

DGIS USER GUIDE CHILDREN AND YOUTH WITH SPECIAL HEALTH CARE
NEEDS FORMS

Version 3.0 – Updated 09/29/2023

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CHILDREN AND YOUTH WITH SPECIAL HEALTH CARE NEEDS FORMS

On the **Children and Youth with Special Health Care Needs** forms, the grantee provides details on programs promoting family engagement among children and youth with special health care needs, medical home access and use, and transition to adult health care for youth with special health care needs.

APPLICABLE REPORT TYPES

The report types are as follows:

- New Competing Performance Reports (NCPR)
- Non-Competing Continuation Performance Reports (NCCPR)
- Project Period End Reports (PPER)

Figure 1: Children and Youth with Special Health Care Needs Forms

Children and Youth with Special Health Care Needs Forms			
Applicable Forms	Report Types		
	NCPR	NCCPR	PPER
Children and Youth with Special Health Care Needs – Form 1	✓	✓	✓
Children and Youth with Special Health Care Needs – Form 2	✓	✓	✓
Children and Youth with Special Health Care Needs – Form 3	✓	✓	✓

CHILDREN AND YOUTH WITH SPECIAL HEALTH CARE NEEDS FORM 1

FORM INSTRUCTIONS

CSHCN 1 DETAIL SHEET

The following information is displayed under the **Children and Youth with Special Health Care Needs Form 1 Detail Sheet**. The grantee may expand the accordion menu to view the following details:

1. Children and Youth with Special Health Care Needs (CSHCN 1) – Family Engagement
2. Performance Measure
3. Goal
4. Level
5. Domain
6. Definition
7. Benchmark Data Sources
8. Grantee Data Sources
9. Significance

Figure 2: Children and Youth with Special Health Care Needs 1: Detail Sheet

▶ DG00001		Due In: 49 Days Status: Not Started
▶ Resources		
Fields with ★ are required.		
▼ CSHCN 1 Detail Sheet		
Children and Youth with Special Health Care Needs (CSHCN 1) - Family Engagement	The percent of programs promoting and/ or facilitating family engagement among children and youth with special health care needs.	
Performance Measure	The percent of MCHB funded projects promoting and/ or facilitating family engagement among children and youth with special health care needs.	
Goal	To ensure supportive programming for family engagement among children and youth with special health care needs.	
Level	Grantee	
Domain	CSHCN	
Definition	Family Engagement is defined as “patients, families, their representatives, and health professionals working in active partnership at various levels across the health care system to improve health and health care.” This definition is not intended to negate the various levels or degree to which the interaction between families and professionals can take place. Family and Youth Leaders are family members who have experience navigating through service systems and are knowledgeable and skilled in partnering with professionals to carry out necessary system changes. Family members are not limited to the immediate family within the household. Meaningful [Support] Roles for family members/ leaders are above and beyond “feedback” surveys. Families are considered to have a meaningful role in decision making when the partnership involves all elements of shared decision-making which are: collaboration, respect, information sharing, encouragement and consideration of preferences and values, and shared responsibility for outcomes. Show less	
Benchmark Data Sources	None	
Grantee Data Sources	Title V National Outcome Measure #17.2	
Significance	Children and youth live within the context of families, who are the ultimate decision-makers and health enablers for their children.	

TIER 1 (REQUIRED)

In this section, the grantee must respond to the following question(s):

1. Are you promoting and/or facilitating family engagement among children and youth with special health care needs in your program? The grantee must select either Yes or No. If the grantee selects No, they must justify their selection in the Comments section.

Note the following requirements and additional information before completing this section:

- For **New Competing Performance Reports (NCPRs)**, the grantee is required to fill out Tier 1. Grantees cannot complete subsequent tiers in the NCPR.
- For **Non-Competing Continuation Reports (NCCPRs)** and **Project Period End Reports (PPERs)**, the grantee is required to fill out Tier 1 and may only proceed to the next tier after providing a response.

