**Key Elements for Guidelines**

**Checklist**

The checklist below is a tool to assist in the development and review of written guidelines.

* Written guidelines are **required** for Evidence-Informed programs or practices
* Guidelines are best practice for **all** Smart Start funded programs. Guidelines and program model for evidence-based programs should be available from the purveyor.
* Guidelines assure activity is implemented consistently over time and consistently with providers. Program effectiveness is dependent on this consistency.

**Program Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of last review:\_\_\_\_\_\_\_\_**

**Staff Reviewed:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Key Elements**  **(minimum of 1 element per category)** | **Applicable? (Yes, No)** | **If Yes:**  **Document Where Located (physical location and electronic file name location)** | **Comments** | **Date Document last updated** |
| Category #1 Staff/Service Provider's Qualifications; Professional Development | | | |  |
| 1. Required minimum education |  |  |  |  |
| 1. Required minimum experience |  |  |  |  |
| 1. Other skills (interpersonal skills) |  |  |  |  |
| 1. Professional development plan |  |  |  |  |
| 1. Specific program training (certification, licensure) |  |  |  |  |
| 1. Supervision/coaching/TA; supervisor's qualifications |  |  |  |  |
| 1. Support staff requirements |  |  |  |  |
| 1. Ongoing supports (TA, coaching) |  |  |  |  |
| 1. Other: (please describe) |  |  |  |  |
| Category #2 Customer / Targeted Population | | | |  |
| 1. Qualifications for participation (risk factors, income levels, attendance) |  |  |  |  |
| 1. Minimum/maximum number of participants |  |  |  |  |
| 1. Recruitment efforts |  |  |  |  |
| 1. Retention strategies |  |  |  |  |
| 1. Completion or “graduation” guidelines |  |  |  |  |
| 1. Customer fees |  |  |  |  |
| 1. Other: (please describe) |  |  |  |  |
| Category #3 Program Implementation | | | |  |
| 1. Program goals and objectives |  |  |  |  |
| 1. Specific types of services provided |  |  |  |  |
| 1. Dosage - how many sessions; how often meetings are held |  |  |  |  |
| 1. Duration - length of program and length of each session |  |  |  |  |
| 1. Location of services |  |  |  |  |
| 1. Legal/policy requirements; program policies and procedures |  |  |  |  |
| 1. Grant criteria and disbursement information |  |  |  |  |
| 1. Other: (please describe) |  |  |  |  |
| Category #4 Program Management / Evaluation / Monitoring / Continuous Quality Improvement | | | |  |
| 1. Record keeping and data collection |  |  |  |  |
| 1. Reporting requirements |  |  |  |  |
| 1. Demonstration of program fidelity |  |  |  |  |
| 1. Assessments |  |  |  |  |
| 1. Continuous Quality Improvement process |  |  |  |  |
| 1. Output / outcome measures; measurement tools |  |  |  |  |
| 1. Other: (please describe) |  |  |  |  |
| Category #5 Community Partnership / Collaboration | | | |  |
| 1. Advisory board |  |  |  |  |
| 1. Community education, awareness, and involvement |  |  |  |  |
| 1. Community support system |  |  |  |  |
| 1. Program sustainability / long-term, stable funding |  |  |  |  |
| 1. Community referrals |  |  |  |  |
| 1. Other: (please describe) |  |  |  |  |

**Program Guidelines - Hit by a Bus Philosophy**

* Create a binder to have all documents (if too large, don’t forget to reference location in checklist (physical and/or electronic if applicable)
* Use checklist as initial organizer
* Use dividers for different sections.
* Date all documents and include electronic file location for each document.
* Think about passwords. You might not want to include them in the actual document to maintain security but think about where these are housed. Which staff is responsible, where are they located?
* Include: -curriculum, model or ongoing program materials (or at least reference to location)

-brochures, flyers

- all blank forms (location of completed forms)