**INCORPORATED TRUSTEES OF THE ANGLICAN CHURCH IN THE**

**DIOCESE OF TRINIDAD AND TOBAGO (ITACDTT)**

**Strategy Planning and Implementation Evaluation Form**

The purpose of this form is to evaluate strategy planning and implementation of priority areas of the ITACDTT Strategic Plan 2016-2020.   The evaluation form is divided into four (4) sections: **a)** Background, **b)** 2017 Action Plan and 2017 Work Plan, **c)** Strategic Planning, and **d)** Implementation Phase.

This form should be completed by an individual(s) who worked on the **2017 Action Plan** and **2017 Work Plans** of the **ITACDTT Strategic Plan 2016-2020**.  Please submit this completed form to the Diocesan Council Sub-Committee.

1. **Background**
2. Name of Parish: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
3. Name of Person(s) Completing Form: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Your Role in Parish: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
2. Today’s Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **2017 Action Plan and 2017 Work Plans**
2. Did your parish complete **a 2017 Action Plan** to implement the ITACDTT Strategic Plan 2016-2020? (***Select one***)
	1. Yes \_\_\_\_\_
	2. No \_\_\_\_\_
3. If **Yes** to **#5**, what date was the **2017 Action Plan** submitted? \_\_\_\_\_\_\_\_/\_\_\_\_\_\_\_\_\_\_

 ***month year***

1. If **Yes** to **#5**, did your **2017 Action Plan** include initiatives (or programs) under the following perspectives?

***Check one for each item***

|  |  |  |  |
| --- | --- | --- | --- |
|  | **2017 Action Plan Perspectives** | **Yes** | **No** |
| a | Community (i.e., activities conducted in the parish community) |  |  |
| b | Learning and Growth (i.e., activities related to staff training and development to conduct parish community activities) |  |  |
| c | Finance (i.e., activities related to raising and disbursement of funds to conduct parish community activities) |  |  |
| d | Internal Processes (i.e., activities related to the establishment of committees to conduct parish community activities) |  |  |

1. If **Yes** to **#5**, did your **2017 Action Plan** address the following items for your parish:

***Check one for each item***

|  |  |  |  |
| --- | --- | --- | --- |
|  | **2017 Action Plan Items** | **Yes** | **No** |
| a | Objective |  |  |
| b | Initiative |  |  |
| c | Responsible Person |  |  |
| d | Partner/Ministry to Consult or Engage |  |  |
| e | Target Date |  |  |
| f | Success Indicator (i.e., *how can we measure or demonstrate that an initiative is completed or successful? benchmarks*?) |  |  |
| g | Progress (i.e., *details of progress to date, useful information, barriers encountered*) |  |  |

1. Did your parish complete **2017 Work Plans** to implement the ITACDTT Strategic Plan 2016-2020?
	1. Yes \_\_\_\_\_
	2. No \_\_\_\_\_
2. If **Yes** to **#9**, did your **2017 Work Plans** address the following items for your parish?

***Check one for each item***

|  |  |  |  |
| --- | --- | --- | --- |
|  | **2017 Work Plan Items** | **Yes** | **No** |
| a | Action Steps (i.e., *what will be done*?) |  |  |
| b | Responsibilities (i.e., *who will do it?)* |  |  |
| c | Timelines (i.e., *by when? day/month*) |  |  |
| d | Resources (i.e., *resources available, resources needed– financial, human, political*) |  |  |
| e | Potential Barriers (i.e., *what individuals or organizations might resist? how?)* |  |  |
| f | Communications Plan (i.e., *who is involved? what methods? how often?)* |  |  |

1. Please indicate the name of parish committees and number of persons involved in developing the **2017 Action Plan** and **2017 Work Plans** to implement the ITACDTT Strategic Plan 2016-2020.

|  |  |  |
| --- | --- | --- |
|  | **Name of Parish Committee(s) Involved** | **Number of Persons** |
| a |  |  |
| b |  |  |
| c |  |  |
| d |  |  |
| e |  |  |
| f |  |  |

1. **Strategy Planning**
2. Please list the activities, services, and materials used by your parish during the **strategy planning** phase to develop the **2017 Action Plan** and **2017 Work Plans** to implement the ITACDTT Strategic Plan 2016-2020.
	1. **Activities** (e.g. team building/group exercises)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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* 1. **Services** (e.g., handouts, refreshments)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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* 1. **Materials** (e.g., flip chart paper, multi-media)

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1. Overall, on a scale of **1** to **5** with **1** being **Very Dissatisfied** and **5** being **Very Satisfied**, how satisfied are you with the **strategy planning** phase to develop the action plan and work plans to implement the ITACDTT Strategic Plan 2016-2020. (***Select one***)

\_\_\_\_\_ 1 Very Dissatisfied

\_\_\_\_\_ 2 Somewhat Dissatisfied

\_\_\_\_\_ 3 Neither Satisfied nor Dissatisfied

\_\_\_\_\_ 4 Somewhat Satisfied

\_\_\_\_\_ 5 Very Satisfied

1. Please explain your choice for **Item 13**.

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **Implementation Phase**
2. Has your parish begun to implement the 2017 Action Plan of the ITACDTT Strategic Plan 2016 - 2020? (***Select one***)
	1. Yes \_\_\_\_\_
	2. No \_\_\_\_\_
3. Overall, on a scale of **1** to **5** with **1** being **Very Dissatisfied** and **5** being **Very Satisfied,** how satisfied are you with the **implementation** of your Parish **2017 Action Plan** and **2017 Work Plans** of the ITACDTT Strategic Plan 2016-2020, at this time. (***Select one***)

\_\_\_\_\_ 1 Very Dissatisfied

\_\_\_\_\_ 2 Somewhat Dissatisfied

\_\_\_\_\_ 3 Neither Satisfied nor Dissatisfied

\_\_\_\_\_ 4 Somewhat Satisfied

\_\_\_\_\_ 5 Very Satisfied

1. Please explain your choice for **Item #16**.

 \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**Thank you for completing this form!**