

Programme reporting standards for sexual, reproductive, maternal, newborn, child and adolescent health

PRS, version 1.0

The PRS tool is a checklist that can be used for reporting on the planning, implementation and monitoring and evaluation processes of sexual, reproductive, maternal, newborn, child and adolescent health (SRMNCAH) programmes. The PRS can be used throughout the life cycle of a programme, guiding not only the reporting of processes and outcomes but also the programme design and development. The PRS consists of 24 items across five sections. The items in each of the five sections reflect those deemed to be most central to the adequate and transparent reporting of programmes. The PRS checklist is provided in the table starting on the next page, including brief descriptions of each item.

Instructions for completing the PRS checklist:

In the right-hand column, for each item, complete as appropriate:

- If the information was **reported**, write “**R**” and provide the source and page number where the information can be located.
- If the information for an item is missing or insufficient, indicate that it was **not reported** with “**NR**”.
- While users of the PRS should consider the relevance of all items, some items may not be applicable to the programme or the specific report. If an item is irrelevant or beyond the scope of the programme, indicate that it is **not applicable** with “**NA**”.

For further instructions on using this tool, please refer to the technical World Health Organization (WHO) document at <http://apps.who.int/iris/bitstream/10665/258932/1/WHO-MCA-17.11-eng.pdf>

PRS checklist

Section Item number & name	Item description	Complete as appropriate: • Reported (R), provide source & page number • Not reported (NR) • Not applicable (NA)
Section A. Programme overview		
<i>Why was the programme started and what did it expect to achieve?</i>		
1. Rationale and objectives	a. Programme rationale, i.e. why the programme was initiated (nature and significance of the issue or problem being addressed) b. Goals and objectives c. Anticipated short- and long-term effects of the programme at different levels (i.e. individual, household, facility, organization, community and/or society)	
2. Start and end dates	a. Planned start and end dates of the programme b. Delays and/or unexpected end of the programme, including an explanation of the reasons	
3. Setting and context	a. Location, i.e. country/place name(s), specific site(s), type of environment (e.g. urban or rural) b. Overview of the context if pertinent to the programme (i.e. political, historical, sociocultural, socioeconomic, legal and/or health system)	
4. Stakeholders	a. Target population, described using key sociodemographic characteristics (e.g. age, gender, education level) b. Implementing organization(s) c. Partners and other stakeholders (e.g. local authorities, community leaders) d. Description of the involvement of different stakeholders in programme development and/or implementation	
5. Funding source(s)	Name of donor/funding source(s)	
6. Theory of change and/or logic model	Theory of change, assumptions and/or logic model underlying the programme, with details for how this guided the programme design, implementation and evaluation plans	
7. Human rights perspectives	a. Information about whether or not gender, equity, rights and ethical considerations were integrated into the programme, and if so, how b. Information about whether or not an accountability framework was adapted to define the programme's commitments and objectives, and if so, how this was done and how the framework will be implemented	

Section Item number & name	Item description	Complete as appropriate: <ul style="list-style-type: none"> ▪ Reported (R), provide source & page number ▪ Not reported (NR) ▪ Not applicable (NA)
Section B. Programme components and implementation	<i>What did the programme do and how?</i>	
8. Programme planning	Methods and rationale for selecting programme activities (e.g. based on results of a situational or stakeholder analysis, or needs assessment, and selection criteria such as evidence of impact or sustainability, or potential for scale-up)	
9. Piloting	Piloting of the programme activities elsewhere or within the programme; how, when, where and by whom this was done and with what results	
10. Components/ activities (Please repeat for each component)	Detailed description of the core programme components/activities: <ul style="list-style-type: none"> ▪ what was done (type of activity) ▪ how (methods/processes of implementation/delivery) ▪ when (frequency, intensity, duration of activity) ▪ by whom (implementing personnel, i.e. staff or volunteer providers, including description of their skills, training, characteristics and responsibilities) ▪ for whom (target population for each activity) ▪ education/support materials, if used (how they were developed/used, where they can be accessed) 	
11. Quality assurance mechanisms	a. Mechanisms used to ensure fidelity of programme implementation and adherence to appropriate standards of quality (e.g. supervision and support of personnel, refresher training, product quality checks) b. Efforts used to increase and sustain participation of stakeholders (e.g. incentives)	

