

APPENDIX A-4

SITE VISIT OBSERVATION PROTOCOL

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Site Visit Observation Protocol

Evaluation of Demonstrations of Direct Certification with Medicaid for Free and Reduced-Price Meals (DCM-F/RP)

State: _____	Date of Observation: _____
Site Location: _____	Observer: _____
Activity Observed: _____	Time/Duration of Activity: _____

A. Description of staff completing data process

	Observations
Job title of staff member(s) completing the process	
Does the same person always complete this data process, or do other people in the [State/district] also complete it?	

B. Description of data process

	Observations
Objective of data process	
Data sources used	
How often data process is conducted	
Length of time to complete data process	
Description of how the data process is conducted	

	Observations
How does the DCM-F/RP process differ from direct certification with other programs?	
How does the process for reduced-price meals differ from direct certification for free meals only?	
What are the manual steps in the process?	
What are the automated steps in the process?	

C. Assessments of data process

	Assessments
Are any aspects of the data process designed to prevent errors?	
Do any aspects of the data process appear vulnerable to errors?	
Are any aspects of the process designed to increase efficiency?	
Do any aspects of the process seem unnecessary?	
Other observations	