DGIS USER GUIDE CAPACITY BUILDING FORMS

Version 2.0 – Updated 04/28/2023

HRSA

CONTENTS

CAPACITY BUILDING FORMS

On the **Capacity Building Forms**, the grantee must provide details on programs promoting state's capacity for advancing the health of the MCH population and collecting and analyzing data on the impact of grants on the field. In addition, these forms also collect data on funded initiatives working to promote sustainability, programs supporting the production of scientific publications, the development of informational products, and quality improvement (QI) initiatives.

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: Capacity Building Forms

Capacity Building Forms

Applicable Forms	Report Types		
	NCPR	NCCPR	PPER
CB 1 – Capacity Building	✔	✔	✔
CB 3 – Capacity Building	✔	✔	✔
CB 4 – Capacity Building	✔	✔	✔
CB 5 – Capacity Building	✔	✔	✔
CB 6 – Capacity Building	✔	✔	✔
CB 8 – Capacity Building	✔	✔	✔

CAPACITY BUILDING FORM 1

FORM INSTRUCTIONS

CAPACITY BUILDING FORM 1 DETAIL SHEET

The following information is under the **CB 1 Detail Sheet**. The grantee may expand the accordion menu to view the following details:

1. Capacity Building (CB 1) — State capacity for advancing the health of MCH populations (for national programs).
2. Performance Measure
3. Goal
4. Level
5. Domain
6. Definition
7. Benchmark Data Sources
8. Grantee Data Sources

Figure 2: Capacity Building 1: Detail Sheet

TIER 1 (REQUIRED)

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

1. *Are you promoting and/or facilitating the state's capacity for advancing the health of MCH populations for your grant's priority topic?* 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 before completing this section:

   - Tier 1 is applicable to **New Competing Performance Reports (NCPRs)** only.
   - The grantee may proceed to the next tier only after responding to this question.

Figure 3: Capacity Building 1: Tier 1

TIER 2 (REQUIRED)

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

1. *Through what activities are you promoting and/or facilitating state capacity for advancing the health of MCH populations?*

   Note the following requirements before completing this section:

   - The grantee must select at least one activity from the multiple select checkbox options.
   - 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.
   - The grantee may proceed to the next tier only after responding to this question.

Figure 4: Capacity Building 1: Tier 2

TIER 2

★ Through what activities are you promoting and facilitating state capacity for advancing the health of MCH populations?

☑ Delivery of training on program priority topic
☑ Support state strategic planning activities
☑ Serve as expert and champion on the priority topic
☐ Facilitate state level partnerships to advance priority topics
☐ Maintain consistent state-level staffing support for priority topic (State-level programs only)
☐ Collect data to track changes in prevalence of program priority issues
☐ Utilize available data to track changes in prevalence of program priority issue on national/ regional level
☐ Issue model standards of practice for use in the clinical setting
☐ Conduct participant surveys

TIER 3 (REQUIRED)

In this section, the grantee must respond to the following questions:

1. *Number of professionals trained on program priority topic.*
2. *How frequently are data collected and analyzed to monitor status and refine strategies?*
3. *Number of MOUs between state agencies addressing priority area.*
4. *State agencies/departments participating on priority area. This includes the following key state agencies. Select all that apply.*
5. *Other Key State Agency/Department Description (NOTE: This is required if the grantee selected Other.)*
6. *Have model standards of practice been established to increase integration of MCH priority issue into clinical setting?*
7. *Development or identification of reimbursable services codes to cover delivery of clinical services on MCH priority topic?*
8. *Inclusion of specific language in Medicaid managed care contracts to assure coverage of payment for clinical services on MCH priority topic?*
   NOTE: The grantee may proceed to the next tier only after providing a response to this question.

Figure 5: Capacity Building 1: Tier 3

▼ Tier 3

★ **Number of professionals trained on program priority topic**

> 1

★ **How frequently are data collected and analyzed to monitor status and refine strategies?**

> Less frequently than annually ⌄

★ **Number of MOUs between State agencies addressing priority area**

> 1

State agencies/departments participating on priority area. This includes the following key state agencies
(Select all that apply)

☑ Commissions/ Task Forces
☐ Genetics
☑ Early Hearing and Detection
☑ Oral Health
☑ Medicaid
☐ Housing
☐ Education
☐ Juvenile Justice/ Judicial System
☐ Transportation
☐ Law Enforcement

☐ MCH/ CSHCN
☐ Newborn Screening
☐ EMSC
☐ Developmental Disabilities
☐ Mental and Behavioral Health
☐ Early Intervention/ Head Start
☐ Child Care
☐ Foster Care/ Adoption Agency
☐ Higher Education
☐ Children's Cabinet

☐ Other

'Other' Key State Agency/Department Description
(Required if you selected 'Other')