Figure 3: Children and Youth with Special Health Care Needs 1: Tier 1

The screenshot shows a survey question titled "Tier 1". The question is: "★ Are you promoting and/ or facilitating family engagement among children and youth with special health care needs in your program?". There are two radio buttons: "Yes" (selected) and "No". Below the question is a "Comments" section with a text area. The text area contains the placeholder text "(If 'No', then please enter explanation here)". At the bottom of the text area, it says "0/5000 characters".

TIER 2 AND 3 (REQUIRED)

In this section, the grantee must respond to the following question(s):

1. Through what processes/mechanisms are you promoting and/or facilitating family engagement? Select all that apply.

Note the following requirements and additional information before completing this section:

- Tier 2 is required for Non-Competing Continuation Performance Reports (NCCPRs) and Project Period End Reports (PPERs).
- For **New Competing Performance Reports (NCPRs)**, users are only required to fill out Tier 1.
- For all the checkboxes selected by the grantee in Tier 2, the corresponding options are enabled and required under Tier 3.
- The corresponding values for the unchecked boxes under Tier 2 will be disabled under Tier 3.

2. **Activity Data Collection Form:** How many are reached through those activities?
 - a. *Participants/Public:* Enter an integer from 0–999,999.
 - b. *Providers/Health Care Professionals:* Enter an integer from 0–999,999.
 - c. *Community/Local Partners:* Enter an integer from 0–999,999.
 - d. *State or National Partners:* Enter an integer from 0–999,999.

Note the following requirements and additional information before completing this section:

- All the above fields (except for *Comments*) are required.
 - Report the number reached by each activity for each participant type.
 - Only report a participant under one participant type.
 - Select the best category for the participant.
 - The grantee may proceed to the next tier only after responding to the required questions.
3. *Comments* (optional): The grantee may add comments.

Figure 4: Children and Youth with Special Health Care Needs 1: Tier 2 and 3

▼ Tier 2 & 3

★ Through what processes/ mechanisms are you promoting and/ or facilitating family engagement?

- Technical Assistance
- Training
- Product Development
- Research/ Peer-Reviewed Publications
- Outreach/ Information Dissemination/ Education
- Tracking/ Surveillance
- Screening/ Assessment
- Referral/ Care Coordination
- Direct Service
- Quality Improvement Initiatives

Activity Data Collection Form

How many are reached through those activities?

Processes Mechanisms	Participants/ Public	Providers/ Health Care Professionals	Community/ Local Partners	State or National Partners	Total
Technical Assistance	5	5	5	5	20
Product Development	5	5	5	5	20
Training	5	5	5	5	20
Research/ Peer-Reviewed Publications	5	5	5	5	20
Outreach/ Information Dissemination/ Education	5	5	5	5	20

COMMENTS
<div style="border: 1px solid black; height: 100px; width: 100%;"></div> <p>0/5000 characters</p>

TIER 4 (OPTIONAL)

In this section, the grantee may respond to the following question(s):

1. **Outcome 1:** Percent of the target population with family and CSHCN leaders with meaningful roles on community/state/regional level teams focused on CSHCN Systems.
 - a. **Numerator:** Enter an integer from 0–999,999.
 - b. **Denominator:** Enter an integer from 0–999,999. Denominator must be greater than or equal to Numerator.
 - c. **Outcome (%):** The text box will be automatically populated using the values provided above.
2. **Outcome 2:** Percent of racial and ethnic family and CSHCN leaders who are trained and serving on community/state/regional or national-level teams focused on CSHCN system.
 - a. **Numerator:** Enter an integer from 0–999,999.
 - b. **Denominator:** Enter an integer from 0–999,999. Denominator must be greater than or equal to Numerator.
 - c. **Outcome (%):** The text box will be automatically populated using the values provided above.
3. **Outcome 3:** Percent of the target population with family of CSHCN participating in information exchange forums.
 - a. **Numerator:** Enter an integer from 0–999,999.
 - b. **Denominator:** Enter an integer from 0–999,999. Denominator must be greater than or equal to Numerator.
 - c. **Outcome (%):** The text box will be automatically populated using the values provided above.
4. **Outcome 4:** Percent of family and CSHCN leaders trained who report increased knowledge, skill, ability, and self-efficacy to serve as leaders on systems-level teams.
 - a. **Numerator:** Enter an integer from 0–999,999.
 - b. **Denominator:** Enter an integer from 0–999,999. Denominator must be greater than or equal to Numerator.
 - c. **Outcome (%):** The text box will be automatically populated using the values provided above.

