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**RHP 9 “Working Template” for Assessing Readiness**

**and Completing a Program Evaluation**

**Step 1.** For each question below, determine the relevance. How important is this to your project and stakeholders?

**Step 2.** Answer the most relevant questions to the best of your ability. If you cannot answer the questions or need assistance/data, identify who or what is needed to answer the question.

| **Evaluation Question/**  **Component** | **Rank the relevance of the question**  **(H, M, L)** | **Initial Response** | **What else is needed to answer this question/component?** |
| --- | --- | --- | --- |
| Example: What color is the sky? | High Moderate Low | The sky is blue. | Verify by looking out the window or asking Siri. |
| Describe:   * The intervention (services delivered) * How it was implemented * The context, culture and/or environment * The most critical resources required for your program’s success | High Moderate Low |  |  |
| Describe how this intervention fits into or has changed the “system of care.” | High Moderate Low |  |  |
| Describe any Evidence- Based Models used to develop or implement your program.  -And/or-  Provide examples from the industry/literature where the strategies you are implementing have been successful. | High Moderate Low |  |  |
| Describe the need for the program in your organization, community, or service area. | High Moderate Low |  |  |
| Describe the characteristics of the target population.  Specify the eligibility criteria, if applicable. | High Moderate Low |  |  |
| Describe any challenges your program has had meeting its MLIU target.  How did you address these challenges?  Do you anticipate any challenges reporting Medicaid IDs to HHSC for Waiver 2.0? | High Moderate Low |  |  |
| Describe the goals of the program following the logic model framework:   * Activities * Short term outcomes * Intermediate outcomes * Long-term outcomes   Describe the results you have achieved so far. | High Moderate Low |  |  |
| To what extent can your reported outcomes / results be attributed to the intervention?  What else might have influenced these results? | High Moderate Low |  |  |
| How aligned are your Cat 3 measures with your outcome goals and target population?  If you are able to select a new Cat 3 outcome, what would be the best measure? | High Moderate Low |  |  |
| Describe how continuous quality improvement (CQI) shaped intervention activities. | High Moderate Low |  |  |
| Describe challenges and barriers to impacting goals and outcomes. | High Moderate Low |  |  |
| Compare and contrast characteristics and outcomes of your   * **Target population** *(individuals eligible to receive the intervention)* and the * **Intervention population** *(individuals that actually did receive the intervention)*. | High Moderate Low |  |  |
| Describe key partnerships that were explored during this initial five years of the waiver and how they contributed to program impact.  What are your next steps for developing critical partnerships? | High Moderate Low |  |  |
| How is cost effectiveness currently being evaluated or explored in the context of continuing this intervention? | High Moderate Low |  |  |
| Describe how intervention spread is being considered and/or implemented. | High Moderate Low |  |  |
| Describe current and future improvements in data infrastructure and capacity. | High Moderate Low |  |  |
| Describe new or additional goals you hope to achieve with this program. | High Moderate Low |  |  |
| If another provider implemented this program, what is the likelihood they would obtain similar results?  In which environments are the intervention and implementation most feasible?  What has been key to your program’s success or failure? | High Moderate Low |  |  |
| Describe how evaluation findings will be disseminated within and beyond your organization. | High Moderate Low |  |  |