innonet.org>

Key questions to be answered when determining outcomes:

- What benefits do clients receive as a result of services?
- Do clients improve as a result of services? How do you measure and define improvement?
- Is your outcome defined as a measurable change in quality of life achieved by a client between entry into and exit from a program?
- Given the program theory, what outcomes can you expect to achieve and what outcomes are outside the scope of the program?

The more immediate the outcome, the more influence the program has. The more long term an outcome is, the less direct influence a program has and the greater the likelihood that external influences come into effect.<sup>47</sup> An outcome:

- Is something that should be accomplished in order to achieve the program goal
- Should not predetermine in any fashion a solution to a problem or way to do something
- Should be expressed as a desired condition to be achieved rather than as a process or an activity
- Should be within the scope of the program's control or sphere of influence
- Should be written in such a way that they can be measured<sup>48</sup>

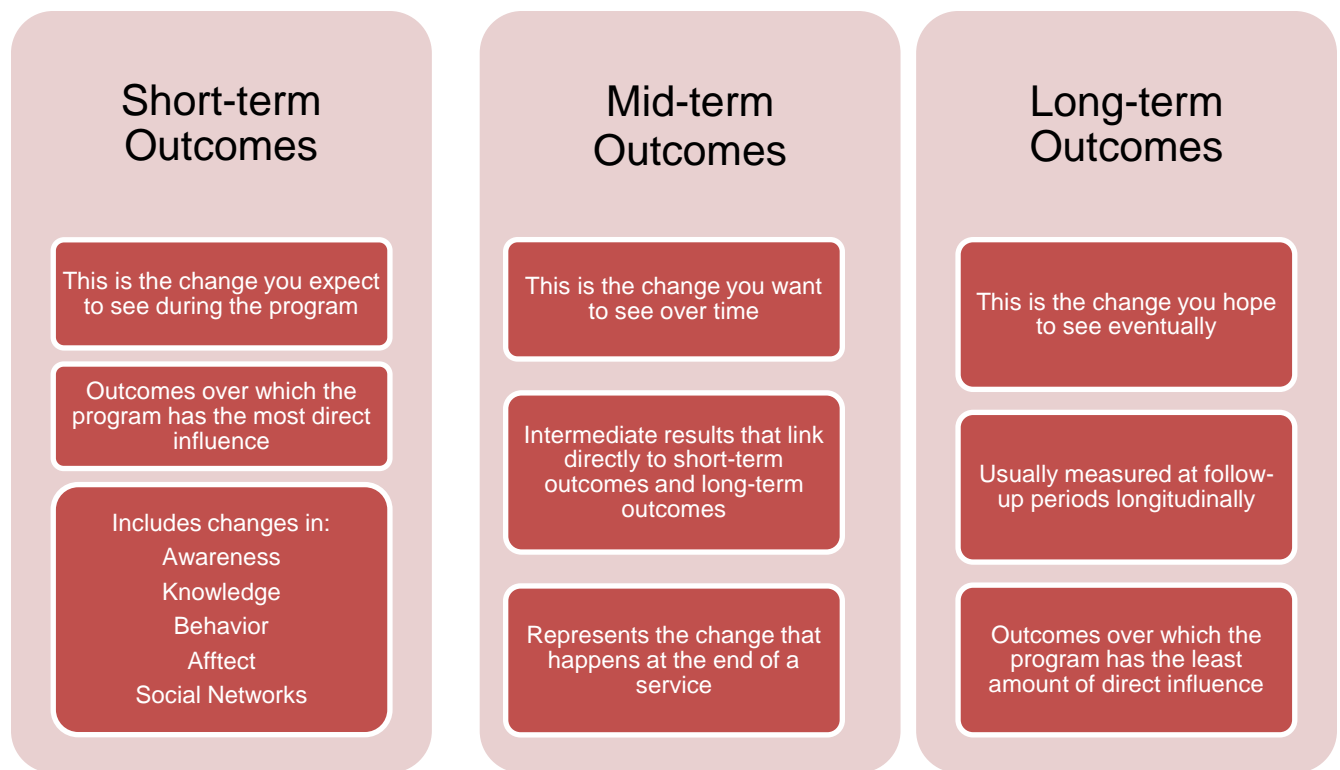
Examples of outcomes for a men's residential treatment program are:

- *Short-term Outcome: At the end of the first seven weeks, 75% percent of men will complete Phase I of intensive treatment.*
- *Mid-term Outcome: By the end of the first 6 months, 75% of men have sustainable employment and stable housing.*
- *Long-term Outcome: By the end of the first year, 60% of men will maintain sobriety.*

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<sup>47</sup> Barkman, S. (2000). Utilizing the Logic Model for Program Design and Evaluation. Knowledge to Go: Purdue Extension, University of Purdue, IN.