Section Item number & name	Item description	Complete as appropriate: • Reported (R), provide source & page number • Not reported (NR) • Not applicable (NA)
Section C. Monitoring of implementation		
<i>How did the programme keep track of what was done?</i>		
12. Monitoring mechanisms	Methods for monitoring programme implementation, including data collection and analysis of indicators, to identify problems/issues and potential solutions	
13. Coverage/reach and dropout rate	<p>a. Uptake (utilization) of each programme activity reported, disaggregated by key sociodemographic characteristics (e.g. age, gender, education level)</p> <p>b. Coverage of the programme activities, including differential reach within and outside of the target population</p> <p>c. Non-participation and dropout rates among the target population, reported by key sociodemographic characteristics and reasons given, as well as a description of any actions taken to reach out to these individuals</p>	
14. Adaptations	<p>a. Information about whether or not the programme was delivered as intended, including description of any discrepancies between programme design and actual implementation, and the degree of match between programme content and theory of change</p> <p>b. Description of ongoing adaptation of programme activities to better fit the context, and the fidelity to the activity plan</p>	
15. Acceptability	Information about the acceptability of the programme among stakeholders (e.g. assessment of whether it was considered to be reasonable and relevant)	
16. Feasibility	Assessment of the feasibility of the programme (e.g. the extent to which it could be carried out in the particular context or by the specific organization)	
17. Factors affecting implementation	Description of key barriers and facilitators to programme implementation, including contextual factors (e.g. social, political, economic, health systems)	

Section Item number & name	Item description	Complete as appropriate: <ul style="list-style-type: none"> ▪ Reported (R), provide source & page number ▪ Not reported (NR) ▪ Not applicable (NA)
Section D. Evaluation and results	<i>How was the programme evaluated, and what were the findings?</i>	
18. Evaluation	a. Type of evaluation(s) conducted (e.g. process evaluation and/or outcome/impact evaluation) b. Evaluation methods ² ; how (quantitative and/or qualitative methods), when (timing and phases, e.g. baseline, midline, end-line data collection) and by whom the programme was evaluated (internal or external evaluator)	
19. Results	a. Description of the programme results (i.e. key process, output, outcome indicators), differentiating between short-, mid- and long-term effects (with or without any impact) b. Analysis/reporting of programme effects stratified by key sociodemographic characteristics and/or geographical areas c. Documentation of any unexpected effects (i.e. beyond what was anticipated in the design) on the target population, the communities and/or the health services	
20. Costs	a. Summary of the resources required for implementation (i.e. financial, physical and human resources) b. Type of cost analysis or cost-effectiveness analysis conducted	
Section E. Synthesis	<i>What are the key implications?</i>	
21. Lessons learnt	Appraisal of the weaknesses and strengths of the programme; what worked well and what can be improved	
22. Sustainability	Reflections on the sustainability of the programme over time, e.g. the expected ability to maintain the programme activities, level of engagement of stakeholders, outcomes achieved, effects (intended or unintended), partnerships built	
23. Scalability	Description of the scale-up of all or some programme activities, or any plans for scale-up	
24. Possibilities for implementation in other settings	Reflections on the context-dependence of the programme and on the degree of effort that would be needed to implement it in/adapt it to other settings	

² Reports of research studies should provide further details in line with guidelines for the reporting of the specific study design. Different guidelines are available in the EQUATOR database (<http://www.equator-network.org/>).

Additional information (optional)

References and/or links to websites or other sources of information relevant to the programme:

Any additional comments related to the items reported above: