



CHECKLIST For HOBSCOTCH Program Implementation

The following checklist is intended for use by community organizations who wish to implement the HOBSCOTCH Self-Management and Cognitive Training program to help people living with epilepsy and cognitive (e.g., memory, attention) problems. This checklist can assist organizations determine their readiness and capacity to successfully implement the HOBSCOTCH program.

Implementation Category	Readiness Statement	YES	NO
Leadership Support	<ul style="list-style-type: none"> ○ Support from leadership (PAB, Board of Directors) is established ○ The Exec. Director has identified this program as a service priority ○ Our leadership is familiar with the science/evidence supporting HOBSCOTCH ○ Our leadership is familiar with the HOBSCOTCH Institute 		
Staff	<ul style="list-style-type: none"> ○ We have staff with a background in counseling or behavioral health ○ We have staff with experience in delivering epilepsy education who are knowledgeable to discuss the disease and related comorbidities ○ We have staff willing to complete the 8-hour HOBSCOTCH Cognitive Coach training ○ We have staff who are able to assist with recruitment ○ We have staff to assist with printing and distribution of program materials 		
Funding	<ul style="list-style-type: none"> ○ We have CDC/EF funding to provide the HOBSCOTCH program ○ We have other funding to provide the HOBSCOTCH program ○ We have the ability to deliver HOBSCOTCH based on our annual revenue ○ We have a plan to explore funding to sustain HOBSCOTCH in our community 		
Engagement with Target Audience	<ul style="list-style-type: none"> ○ We have active channels of communication with people with epilepsy ○ People with epilepsy seek out our education programs and support services ○ We will share information about HOBSCOTCH on our organization's website 		
Recruitment and Referrals	<ul style="list-style-type: none"> ○ We have engaged local epilepsy providers to discuss patient recruitment ○ Our PAB is actively sharing our programs with their patient communities ○ We have strong relationships with community service providers ○ Our organization has marketing capabilities to commit to HOBSCOTCH recruitment ○ We will work with the HOBSCOTCH Institute to provide a stakeholder webinar providing education on epilepsy, cognition and the HOBSCOTCH program ○ Our organization can manage referrals in a timely and appropriate manner ○ We will accept referral from the HOBSCOTCH Institute ○ We will use template promotions from the HOBSCOTCH Institute 		
Program Delivery	<ul style="list-style-type: none"> ○ We have a champion or staff member who is supportive of HOBSCOTCH ○ We have staff who are comfortable collecting and submitting pre- and post-program surveys to assist with program evaluation, quality improvement ○ Our trained HOBSCOTCH Coach(es) will have time required to schedule sessions, provide reminders and deliver the intervention ○ We have the necessary technology available for online delivery of the program ○ Our staff have proposed strategies to help retain participants ○ Our staff will attend HOBSCOTCH Institute implementation support calls 		

* Items are adapted from the CDC's [Diabetes Prevention Program Readiness Assessment](#) and derived Project Uplift Implementation Checklist