<sup>48</sup> Ibid.



Sources: 2007 Canadian Outcomes Research Institute, The Logic Model Guidebook: Better Strategies for Great Results.

## Impacts

**Impacts** are organizational, community, and/or system level changes that are expected as a result from program activities, which might include improved conditions, increased capacity, and/or changes in the policy arena.<sup>49</sup> Impacts often occur after the conclusion of the project (typically 4-10 years) and answer the question “What will be the ultimate benefit realized by a group, community, population, or society at large?”<sup>50</sup>

Examples of impact statements for a men’s residential treatment program:

- *Improved overall health, wellbeing, and sobriety of men*
- *Reduction in homelessness in men with addiction*
- *Reduction in the health, social and economic costs associated with substance use/abuse*

Once the outcomes are determined to be a meaningful fit, *indicators, measurement tools* and *benchmarks* need to be articulated for performance measurement to see if the program has achieved its outcomes.

<sup>49</sup> Logic Model Development Guide. (2004). W.K. Kellogg Foundation. <http://www.exinfm.com/training/pdfiles/logicModel.pdf>

<sup>50</sup> Ibid.

## OUTCOME MEASUREMENT PHASE

Outcome measurement provides a learning loop that feeds information back into programs and offers findings the program can use to adapt, improve and develop more effective services.<sup>51</sup> The outcome measurement phase includes the development of indicators, measurement tools, benchmarks, as well as determining the timing of when to measure outcomes so the program can illustrate its success in achieving the objectives for clients.

### Indicators

What will be measured to determine success? Indicators are the specific items of information that track a program's success on outcomes.<sup>52</sup> Indicators must be observable and measurable and describe the changes that represent achievement of outcomes. Typically, one to three indicators are identified for each outcome. An example of an outcome with indicators is provided at the end of this section.

### Measurement Tools

How will indicators be measured to determine success? When developing measurement tools, there are four basic methods:

1. Numeric Counts
  - Includes yes or no to specific questions. For example, if the program wants to know if clients gained employment, it would ask the question: "Did the client get a job?" The answers are then converted into percentages to determine the extent to which an outcome was achieved.
2. Standardized Measures
  - Validated, objective tests used widely by practitioners (i.e., Coping Skills Resources Inventory, Beck's Depression Inventory). For example, if the program wants to measure an improvement in the mental health status of clients from participation in the program, it would administer the Beck's Depression Inventory as a pre and post-test to measure the difference in mental health status. Often, in the case of standardized measures, tests are given at intake and at another predetermined point following services.
3. Level-of-Functioning Scales
  - Instruments developed by staff or other experts and are specific to a problem or population and measure functioning on a scale; scales are given at intake and

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<sup>51</sup> United Way of America. (1996). *Measuring program outcomes: A practical approach*. Alexandria, VA: United Way of America.

<sup>52</sup> United Way of America. (1996). *Measuring program outcomes: A practical approach*. Alexandria, VA: United Way of America.

intermediate points to determine progress. For example, clients may be asked to rate their overall level of satisfaction in particular areas of life on a scale of 1 to 10.

#### 4. Client Satisfaction Surveys

- One of the easiest measurement tools to implement, however, be cautious not to overuse surveys as the main tool to measure outcomes as they aren't proven reliable for all services.<sup>53</sup> Satisfaction surveys should be developed with the program outcomes in mind. For example, for an outcome of "Clients will have increased optimism and hope for the future," the satisfaction survey would include a question that directly asks clients if they feel more optimistic and hopeful about their future. Client satisfaction information can be garnered through surveys, forums and interviews.

### Benchmarks

Benchmarks are performance data used for comparative purposes. A program can either use industry standards or it can use its own data as a baseline to compare future performance. As industry standard benchmarks can be difficult to find, programs may determine their own benchmarks based on their own data. For example, if the program has historically had success in engaging clients in their programming at least 60% of the time, that baseline can be used as the benchmark for the following year. Benchmarks should be reviewed annually to determine their relevance and if other factors may be impacting results.

An example of a mid-term outcome with indicators, measurement tools and benchmarks for a men's residential treatment program:

Outcome	Indicators of Success	Measurement Tools	Timing	Benchmark
<i>75% of men have improved mental health status</i>	Men report having increased coping skills to deal with stress without using substances	Client Survey	4 months	70%
	Men demonstrate improved mental health symptoms	Beck's Depression Inventory	Intake and 4 months	

<sup>53</sup> Kettner, P.M., Moroney, R.M., Lawrence, L.M. (2008). *Designing and Managing Programs*. (3<sup>rd</sup> ed.). Thousand Oaks: Sage.

