

Program Stage of Development Worksheet

Name: _____

INSTRUCTIONS:		
Based on the review criteria listed in the <i>Program Stage of Development Evaluation Tool</i> , for each of the 10 Evaluation Components listed below, indicate (by putting a ✓ in the box next to) the stage of development at which you think your Area's environmental health services program is.	Please indicate the sources of information or data that will be most useful for the Review Team to use to evaluate your Area's stage of development for each component listed below (e.g. documents you've provided, people with whom to talk, feedback you provide during our site visit).	Please indicate the contextual factors that the Review Team should consider when evaluating your Area's stage of development for each component listed below (e.g., what barriers you face in developing aspects related to the 10 components).
Evaluation Components	Sources of Information/Data	Contextual Factors To Consider
1. Monitor health status to identify EH problems. <input type="checkbox"/> Basic <input type="checkbox"/> Intermediate <input type="checkbox"/> Comprehensive		
2. Diagnose and investigate EH problems and hazards in the community. <input type="checkbox"/> Basic <input type="checkbox"/> Intermediate <input type="checkbox"/> Comprehensive		
3. Inform, educate, and empower people about EH. <input type="checkbox"/> Basic <input type="checkbox"/> Intermediate <input type="checkbox"/> Comprehensive		
4. Mobilize partnerships to identify and solve EH problems. <input type="checkbox"/> Basic <input type="checkbox"/> Intermediate <input type="checkbox"/> Comprehensive		

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Evaluation Components	Sources of Information/Data	Contextual Factors To Consider
5. Develop policies and plans that support individual and community EH efforts. <input type="checkbox"/> Basic <input type="checkbox"/> Intermediate <input type="checkbox"/> Comprehensive		
6. Support laws and regulations that protect health and ensure safety. <input type="checkbox"/> Basic <input type="checkbox"/> Intermediate <input type="checkbox"/> Comprehensive		
7. Link programs to needed services and assure provision of services when otherwise unavailable. <input type="checkbox"/> Basic <input type="checkbox"/> Intermediate <input type="checkbox"/> Comprehensive		
8. Assure a competent EH workforce. <input type="checkbox"/> Basic <input type="checkbox"/> Intermediate <input type="checkbox"/> Comprehensive		

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Evaluation Components	Sources of Information/Data	Contextual Factors To Consider
9. Evaluate effectiveness, accessibility, and quality of EH services. <input type="checkbox"/> Basic <input type="checkbox"/> Intermediate <input type="checkbox"/> Comprehensive		
10. Research for new insights and innovative solutions to health problems. <input type="checkbox"/> Basic <input type="checkbox"/> Intermediate <input type="checkbox"/> Comprehensive		

Unique/Other Program Aspects

Please list unique or other aspects about your EH program, such as:

- contributions to other Area programs
- contributions to Headquarters EH programs (training, special initiatives, etc)
- how your program has handled specific barriers
- work on other national or international projects/activities (IHS or other agency-related)
- others?