★ **Have model standards of practice been established to increase integration of MCH priority issue into clinical setting?**

◉ Yes ○ No

★ **Development or identification of reimbursable services codes to cover delivery of clinical services on MCH priority topic?**

◉ Yes ○ No

★ **Inclusion of specific language in Medicaid managed care contracts to assure coverage of payment for clinical services on MCH priority topic?**

◉ Yes ○ No

TIER 4 (OPTIONAL)

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

1. *Outcome 1*: Percent of states/jurisdictions that have a strategic plan on a program priority topic
   a. *Numerator*: Enter an integer from 0–999,999.
   b. *Denominator*: Enter an integer from 0–999,999. The Denominator must be greater than or equal to the Numerator.
   c. *Outcome (%)*: Text box will be automatically populated using the values provided above.
2. *Outcome 2*: Percent of states/jurisdictions receiving training on this program topic.
   a. *Numerator*: Enter an integer from 0–999,999.
   b. *Denominator*: Enter an integer from 0–999,999. The Denominator must be greater than or equal to the Numerator.
   c. *Outcome (%)*: Text box will be automatically populated using the values provided above.
3. *Outcome 3*: Percent of states/jurisdictions that have state FTEs designed for this MCH topic.
   a. *Numerator*: Enter an integer from 0–999,999.
   b. *Denominator*: Enter an integer from 0–999,999. The Denominator must be greater than or equal to the Numerator.
   c. *Outcome (%):* The text box will be automatically populated using the values provided above.
4. *Outcome 4*: Percent of MCH programs have an identified state lead designed on this topic.
   a. *Numerator*: Enter an integer from 0–999,999.
   b. *Denominator*: Enter an integer from 0–999,999. The Denominator must be greater than or equal to the Numerator.
   c. *Outcome (%)*: The text box will be automatically populated using the values provided above.
5. *Outcome 5*: Percent of states/jurisdictions utilizing reimbursable services codes to cover the delivery of clinical services on MCH priority topic.
   a. *Numerator:* Enter an integer from 0–999,999.
   b. *Denominator*: Enter an integer from 0–999,999. The Denominator must be greater than or equal to the Numerator.
   c. *Outcome (%):* The text box will be automatically populated using the values provided above.
6. *Outcome 6:* Percent of states/jurisdictions that report progress on strategic plan goals and objectives
   a. *Numerator:* Enter an integer from 0–999,999.
   b. *Denominator:* Enter an integer from 0–999,999. The Denominator must be greater than or equal to the Numerator.
   c. *Outcome (%):* The text box will be automatically populated using the values provided above.

Figure 6: Capacity Building 1: Tier 4 (Optional)

▼ **Tier 4 (Optional)**

🔖   Please report outcomes where your grant impact these state activities.

What are the related outcomes in the reporting year?

Outcome 1 - Percent of state/ jurisdictions have a strategic plan on program priority topic

Numerator	
Denominator	
Outcome (%)	

Outcome 2 - Percent of states/ jurisdictions receiving training on this program topic

Numerator	
Denominator	
Outcome (%)	

Outcome 3 - Percent of states/ jurisdictions which have state FTEs designated for this MCH topic

Numerator	
Denominator	
Outcome (%)	

Outcome 4 - Percent of MCH programs have an identified state lead designated on this topic

Numerator

Denominator

Outcome (%)

Outcome 5 - Percent of states/ jurisdictions utilizing reimbursable services codes to cover delivery of clinical services on MCH priority topic

Numerator

Denominator

Outcome (%)

Outcome 6 - Percent of states/jurisdictions which report progress on strategic plan goals and objectives

Numerator

Denominator

Outcome (%)

FORM-LEVEL RULES AND VALIDATIONS

1. The grantee must 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).

CAPACITY BUILDING FORM 3

FORM INSTRUCTIONS

CAPACITY BUILDING FORM 3 DETAIL SHEET

The following information is under the **CB 3 Detail Sheet**. The grantee may expand the accordion menu to view the following details:

1. Capacity Building (CB 3) – Impact Measurement
2. Performance Measure
3. Goal
4. Level
5. Domain
6. Definition
7. Grantee Data Sources
8. Significance

Figure 7: Capacity Building 3: Detail Sheet

TIER 1 (REQUIRED)

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

1. *Are you collecting and analyzing data related to impact measurement 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)**, users are only required to fill out Tier 1.
- The grantee may proceed to the next tier only after providing a response to this question.

Figure 8: Capacity Building 3: Tier 1

Tier 1	
★ Are you collecting and analyzing data related to impact measurement in your program?	⦿Yes ◯No
Comments	(If 'No', then please enter explanation here)
	0/5000 characters

TIER 2 (REQUIRED)

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

1. *How are you measuring the impact?* Select all that apply. If the grantee selects *Other*, then a description must be provided.

