[Program Name] [Project Title]

End of Project Report

1. End of Project Report
	1. Summary

|  |  |
| --- | --- |
| **Project Title** | **[Insert here]** |
| **Project Purpose** | [Insert here] |
| **Project Sponsor** | Health and Wellbeing Queensland (HWQld) |
| **Senior Responsible Officer** | Sally Russell-Hall (Prevention Programs Lead) |
| **Program** | [Insert program name here] |
| **Project Lead** | [Insert here] |
| **Budget / Resources** | [Insert here] |

|  |  |  |  |
| --- | --- | --- | --- |
| **Version Control** | **Date** | **Responsible Officer** | **Details** |
| **Version 1.0** | *DD/MM/YYYY* | *[Insert Name]* | *[List relevant changes made]* |
| **Version 2.0** |  |  |  |
| **Version 3.0** |  |  |  |

* 1. Project Statement

What is the goal of this project? Refer to your Project Plan and Elevator Pitch.

* 1. Project Objectives

What do you hope to achieve through delivery of the project? Refer to your Project Plan.

* 1. HWQld Strategic Alignment

Outline the strategic alignment with HWQld strategic documents. Refer to your Project Plan.

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| **Drivers** | **Description** |
| * **Making Healthy Happen Strategy 2032 and Action Plan**
* **Gather and Grow Strategy 2023 – 2032 and Action Plan**
* **HWQld Strategic Plan 2023-2027**
 | *[Project title] will form a critical component of the implementation of, for example the Making Healthy Happen Strategy 2032, Ambition 2: to empower people to stay healthy.**[Insert details from your project plan re: Alignment to any relevant strategies].* |
| **Ambitions/Key priorities** |  |
| **Strategies**  |  |

* 1. Project Deliverables

List the key deliverables as outlined in the Contract. These should be measurable items, so consider the SMART criteria. Refer to your Project Plan.

* 1. Stakeholders

List the project team, project sponsor, and any other key stakeholders that have been identified in the table below. Refer to your Project Plan.

|  |  |  |
| --- | --- | --- |
| **Organisation** | **Name** | **Contact Details (if available)** |
| **Project Team** | *Full Name, Position* | *Email and/or Phone* |
| **Project Sponsor** |  |  |
| **Stakeholder 1** |  |  |

* 1. Summary of Key Achievements, Outcomes, Benefits

Describe specific achievements, key deliverables and/ or performance measures that have been completed by the project. Consider quantitative data and qualitative insights.

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| --- | --- |
| **Completion date**  | **Milestone**  |
|  |  |
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* + 1. Qualitative Insights
		2. Quantitative data

Adapt to include relevant quantitative data. Refer to your Progress Report to extract data.

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| **Performance measure**  | **Description**  |
| **Objective**  | *E.g.,* Effectively promote and deliver an appropriate prevention program |
| **Sub-objective** | *E.g.,* 1.2 Provision of appropriate behaviour modification intervention |
| **Indicator**  | *E.g.,* a) Program reach, uptake and retention |
| **Participant socio-demographics**  | **Program reach, uptake and retention** |
|  | **Enrolled** | **Commenced** | **Complete** | **Completion rate**  |
|  | n | n | % | n | % | % |
| **Total**  |  |  |  |  |  |  |
| **Gender:**  |  |  |  |  |  |  |
| Woman |  |  |  |  |  |  |
| Man |  |  |  |  |  |  |
| Non-binary |  |  |  |  |  |  |
| Unknown |  |  |  |  |  |  |
| *(Add as relevant)* |  |  |  |  |  |  |

* 1. Lessons learned

Describe any major learnings/opportunities that would be helpful for future projects and initiatives based on this project’s experience, challenges and success.

* + 1. What worked well?
		2. What would you do differently next time?
		3. Any other learnings
	1. Recommendations

Describe any major recommendations/next steps and/or findings that would be helpful for future projects and initiatives based on this project’s experience and success.

1. Authorisation

|  |  |  |
| --- | --- | --- |
| **Approved by Project Lead:** |  | **Date:** |
| **Signature:** |  |  */ /*  |
| **Approved by Stream Lead:** |  | **Date:** |
| **Signature:** |  |  */ /*  |
| **Approved by Director:** |  | **Date:** |
| **Signature:** |  |  */ /*  |
| **Approved by Executive Sponsor:** |  | **Date:** |
| **Signature:** |  |  */ /*  |

1. Appendices

The following appendices have been recommended to enhance your program’s project plan, depending on size/scope.

* + 1. Project Schedule
		2. Evaluation Plan
		3. Program Logic Model
		4. Cost management