## Quality check-In

Key Question	In Progress	Completed	Comments
Are there activities that appear to be unrelated to the program's objectives and goals and that might have to be dropped?			
Does your logic model illustrate your theory of change? Do the program activities logically follow one another? Do they logically link to the program's goal?			
Are the changes compatible with the other components of the program? (changing the enrolment criteria may negatively impact other clients)			
Is the changed program compatible with other programs in the organization? (mixing populations that shouldn't be mixed)			
Does the organization have the funding and resources needed to implement the changed program?			
Do the targeted outcomes represent meaningful changes or benefits for program participants?			

*The world is moved along, not only by the mighty shoves of its heroes, but also by the aggregate of tiny pushes of each honest worker.*

~ Helen Keller

## Suggested Resources

<p>The W.K. Kellogg Foundation  <i>An extensive guide for creating logic models.</i></p>	<p><a href="http://www.wkkf.org/knowledge-center/resources/2006/02/WK-Kellogg-Foundation-Logic-Model-Development-Guide.aspx">http://www.wkkf.org/knowledge-center/resources/2006/02/WK-Kellogg-Foundation-Logic-Model-Development-Guide.aspx</a></p>
<p>United Way of Calgary and Area's  <i>Logic Model Template</i></p>	<p><a href="http://www.calgaryunitedway.org/images/uwca/our-work/supporting-non-profits/Logic-Model-Template-Final.pdf">http://www.calgaryunitedway.org/images/uwca/our-work/supporting-non-profits/Logic-Model-Template-Final.pdf</a></p>
<p>Program Development &amp; Evaluation  <i>Templates, guides and examples for creating logic models</i></p>	<p><a href="http://www.uwex.edu/ces/pdande/evaluation/evallogicmodel.html">http://www.uwex.edu/ces/pdande/evaluation/evallogicmodel.html</a></p>
<p>Learning for Sustainability  <i>A variety of resources, guides and links related to community work and social change.</i></p>	<p><a href="http://learningforsustainability.net/evaluation/theoryofchange.php">http://learningforsustainability.net/evaluation/theoryofchange.php</a></p>
<p>University of Wisconsin-Extension:  <i>Program Development and Evaluation Examples and Templates of PLMs Logic Model Components</i></p>	<p><a href="http://www.uwex.edu/ces/pdande/evaluation/evallogicmodel.html">http://www.uwex.edu/ces/pdande/evaluation/evallogicmodel.html</a>  <a href="http://www.reddi.gov.on.ca/pdf/1477219_project_logic_model.pdf">http://www.reddi.gov.on.ca/pdf/1477219_project_logic_model.pdf</a></p>

Wyatt Knowlton, L., Phillips, C. C. (2009). *The Logic Model Guidebook: Better Strategies for Great Results*. Thousand Oaks: SAGE.

*You have to be interested in outcomes; otherwise you're only looking at process. Setting forth expected results ahead of time, developing indicators to assess success – those things force programs to say what success looks like.*

*But the value is in the doing of it.*

~ A grant-maker, on how outcomes can benefit a process-oriented approach to evaluation