Figure 3: Children and Youth with Special Health Care Needs 1: Tier 4 (Optional)

▼ Tier 4 (Optional)

■ Tier 4 is optional. If you have no outcomes to fill out, please select 'Save and Continue' at the bottom of the page.

What are the related outcomes in the reporting year?

Outcome 1 - Percent of target population with family and CSHCN leaders with meaningful roles on community/ state/ regional/ national level teams focused on CSHCN systems

Numerator	<input style="width: 90%;" type="text" value="5"/> <p>1 Number of Family and CSHCN leaders with meaningful roles on community/ state/ regional/ national level teams focused on CSHCN systems.</p>
Denominator	<input style="width: 90%;" type="text" value="5"/> <p>1 Number of CSHCN in catchment area.</p>
Outcome (%)	100

Outcome 2 - Percent of racial and ethnic family and CSCHN leaders who are trained and serving on community/ state/ regional/ national level teams focused on CSHCN systems

Numerator	<input style="width: 90%;" type="text"/> <p>1 Number of racial and ethnic family and CSCHN leaders trained and serving on community/ state/ regional/ national level teams focused on CSHCN systems.</p>
Denominator	<input style="width: 90%;" type="text"/> <p>1 Number of CSHCN in catchment area.</p>
Outcome (%)	

Outcome 3 - Percent of target population with family of CSHCN participating in information exchange forums

Numerator	<input style="width: 90%;" type="text"/> <p>1 Number of participating in information exchange forums.</p>
Denominator	<input style="width: 90%;" type="text"/> <p>1 Number of CSHCN in catchment area.</p>
Outcome (%)	

Outcome 4 - Percent of family and CSCHN leaders trained who report increased knowledge, skill, ability and self-efficacy to serve as leaders on systems-level teams	
Numerator	<input type="text"/> i Number of family and CSCHN leaders trained who report increased knowledge, skill, ability and self-efficacy to serve as leaders on systems-level teams.
Denominator	<input type="text"/> i Number of CSCHN in catchment area.
Outcome (%)	<input type="text"/>

FORM-LEVEL RULES AND VALIDATIONS

1. The grantee may only fill out Tier 1 for **New Competing Performance Reports (NCPRs)**.
2. For Non-Competing Continuation Performance Reports (NCCPRs) and Project Period End Reports (PPERs), if the grantee selects *Yes* for Tier 1, then they must complete Tier 2 and Tier 3. This is true for Capacity Building, Women's/Maternal Health, Perinatal Infant Health, Child Health, Children and Youth with Special Health Care Needs, Adolescent Health, and Life Course forms.
3. The *Comments* text box will accept both text and numerical values (maximum of 5,000 characters).

CHILDREN AND YOUTH WITH SPECIAL HEALTH CARE NEEDS FORM 2


FORM INSTRUCTIONS

CSHCN 2 DETAIL SHEET

The following information is under the **Children and Youth with Special Health Care Needs Form 2 Detail Sheet**. The grantee may expand the accordion menu to view the following details:

1. Children and Youth with Special Health Care Needs (CSHCN 2) – Access to and use of Medical Home
2. Performance Measure
3. Goal
4. Level
5. Domain
6. Definition
7. Benchmark Data Sources
8. Grantee Data Sources
9. Significance

Figure 6: Children and Youth with Special Health Care Needs 2: Detail Sheet

▶ DG00006863: (U7EMC00021) ZASLAWSKI MCFADYEN HEALTH CARE AUTHORITY, Mathis, NY		Due In: 49 Days Status: Not Started
▶ Resources 		
Fields with ★ are required.		
▼ CSHCN 2 Detail Sheet		
Children and Youth with Special Health Care Needs (CSHCN 2) - Access to and Use of Medical Home	The percent of programs promoting and/ or facilitating medical home access and use among children and youth with special health care needs.	
Performance Measure	The percent of MCHB-funded projects promoting and/ or facilitating medical home access and use among children and youth with special health care needs. Show less	
Goal	To ensure supportive programming medical home access and use among children and youth with special health care needs.	
Level	Grantee	
Domain	CSHCN	
Definition	Medical Home: The pediatric medical home can be defined by the AAP as having the following characteristics: the medical care of infants, children, and adolescents ideally should be accessible, continuous, comprehensive, family-centered, coordinated, compassionate, and culturally effective. It should be delivered or directed by well-trained physicians who provide primary care and help to manage and facilitate essentially all aspects of pediatric care. Show less	
Benchmark Data Sources	Related to HP2030 MICH-19: Increase the proportion of children and adolescents who receive care in a medical home. (Baseline: 48.6% in 2016-17, Target: 53.6%). Show less	
Grantee Data Sources	Title V National Performance Measure #11	
Significance	The American Academy of Pediatrics (AAP) specifies seven qualities essential to medical home care, which include accessible, family-centered, continuous, comprehensive, coordinated, compassionate and culturally effective. Providing comprehensive and coordinated care to children in a medical home is the standard of pediatric practice. Research indicates that children with a stable and continuous source of health care are more likely to receive appropriate preventive care, are less likely to be hospitalized for preventable conditions, and are more likely to be diagnosed early for chronic or disabling conditions. Show less	

TIER 1 (REQUIRED)

In this section, the grantee must respond to the following question(s):

1. Are you promoting and/or facilitating medical home access and use among children and youth with special health care needs? The grantee must select either Yes or No. If the grantee selects No, they must justify their selection in the Comments section.

Note the following requirements and additional information before completing this section:

- For **New Competing Performance Reports (NCPRs)**, the grantee is required to fill out Tier 1. Grantees cannot complete subsequent tiers in the NCPR.
- For **Non-Competing Continuation Reports (NCCPRs)** and **Project Period End Reports (PPERs)**, the grantee is required to fill out Tier 1 and may only proceed to the next tier after providing a response.

Figure 7: Children and Youth with Special Health Care Needs 2: Tier 1

The screenshot shows a web-based survey interface for Tier 1. At the top, there is a dropdown menu labeled 'Tier 1'. Below it, a question is displayed: '★ Are you promoting and/or facilitating medical home access and use among children and youth with special health care needs?'. To the right of the question are two radio buttons: 'Yes' (which is selected) and 'No'. Below the question is a 'Comments' section with a text input area. A placeholder text inside the input area reads '(If "No", then please enter explanation here)'. At the bottom right of the input area, there is a character count: '0/5000 characters'.

TIER 2 AND 3 (REQUIRED)

In this section, the grantee must respond to the following question(s):

1. Through what activities are you addressing medical home access and use? Select all that apply.

Note the following requirements and additional information before completing this section:

- Tier 2 is required for Non-Competing Continuation Performance Reports (NCCPRs) and Project Period End Reports (PPERs).
 - For **New Competing Performance Reports (NCPRs)**, users are only required to fill out Tier 1.
 - For all the checkboxes selected by the grantee in Tier 2, the corresponding options are enabled and required under Tier 3.
 - The corresponding values for the unchecked boxes under Tier 2 will be disabled under Tier 3.
2. *Activity Data Collection Form*: How many are reached through those activities?
 - a. *Participants/Public*: Enter an integer from 0–999,999.
 - b. *Providers/Health Care Professionals*: Enter an integer from 0–999,999.
 - c. *Community/Local Partners*: Enter an integer from 0–999,999.
 - d. *State or National Partners*: Enter an integer from 0–999,999.
 3. *Comments*: The grantee may add comments here. This field is not required.

Note the following requirements and additional information before completing this section:

- All fields (except for *Comments*) are required.
- The grantee may proceed to the next tier only after responding to the required questions.
- Report the number reached by each activity for each participant type.
- Only report a participant under one participant type.
- Select the best category for the participant.

Figure 8: Children and Youth with Special Health Care Needs 2: Tier 2 and 3

▼ Tier 2 & 3

★ Through what processes/ mechanisms are you addressing medical home access and use?

- Technical Assistance
- Training
- Product Development
- Research/ Peer-Reviewed Publications
- Outreach/ Information Dissemination/ Education
- Tracking/ Surveillance
- Screening/ Assessment
- Referral/ Care Coordination
- Direct Service
- Quality Improvement Initiatives

Activity Data Collection Form

How many are reached through those activities?

Processes/ Mechanisms	Participants/ Public	Providers/ Health Care Professionals	Community/ Local Partners	State or National Partners	Total
Technical Assistance	<input type="text" value="5"/>	<input type="text" value="5"/>	<input type="text" value="5"/>	<input type="text" value="5"/>	<input type="text" value="20"/>
Training	<input type="text" value="5"/>	<input type="text" value="5"/>	<input type="text" value="5"/>	<input type="text" value="5"/>	<input type="text" value="20"/>
Product Development	<input type="text" value="5"/>	<input type="text" value="5"/>	<input type="text" value="5"/>	<input type="text" value="5"/>	<input type="text" value="20"/>
Research/ Peer-Reviewed Publications	<input type="text" value="5"/>	<input type="text" value="5"/>	<input type="text" value="5"/>	<input type="text" value="5"/>	<input type="text" value="20"/>
Outreach/ Information Dissemination/ Education	<input type="text" value="5"/>	<input type="text" value="5"/>	<input type="text" value="5"/>	<input type="text" value="5"/>	<input type="text" value="20"/>

COMMENTS

0/5000 characters

TIER 4 (OPTIONAL)

In this section, the grantee may respond to the following question(s):

1. **Outcome 1:** Percent of target population that demonstrates a direct linkage to a coordinated medical home community as a direct result of activities conducted by project.
 - a. *Numerator:* Enter an integer from 0–999,999.
 - b. *Denominator:* Enter an integer from 0–999,999. Denominator must be greater than or equal to Numerator.
 - c. *Outcome (%)*: The text box will be automatically populated using the values provided above.

Figure 94: Children and Youth with Special Health Care Needs 2: Tier 4 (Optional)

▼ Tier 4 (Optional)

■ Tier 4 is optional. If you have no outcomes to fill out, please select 'Save and Continue' at the bottom of the page.

What are the related outcomes in the reporting year?

Outcome 1 - Percent of target population that demonstrate a direct linkage to a coordinated medical home community as a direct result of activities conducted by project

Numerator	<input style="width: 90%;" type="text"/> <small>📘 Target population with a demonstrated direct linkage to a coordinated medical home.</small>
Denominator	<input style="width: 90%;" type="text"/> <small>📘 Target population (as identified in grantee application).</small>
Outcome (%)	<input style="width: 90%; background-color: #f0f0f0;" type="text"/>

FORM-LEVEL RULES AND VALIDATIONS

1. The grantee must only fill out Tier 1 for **New Competing Performance Reports (NCPs)**.
2. For Non-Competing Continuation Performance Reports (NCCPRs) and Project Period End Reports (PPERs), if the grantee selects *Yes* for Tier 1, then they must complete Tier 2 and Tier 3. This is true for Capacity Building, Women’s/Maternal Health, Perinatal Infant Health, Child Health, Children and Youth with Special Health Care Needs, Adolescent Health, and Life Course forms.
3. The *Comments* text box will accept both text and numerical values (maximum of 5,000 characters).

CHILDREN AND YOUTH WITH SPECIAL HEALTH CARE NEEDS FORM 3

FORM INSTRUCTIONS

CSHCN 3 DETAIL SHEET

The following information is under the **Children and Youth with Special Health Care Needs Form 3 Detail Sheet**. The grantee may expand the accordion menu to view the following details:

1. Children and Youth with Special Health Care Needs (CSHCN 3) – Transition
2. Performance Measure
3. Goal
4. Level
5. Domain
6. Definition
7. Benchmark Data Sources
8. Grantee Data Sources
9. Significance

Figure 50: Children and Youth with Special Health Care Needs 3: Detail Sheet

Children and Youth with Special Health Care Needs (CSHCN 3)

▶ DG000
Due In: 49 Days | Status: Not Started

▶ Resources

Fields with ★ are required.

▼ CSHCN 3 Detail Sheet

Children and Youth with Special Health Care Needs (CSHCN 3) - Transition	The percent of programs promoting and/ or facilitating transition to adult health care for youth with special health care needs.
Performance Measure	The percent of MCHB funded projects promoting and/ or facilitating transition to adult health care for youth with special health care needs.
Goal	To ensure supportive programming for transition to adult health care for youth with special health care needs.
Level	Grantee
Domain	CSHCN
Definition	<p>The terms “assessed for readiness” and “deemed ready” used here refer to language utilized by gottransition.org. Health care transition: is the process of changing from a pediatric to an adult model of health care. The goal of transition is to optimize health and assist youth in reaching their full potential. To achieve this goal requires an organized transition process to support youth in acquiring independent health care skills, preparing for an adult model of care, and transferring to new providers without disruption in care. Transition Readiness: Assessing youth’s transition readiness and self-care skills is the third element in these health care transition quality recommendations. Use of a standardized transition assessment tool is helpful in engaging youth and families in setting health priorities; addressing self-care needs to prepare them for an adult approach to care at age 18, and navigating the adult health care system, including health insurance. Providers can use the results to jointly develop a plan of care with youth and families. Transition readiness assessment should begin at age 14 and continue through adolescence and young adulthood, as needed. Show less</p>

Benchmark Data Sources	Related to HP2030 AH-02: Increase the proportion of adolescents who speak privately with a physician or other health care provider during a preventive medical visit. (Baseline: 38.4% in 2016-17, Target: 43.3%). Related to HP2030 AH-R01: Increase the proportion of adolescents (aged 12 to 17 years) with and without special health care needs who receive services to support their transition to adult health care. (Research) Show less
Grantee Data Sources	Title V National Performance Measure #12.
Significance	Over 90 percent of children with special health care needs now live to adulthood, but are less likely than their non-disabled peers to complete high school, attend college, or be employed. Health and health care are cited as two of the major barriers to making successful transitions. The transition of youth to adulthood, including moving from a child to adult healthcare, is a national priority as evidenced by the 2011 clinical report and algorithm developed jointly by the AAP, American Academy of Family Physicians and American College of Physicians to improve healthcare transitions for all youth and families. Show less

TIER 1 (REQUIRED)

In this section, the grantee must respond to the following question(s):

1. Are you addressing the transitional needs to adult health care for youth with special health care needs in your program? The grantee must select either Yes or No. If the grantee selects No, then they must justify in the Comments section.

Note the following requirements and additional information before completing this section:

- For **New Competing Performance Reports (NCPRs)**, the grantee is required to fill out Tier 1. Grantees cannot complete subsequent tiers in the NCPR.
- For **Non-Competing Continuation Reports (NCCPRs)** and **Project Period End Reports (PPERs)**, the grantee is required to fill out Tier 1 and may only proceed to the next tier after providing a response.

Figure 61: Children and Youth with Special Health Care Needs 3: Tier 1

▼ Tier 1

★ Are you addressing the transitional needs to adult health care for youth with special health care needs in your program? Yes No

Comments

(If 'No', then please enter explanation here)

0/5000 characters

TIER 2 AND 3 (REQUIRED)

In this section, the grantee must respond to the following question(s):

1. Through what activities are you promoting or facilitating the transition to adult health care for youth with special health care needs? Select all that apply.

Note the following requirements and additional information before completing this section:

- Tier 2 is required for Non-Competing Continuation Performance Reports (NCCPRs) and Project Period End Reports (PPERs).
 - For **New Competing Performance Reports (NCPRs)**, users are only required to fill out Tier 1.
 - For all the checkboxes selected by the grantee in Tier 2, the corresponding options are enabled and required under Tier 3.
 - The corresponding values for the unchecked boxes under Tier 2 will be disabled under Tier 3.
2. *Activity Data Collection Form*: How many are reached through those activities?
 - a. *Participants/Public*: Enter an integer from 0–999,999.
 - b. *Providers/Health Care Professionals*: Enter an integer from 0–999,999.
 - c. *Community/Local Partners*: Enter an integer from 0–999,999.
 - d. *State or National Partners*: Enter an integer from 0–999,999.
 3. *Comments*: The grantee may add comments. This field is not required.

Figure 72: Children and Youth with Special Health Care Needs 3: Tier 2 and 3

▼ Tier 2 & 3

★ Through what activities are you promoting or facilitating the transition to adult health care for youth with special health care needs?

- Technical Assistance
- Training
- Product Development
- Research/ Peer-Reviewed Publications
- Outreach/ Information Dissemination/ Education
- Tracking/ Surveillance
- Screening/ Assessment
- Referral/ Care Coordination
- Direct Service
- Quality Improvement Initiatives

Activity Data Collection Form

How many are reached through those activities?

Processes/ Mechanisms	Participants/ Public	Providers/ Health Care Professionals	Community/ Local Partners	State or National Partners	Total
Technical Assistance	<input type="text" value="5"/>	<input type="text" value="5"/>	<input type="text" value="5"/>	<input type="text" value="5"/>	<input type="text" value="20"/>
Product Development	<input type="text" value="5"/>	<input type="text" value="5"/>	<input type="text" value="5"/>	<input type="text" value="5"/>	<input type="text" value="20"/>
Research/ Peer-Reviewed Publications	<input type="text" value="5"/>	<input type="text" value="5"/>	<input type="text" value="5"/>	<input type="text" value="5"/>	<input type="text" value="20"/>
Training	<input type="text" value="5"/>	<input type="text" value="5"/>	<input type="text" value="5"/>	<input type="text" value="5"/>	<input type="text" value="20"/>

COMMENTS

0/5000 CHARACTERS

TIER 4 (OPTIONAL)

In this section, the grantee may respond to the following question(s):

1. *Outcome 1:* Percent of grantees promoting an evidence-informed framework and clinical recommendations for transition from pediatric to adult health.
 - a. *Numerator:* Enter an integer from 0–999,999.
 - b. *Denominator:* Enter an integer from 0–999,999. Denominator must be greater than or equal to Numerator.
 - c. *Outcome (%):* The text box will be automatically populated using the values provided above.
2. *Outcome 2:* Percent of grantees involving both pediatric and adult providers/systems in transition efforts.
 - a. *Numerator:* Enter an integer from 0–999,999.
 - b. *Denominator:* Enter an integer from 0–999,999. Denominator must be greater than or equal to Numerator.
 - c. *Outcome (%):* The text box will be automatically populated using the values provided above.
2. *Outcome 3:* Percent of grantees initiating or encouraging transition planning early in adolescence.
 - a. *Numerator:* Enter an integer from 0–999,999.
 - b. *Denominator:* Enter an integer from 0–999,999. Denominator must be greater than or equal to Numerator.
 - c. *Outcome (%):* The text box will be automatically populated using the values provided above.
3. *Outcome 4:* Percent of grantees linking transition efforts with medical home initiatives.
 - a. *Numerator:* Enter an integer from 0–999,999.
 - b. *Denominator:* Enter an integer from 0–999,999. Denominator must be greater than or equal to Numerator.
 - c. *Outcome (%):* The text box will be automatically populated using the values provided above.
4. *Outcome 5:* Percent of grantees linking transition efforts with adolescent preventive care efforts.
 - a. *Numerator:* Enter an integer from 0–999,999.
 - b. *Denominator:* Enter an integer from 0–999,999. Denominator must be greater than or equal to Numerator.
 - c. *Outcome (%):* Text box will be automatically populated using the values provided above.

Figure 83: Children and Youth with Special Health Care Needs 3: Tier 4 (Optional)

▼ **Tier 4 (Optional)**

■ Tier 4 is optional. If you have no outcomes to fill out, please select 'Save and Continue' at the bottom of the page.

What are the related outcomes in the reporting year?

Outcome 1 - Percent of grantees promoting an evidence-informed framework and clinical recommendations for transition from pediatric to adult health care

Numerator	<input style="width: 95%;" type="text"/> <small>📌 Number of Grantees promoting an evidence informed framework.</small>	
Denominator	<input style="width: 95%;" type="text"/> <small>📌 Total Number of grantees reporting transition performance measure.</small>	
Outcome (%)	<input style="width: 95%;" type="text"/>	

Outcome 2 - Percent of grantees involving both pediatric and adult providers/ systems in transition efforts

Numerator	<input style="width: 95%;" type="text"/> <small>📌 Number of pediatric and adult providers involved in grantee transition efforts.</small>	
Denominator	<input style="width: 95%;" type="text"/> <small>📌 Total number of transition practices sponsored by grantee.</small>	
Outcome (%)	<input style="width: 95%;" type="text"/>	

Outcome 3 - Percent of grantees initiating or encouraging transition planning early in adolescence

Numerator	<input style="width: 95%;" type="text"/> <small>📌 Number of Grantees promoting transition planning early in adolescence.</small>	
Denominator	<input style="width: 95%;" type="text"/> <small>📌 Total number of grantees reporting transition performance measure.</small>	
Outcome (%)	<input style="width: 95%;" type="text"/>	

Outcome 4 - Percent of grantees linking transition efforts with medical home initiatives	
Numerator	<input type="text"/> ⓘ Number of Grantees promoting transition as part of routine medical home care.
Denominator	<input type="text"/> ⓘ Total number of grantees reporting transition performance measure.
Outcome (%)	<input type="text"/>

Outcome 5 - Percent of grantees linking transition efforts with adolescent preventive care efforts	
Numerator	<input type="text"/> ⓘ Number of grantees promoting transition as part of routine adolescent preventive care.
Denominator	<input type="text"/> ⓘ Total number of grantees reporting transition performance measure.
Outcome (%)	<input type="text"/>

FORM-LEVEL RULES AND VALIDATIONS

1. The grantee must only fill out Tier 1 for **New Competing Performance Reports (NCPRs)**.
2. For Non-Competing Continuation Performance Reports (NCCPRs) and Project Period End Reports (PPERs), if the grantee selects *Yes* for Tier 1, then they must complete Tier 2 and Tier 3. This is true for Capacity Building, Women’s/Maternal Health, Perinatal Infant Health, Child Health, Children and Youth with Special Health Care Needs, Adolescent Health, and Life Course forms.
3. The *Comments* text box will accept both text and numerical values (maximum of 5,000 characters).