

PROGRAM HEALTH FEEDBACK

Program Being Reviewed: Click or tap here to enter text.

Group Providing the Review: Click or tap here to enter text.

Person entering information: Click or tap here to enter text.

Issue(s)/concern(s): Click or tap here to enter text.

Proposed action(s):

- Improvement plan
- Consolidation
- Restructure
- Investment/reallocation of resources
- Other innovations
- New Programs
- Program elimination

Detailed description of proposed action, including timeline:

Click or tap here to enter text.

Why was this action chosen? Please provide an explanation of recommendation:

Click or tap here to enter text.