<http://www.grantcraft.org>

## PROGRAM DESIGN COMPONENTS

COMPONENT	CONTENT	CONSIDERATIONS
<i>Problem Statement</i>	<ul style="list-style-type: none"> <li>• Prevalence and incidence of problem over time</li> <li>• Projections for the future</li> <li>• Political, economic and social context of the problem</li> <li>• Prevalence of demographic characteristics</li> </ul>	<ul style="list-style-type: none"> <li>• What individual and contextual factors give rise to the problem? Which of these factors can be influenced by the program?</li> <li>• Who experiences the problem? Is it expected to increase or decrease? How strong is the data?</li> <li>• Do rates vary by ethnicity/cultural aspects? Gender?</li> <li>• Does the public consider the problem to be important?</li> </ul>
<i>Needs Assessment</i>	<ul style="list-style-type: none"> <li>• Risk factors associated with the problem</li> <li>• Protective factors that reduce risk</li> <li>• Existing programs and policies that support the program purpose</li> </ul>	<ul style="list-style-type: none"> <li>• Are there new or unrealized opportunities for the problem?</li> <li>• Does the program fulfill an identifiable gap or need in the community?</li> </ul>
<i>Program Goal</i>	<ul style="list-style-type: none"> <li>• Goal Statement</li> </ul>	<ul style="list-style-type: none"> <li>• Is the program compatible with the organization's mission and other programs?</li> </ul>
<i>Change Strategies</i>	<ul style="list-style-type: none"> <li>• What: program services are grounded in evidence-based practices</li> <li>• Who: <ul style="list-style-type: none"> <li>• eligibility criteria for program participants</li> <li>• skills, knowledge, and experience of program staff</li> </ul> </li> <li>• Where: accessibility and environment of program location</li> <li>• How: Intensity and dosage of services</li> </ul>	<ul style="list-style-type: none"> <li>• What is innovative about the program theory? (newly specified targets, new delivery mechanism?)</li> </ul>
<i>Program Rationale</i>	<ul style="list-style-type: none"> <li>• Relevant theories or perspectives the chosen services/interventions are based upon</li> </ul>	<ul style="list-style-type: none"> <li>• Does the evidence suggest that the activities, if implemented, will produce desired outcomes?</li> </ul>
<i>Assumptions</i>	<ul style="list-style-type: none"> <li>• Articulated beliefs about why the program will work</li> </ul>	<ul style="list-style-type: none"> <li>• Have all assumptions been made explicit?</li> </ul>
<i>Theory of Change Statement</i>	<ul style="list-style-type: none"> <li>• If/then statement: hypothesis of etiology and working intervention hypothesis</li> </ul>	<ul style="list-style-type: none"> <li>• Is the theory clearly articulated and based on evidence to illustrate how and why the program will succeed?</li> </ul>
<i>Logic Model</i>	<ul style="list-style-type: none"> <li>• Inputs</li> <li>• Activities (Intake, Screening, Intervention Services, Discharge - recommendations for implementation)</li> <li>• Outputs</li> <li>• Outcomes (short, medium, long term)</li> </ul>	<ul style="list-style-type: none"> <li>• Are the necessary resources and inputs available to carry out the program?</li> <li>• Do the outcomes represent meaningful changes for program participants?</li> <li>• Are the outcomes realistic and within the scope of the program?</li> </ul>
<i>Outcome Measurement Plan</i>	<ul style="list-style-type: none"> <li>• Indicators of Success</li> <li>• Measurement Tools</li> <li>• Benchmarks</li> </ul>	<ul style="list-style-type: none"> <li>• Are the indicators accurate and measurable aspects of the outcomes with achievable targets established?</li> </ul>

Client Service  
Pathway

- Client pathway through program from entry to exit
- Does the outcome measurement plan have clear timelines in place for when to administer the measurement tools?
- Have all possible routes through the program been considered and planned for?

## IMPLEMENTATION PHASE

**Implementation** is defined as “a specified set of activities designed to put into practice an activity or program of known dimensions.”<sup>54</sup> Successfully implementing a program that fits an organization’s needs is an ongoing process that occurs in multiple stages. For the purposes of this manual, the main elements of implementation as identified within best practices literature are highlighted.

*Implementation should:*

- Be specific to the individual program
- Be grounded in program philosophy and values, including strategies for fully integrating the program philosophy into the actual program operations and service delivery
- Include specific service delivery models and activities that are to be developed
- Be attentive to identifying the treatment or service components that promote consistency in service delivery across staff
- Be an engaging process with all stakeholders
- Be based on a shared understanding of the goals of the program and how the goals are to be achieved<sup>55</sup>

### Core Implementation Tasks and Components

- Cost of program
- Staff selection
  - Staff qualifications, experience, and recruitment
- Staff training
  - How much, who delivers it, and in what setting or format
  - Staff coaching and mentoring

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<sup>54</sup> Fixsen, D. L., Naoom, S. F., Blase, K. A., Friedman, R. M. & Wallace, F. (2005). *Implementation Research: A Synthesis of the Literature*. Tampa, FL: University of South Florida, Louis de la Parte Florida Mental Health Institute, The National

Implementation Research Network (FMHI Publication #231).

<sup>55</sup> McRee, B. Implementing Effective SBIRT Programs: Lessons Learned from Practice-based Initiatives. *University of Community Medicine and Healthcare*. Farmington: CT. <http://sbirtgranteemeeting.com/pdf/presentation-k.pdf>

- Staff evaluation
- Program evaluation
- Administrative supports
  - Administrative structures and processes that facilitate implementation of the program by staff and supervisors, such as: ensuring adequate time is set aside for staff training, and that trainers and supervisors receive the training and coaching they need
- System-level supports
  - Strategies include ensuring the availability of the financial, organizational, and human resources required for implementation<sup>56</sup>

As shown in these recommendations, staff selection, training, coaching, and performance evaluation are critical features for successfully implementing an innovation or changed program design. Having data available to support decision-making by staff and administrators who can remove barriers and find ways to facilitate staff use of new practices helps to align the external systems with the new methods of service delivery. These practices are essential components that define effective organizational supports for best practice implementation.<sup>57</sup>

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<sup>56</sup> Fixsen, D. L., Naoom, S. F., Blase, K. A., Friedman, R. M. & Wallace, F. (2005). *Implementation Research: A Synthesis of the Literature*. Tampa, FL: University of South Florida, Louis de la Parte Florida Mental Health Institute, The National

Implementation Research Network (FMHI Publication #231).

<sup>57</sup> Ibid.

## Suggested Resources

Source	Website
Implementation Matters	<a href="http://www.springerlink.com/content/gm186205w580h57t/">http://www.springerlink.com/content/gm186205w580h57t/</a>
National Implementation Research Network	<a href="http://nirn.fpg.unc.edu/">http://nirn.fpg.unc.edu/</a>

*The use of effective interventions without implementation strategies is like serum without a syringe; the cure is available but the delivery system is not.*

~ Fixen, Blasé, Duda, Naom & Van Dyke, 2010

## CONCLUSION

Human service programs are uniquely challenging and rewarding to design. They work to address a diverse range of social problems and often include multiple organizations and clients. This means programs must change over time to meet the shifting needs within communities. An effective program design that makes a difference for people also helps programs:

- Recruit and retain talented staff
- Attract and inspire capable volunteers
- Engage collaborators
- Garner support for innovative efforts
- Target effective services for expansion
- Retain or increase funding

The underlying purpose of this manual has been to outline the process of program design with a guided framework of critical program design components as established by literature and best practices. Effective program design may seem to be linear (for example, problem analysis precedes the development of a program theory), but it is, in reality, a developmental problem solving activity that should be viewed as a process of social learning.



*Experience seems to be like the shining of a bright lantern.*

*It suddenly makes clear in the mind what was already there, perhaps, but dim.*

## CHANGE READINESS ASSESSMENT

<i>Positive Influence</i>	<i>Influence</i>	<i>Negative Influence</i>
<ul style="list-style-type: none"> <li>Urgency is high for change               <ul style="list-style-type: none"> <li>Consequences for not changing are understood</li> </ul> </li> </ul>	URGENCY	<ul style="list-style-type: none"> <li>Somewhat perceived risk of not changing</li> <li>History of success and change will not impact this</li> </ul>
<ul style="list-style-type: none"> <li>Leadership is committed and has capacity to support change until completion</li> </ul>	LEADERSHIP	<ul style="list-style-type: none"> <li>Leadership has limited capacity or does not demonstrate commitment to change</li> </ul>
<ul style="list-style-type: none"> <li>Leaders are aligned in their purpose and vision for change               <ul style="list-style-type: none"> <li>Leaders have history of making decisions and acting on them                   <ul style="list-style-type: none"> <li>There are adequate resources and staffing to support change process</li> </ul> </li> </ul> </li> </ul>	VISION	<ul style="list-style-type: none"> <li>Leadership lacks agreement or has differing perspectives on change</li> </ul>
<ul style="list-style-type: none"> <li>Leaders have history of making decisions and acting on them               <ul style="list-style-type: none"> <li>There are adequate resources and staffing to support change process</li> </ul> </li> </ul>	DECISION MAKING	<ul style="list-style-type: none"> <li>Leaders don't make tough decisions or no one knows</li> </ul>
<ul style="list-style-type: none"> <li>A system is in place for managing conflict               <ul style="list-style-type: none"> <li>Proposed change is in alignment with current organization culture</li> </ul> </li> </ul>	CHANGE CAPACITY	<ul style="list-style-type: none"> <li>Limited resources and staffing to facilitate change</li> </ul>
<ul style="list-style-type: none"> <li>A system is in place for managing conflict               <ul style="list-style-type: none"> <li>Proposed change is in alignment with current organization culture</li> </ul> </li> </ul>	GOVERNANCE & CONFLICT RESOLUTION	<ul style="list-style-type: none"> <li>Limited processes to identify, address and resolve conflict</li> </ul>
<ul style="list-style-type: none"> <li>Proposed change is in alignment with current organization culture</li> </ul>	CULTURAL ALIGNMENT	<ul style="list-style-type: none"> <li>Change is not aligned with existing organizational culture</li> </ul>
<ul style="list-style-type: none"> <li>Stakeholders are aware and understand the need for change               <ul style="list-style-type: none"> <li>A feedback loop exists for their questions and concerns</li> </ul> </li> </ul>	COMMUNICATION	<ul style="list-style-type: none"> <li>Stakeholders are uninformed, lack understanding and/or there are no feedback mechanisms</li> </ul>
<ul style="list-style-type: none"> <li>Organization has a clear plan for implementing and facilitating the desired change</li> </ul>	CHANGE ACTION PLAN	<ul style="list-style-type: none"> <li>Organization is unclear about the requirements to plan for or support the desired change</li> </ul>

## Change Readiness Scoring

*The number of positive and negative influences is totalled with each influence scored as 1 point.*

Positive Influences Scoring 7-9: Well positioned for change at this time

Positive Influences Scoring 3-6: Moderately well positioned for change at this time

Positive Influences Scoring 0-2: Not well positioned for change at this time<sup>58</sup>

## Appendix B

### General Interviewing Guidelines

Stakeholder interviews are essential in program design to inform the priorities and expectations for the program. Program managers and board members can contribute to the strategic vision of the future program while front-line staff can provide insight into the challenges and barriers clients experience on a daily basis. When interviewing past and current clients, it is important to keep in mind that participants may be sharing information of a sensitive nature. This could include a variety of personal experiences such as health problems, trauma, employment issues or homelessness. The interviewer should be comfortable with the information they are collecting and participants should feel respected and welcomed throughout the interview process.

#### General tips and guidelines for interviewing

**Begin with an introduction:** Briefly introduce who you are and the purpose of the interview. Explain the process of the interview and how long the interview should take.

**Be professional:** Interviewers should conduct themselves professionally and convey a respectful and compassionate attitude towards participants.

**Questions should be simple and understandable:** Make sure the interview questions are clear, unbiased, and easily understandable (not too technical or unfamiliar).

**Choose an appropriate location:** Choose a location for the interview that is quiet and won't be over-heard or interrupted.

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<sup>58</sup> Adapted using three existing tools: Watson & Wyatt Web site, <http://www.watsonwyatt.com/us/tools/change/>, Providence Web site, <http://www.providence.co.uk/change/>, William Bridges & Associates Web site, [http://www.wmbridges.com/articles/assessment\\_tools.html](http://www.wmbridges.com/articles/assessment_tools.html), (accessed July 2011).

**Prioritize the order of your questions:** It is often a good idea to ask the most important and interesting questions first in the event that the interview does get interrupted or you run out of time.

**Keep the interview brief:** Out of respect for your participant's time, you will want to stay focused and on time. Typically 45 minutes to 1 hour is enough time to gather the information you will need.

**Confidentiality and privacy:** Particularly when interviewing past and current clients, people may share sensitive personal information with you. A "Consent to Participate in Research" form may be used to ensure participant's privacy and that any information they give you will not be used for any other reason than the research purpose identified. An example of this type of form is included in **Appendix C**.

**Always thank your participants:** Remember to thank the participant for their time at the beginning and the end of the interview.

### Consent for Research Participation

I, \_\_\_\_\_, consent to participating in the  
(print name)

collection of research for the \_\_\_\_\_ program. This information will be used to capture current services and may be used to inform future program services.

By signing this consent I am expressing awareness of and agreement to the following:

1. Participation in the research is completely voluntary
2. Continuation of services is not dependent on participation
3. Any identifying information/data gathered will be kept strictly confidential

This consent expires 3 months from the date of signing.

Signed:

\_\_\_\_\_

(Signature)

\_\_\_\_\_

Date

## HOW TO WRITE A LITERATURE REVIEW

*"Both accountability and effectiveness in program development begin with a program design that is based on empirical evidence." ~ Nancy G. Calley*

### What is a literature review?

The purpose of a literature review is to provide an overview of all relevant and current literature on a given topic. A literature review for program design should focus on best practices and promising practices within the field of human services for which the program is being designed. It should be a logical and clear document that conveys what knowledge and ideas have been established in a particular area of program services.

### How to prepare a literature review:

#### Step One: Identify your topic and the components of your topic

Identify key words for your research. For instance, if you are searching for "best practices" in an area, you should consider including synonyms such as "evidence-based practices" and "promising practices" as well. You may also want to create subtopics as a means of connecting your ideas and research.

#### Step Two: Search for literature

Your literature review should include information from the following types of sources:

- Scholarly research (this includes academic journals and peer reviewed texts)
- Empirically-based books published by academic and scholarly presses
- Government reports and literature from task forces
- Best practices research from professional associations and advocacy groups that specialize in particular social issues
- Conference presentations and webinars
- Online data bases such as EBSCO (Because many disciplines overlap in the social sciences, you will want to look at medical, psychological, and business journals as well)
- Public library and University library catalogues
- Internet searches including Google Scholar
- Review the bibliographies of books and articles where you have found relevant information

Determining how much literature to review (i.e. the breadth and depth of your research) will be based on the complexity of your topic and the availability of information. Typically, you will want at least 20 sources for your literature review that include a variety of the sources listed above.

#### Step Three: Evaluate and prioritize

To write a comprehensive literature review, you will need to become familiar with a large amount of research on a particular topic. Literature reviews on best practices should be structured thematically. This means grouping the information into themes or sub-topics to demonstrate which components are most important to your research.

## Step Four: Analysis and discussion of findings

A good literature review should present the most relevant information from the literature in a logical, organized manner and bring the reader as up-to-date as possible. The information from these sources should be as current as possible (i.e. the last 5 – 10 years) to effectively inform your program design.

*Your literature review should:*

- Provide an overview of the topic along with the objectives of the literature review
- Present conclusions as to which sources provide the most contribution to the understanding and development of the topic
- Identify gaps in the existing literature and areas for future research
- Be organized into sections that represent themes or trends in the research

*Length of a literature review*

The length of a literature review depends on the scope of the research, the complexity of the topic, and the intended audience. Depending on these factors, a literature review for program design should be typically 10 to 20 pages in length.

## Citation styles

Citation styles can be grouped into two main categories: the *documentary-note style* and the *parenthetical style*.<sup>59</sup>

**Documentary-note style** involves using either footnotes or endnotes to cite your information. Footnotes appear at the bottom of the same page as the information you are citing and endnotes are listed at the end of your document. Documentary-note style allows information about your sources to be available in an organized fashion but does not interfere with the flow of your text. The Chicago or Turabian styles are both examples of documentary-note styles.

**Parenthetical style** is most commonly used for academic journals, literature courses, and other disciplines in the humanities. With this system of documentation, citations are placed in parenthesis within the body of the text and a “works cited” or reference list is included at the end of the document. MLA and APA are examples of the parenthetical citation style.

There are a number of sources and guides available online about the different citation styles and how to use them. Some suggested resources and links are offered at the end of this section.

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<sup>59</sup> IParadigms LLC website: [http://www.plagiarism.org/plag\\_article\\_citation\\_styles.html](http://www.plagiarism.org/plag_article_citation_styles.html)

## Quoting from sources

Phrases should be quoted when you want to use an author's exact words as they have written them. The words or phrase needs to be enclosed in quotation marks with the source of the quote cited at the end. If you are paraphrasing (restating an author's text or passage in different words) you do not need to use quotation marks, but you do need to cite the source.

## Listing references

A bibliography, also called References, should list of the sources you have used in the process of researching your work. In general, a bibliography includes:

1. Author(s) names
2. Titles of the works
3. Names and locations of the publishing companies
4. Dates of publication
5. Page numbers (if the text is part of multi-source volumes)
6. Website/URL/database if the information is from the internet

## Sources and Suggested Reading

Source	Website
Writing a Literature Review	<a href="https://www.american.edu/cas/writing/pdf/upload/LiteratureReview.pdf">https://www.american.edu/cas/writing/pdf/upload/LiteratureReview.pdf</a>
Writer's Handbook: Common Writing Assignments: Review of Literature.	<a href="http://www.wisc.edu/writing/Handbook/ReviewofLiterature.html">http://www.wisc.edu/writing/Handbook/ReviewofLiterature.html</a>
How to Write a Literature Review	<a href="http://www.whitesmoke.com/how-to-write-a-literature-review.html">http://www.whitesmoke.com/how-to-write-a-literature-review.html</a>
Citation Styles and Sources	<a href="http://www2.selu.edu/orgs/freshmanenglish/html/citation_styles.rtf">www2.selu.edu/orgs/freshmanenglish/html/citation_styles.rtf</a>
Research and Citation Sources	<a href="http://owl.english.purdue.edu/owl/section/2/">http://owl.english.purdue.edu/owl/section/2/</a>

## GLOSSARY

**ACTIVITIES** What program does with the inputs to achieve the outcomes. Activities include the strategies, techniques, and types of treatment (the main functions of program staff) that comprise the program's services. Included in activities are the four major service delivery phases (intake, screening, interventions, and discharge).

**ASSUMPTIONS** Facts or conditions you assume to be true and that contribute to the reasoning behind your program's approach to solving the problem.

**BENCHMARKS** Performance data that are used for comparative purposes to show how well a program has met its goals.

**CLIENT SERVICE PATHWAY** A visual flowchart that traces a client's pathway through the program from entry to exit.

**CORE PROGRAM DESIGN COMPONENTS** The detailed elements to be designed within the overall program planning process. Core components include: Problem Statement, Needs Assessment, Program Goal, Program Objectives, Change Strategies, Program Rationale, Assumptions, Theory of Change Statement, Logic Model, and Client Service Pathways.

**ECONOMIC EVALUATION** Evaluation that address how much the program or program components cost, usually in relation to alternative uses of the same resources and the benefits being produced by the program.

**EVALUATION** The systematic collection of information about a program that enables stakeholders to better understand the program, improve its effectiveness, and/or make decisions about future programming. Evaluation results are useful for internal purposes (e.g., helping to set new goals, organizational course correction) and external purposes (e.g., communication with stakeholders, reporting to funders).

**EVIDENCE-BASED** Approaches to prevention or treatment that are based in theory and have

undergone scientific evaluation. "Evidence-based" stands in contrast to approaches that are based on tradition, convention, belief, or anecdotal evidence.

**GOALS** Clear general statements of the overall purpose of the program and represents the ideal or "hoped for" outcome. Program Goals provide an answer to the problem statement and communicate the intended impact over the life of the program.

**IMPACTS** The organizational, community, and/or system level changes that are expected as a result from program activities. They might include improved conditions, increased capacity, and/or changes in the policy arena.

**IMPACT EVALUATION** Evaluation that seeks to answer cause-and-effect questions to prove that the outcomes achieved are directly attributable to a program.

**IMPLEMENTATION** A specified set of activities designed to put into practice the services of a program for a particular target population.

**INDICATORS** A specific, observable, and measurable characteristic or changes that will represent achievement of an outcome.

**INPUTS** The resources dedicated to the program which are needed to achieve the program outcomes. They include: staff, volunteers, material resources, facilities, equipment, collaborations and partnerships.

**INTERVENTION** What the program does to make a difference and bring about desired outcomes. "Intervention" is sometimes used interchangeably with "activities" or "services."

**LOGIC MODEL** A visual representation of how the program works including inputs, activities, outputs and outcomes.

**NEED** Something that is judged essential for well-being or something that is necessary to relieve a state of deficiency or deprivation.

**NEEDS ASSESSMENT** A researched conclusion illustrating an established gap between the identified program and the existing needs within a community.

**OBJECTIVES** What the program hopes to achieve in terms of measurable concrete changes.

**OUTCOME** A change in behaviour, attitudes, or knowledge that can be quantified using standardized scales or assessment tools. They are the changes that occur because of a program, or the difference that is made by a program.

**OUTCOME EVALUATION** An evaluation to determine the extent to which an intervention affects its participants.

**OUTPUTS** The direct products of the program and are usually measured in terms of volume of work accomplished or the concrete items that are produced as part of the program.

**PERFORMANCE MEASUREMENT** The basic tracking of variables that have been adopted as measures or "indicators" of the desired program outcomes. It does not infer causality; changes in outcomes could be attributable to multiple factors, not just the program.

**PROBLEM STATEMENT** A concise statement of the problem to be addressed by a program. Also called "problem", or "issue statement", or "situational statement."

**PROCESS EVALUATION** An evaluation to determine whether an intervention or program has been implemented as intended.

**PROGRAM** An organized set of activities and/or services aimed at modifying a problematic situation that affects segments of a population.

**PROGRAM DESIGN** An extended, goal-directed activity carried out in stages with tasks that are undertaken in a developmental but progressive manner to create a program.

**PROGRAM FIT** The degree to which a program matches a community's needs, resources, and implementation capacity.

**PROMISING / BEST PRACTICES** Those particular ways of doing things that have the potential to effectively address the issues of concern in a community. They include programs, policies, practices that have worked elsewhere, as judged by standards of effectiveness, feasibility, and appropriateness to the situation.

**QUALITATIVE DATA** Data obtained through asking open-ended questions, to which the answers are not limited to a set of choices or a scale. Most useful when you would like information in people's own words, or when the questions you are asking have too many possible answers for you to be able to list them. Qualitative data is more time-consuming to analyze than quantitative data, but can be a worthwhile and important part of a data collection effort.

**QUANTITATIVE DATA** Data described in terms of a quantity or number. Quantitative data is collected through closed-ended questions, where users are given a limited number of answer choices, or asked to answer on a scale. While quantitative data collection is suitable for collecting numeric data such as age, income, number of staff, number of children, etc., many types of information can be collected quantitatively if placed on a scale.

**RATIONALE** Describes why the program activities will lead to the outcomes. Based on relevant theories or perspectives to explain the appropriateness of fit for the chosen services/interventions.

**SOCIAL PROBLEMS** Situations affecting a significant number of people and that are believed to be sources of difficulty or threaten the stability of the community. Examples include homelessness, poverty, abuse, domestic violence.

**THEORY OF CHANGE** Illustrates the proposed relationship between the social problem, program services and program outcomes. Purpose is to link outcomes and services based on the social problem to explain HOW and WHY the desired change is expected to come about.

**THEORY OF CHANGE STATEMENT** An explanatory if/then statement that underscores the social problem to be addressed and the rationale of why the program will be successful in addressing it. Comprised of two components: etiology hypothesis and working intervention hypothesis.

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