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

   - The grantee may proceed to the next tier only after providing responses to each required question.
   - 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.
   - Tier 2 is required for **Non-Competing Continuation Performance Reports (NCCPRs)** and **Project Period End Reports (PPERs)**.

Figure 9: Capacity Building 3: Tier 2

Tier 2	
★ How are you measuring impact? *(Select all that apply)*	☑ Collect client level data ☑ Qualitative assessments ☑ Case reports ☑ Other ☑ Conduct participant surveys
'Other' Impact Description *(Required if you selected 'Other')*	test

TIER 3

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

1. *List the tools used*: The grantee must respond in the text box.
2. *Outcomes*: Report the number.
   a. *Number of clients whose client level data was collected*: Enter an integer from 0–999,999.
   b. *Number of case reports*: Enter an integer from 0–999,999.
   c. *Number of participant surveys*: Enter an integer from 0–999,999.
   d. *Number of qualitative assessments*: Enter an integer from 0–999,999.
   e. *Number of 'Other'*: Enter an integer from 0–999,999.

   NOTE: The grantee may proceed to the next tier only after responding to the required questions.

Figure 10: Capacity Building 3: Tier 3

TIER 4 (OPTIONAL)

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

1. *Outcome 1*: Percent of grantees that collect data on the impact of their grants on the field (and method used to collect the data):
   a. *Numerator*: Enter an integer from 0–999,999.
   b. *Denominator*: Enter an integer from 0–999,999. The Denominator must be greater than or equal to the Numerator.
   c. *Outcome* (%): Text box will be automatically populated using the values provided above.
   d. *How this data is collected:* This field will accept both numerical and text values.
2. *Outcome 2*: Percent of grantees that collect data on the impact of their grants on the field (and methods used to analyze data):
   a. *Numerator*: Enter an integer from 0–999,999.
   b. *Denominator*: Enter an integer from 0–999,999. The Denominator must be greater than or equal to the Numerator.
   c. *Outcome* (%): Text box will be automatically populated using the values provided above.
   d. *How this data is collected:* This field will accept both numerical and text values.

Figure 11: Capacity Building 3: Tier 4 (Optional)

▾ Tier 4 (Optional)

Please report outcomes where your grant impact these state activities.

What are the related outcomes in the reporting year?

Outcome 1 - Percent of grantees that collect data on the impact of their grants on the field (and methods used to collect data)

Numerator
(Number of grantees that collect data on the impact of their grants on the field)

Denominator
(Number of grantees)

Outcome (%)

How is data collected

Outcome 2 - Percent of grantees that collect and analyze data on the impact of their grants on the field (and methods used to analyze data)

Numerator
(Number of grantees that analyze data on the impact of their grants on the field)

Denominator
(Number of grantees)

Outcome (%)

How is data analyzed

FORM-LEVEL RULES AND VALIDATIONS

1. The grantee must 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).

CAPACITY BUILDING FORM 4

FORM INSTRUCTIONS

CAPACITY BUILDING FORM 4 DETAIL SHEET

The following information is under the **CB 4 Detail Sheet**. The grantee may expand the accordion menu to view the following details:

1. Capacity Building (CB 4) – Sustainability
2. Performance Measure
3. Goal
4. Level
5. Domain
6. Definition
7. Benchmark Data Sources
8. Grantee Data Sources
9. Significance

Figure 12: Capacity Building 4: Detail Sheet

TIER 1 (REQUIRED)

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

1. *Are you addressing sustainability in your program*? The grantee must select either Yes or No. If the grantee selects No, then 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 only required to fill out Tier 1.
- The grantee may proceed to the next tier only after providing a response to this question.

Figure 13: Capacity Building 4: Tier 1

TIER 2

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

1. *Through what process/mechanisms are you addressing sustainability?* Select all that apply. If the grantee selects Other, then the text box below will become active, and the grantee will be required to justify their selection in the comments field. This is a required field.
2. *Other Processes/Mechanisms Description:* This is required if the grantee selects Other.

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

- The grantee may proceed to the next tier only after providing responses to each required question.
- Tier 2 is required for **Non-Competing Continuation Performance Reports (NCCPRs)** and **Project Period End Reports (PPERs)**.

Figure 14: Capacity Building 4: Tier 2

▼ Tier 2

★ Through what processes/ mechanisms are you addressing sustainability?

(Select all that apply)

☐ A written sustainability plan is in place within two years of the MCHB award with goals, objectives, action steps, and timelines to monitor plan progress.

☐ Staff and leaders in the organization engage and build partnerships with consumers, and other key stakeholders in the community, in the early project planning, and I sustainability planning and implementation processes.

☐ There is support for the MCHB-funded program or initiative within the parent agency or organization, including from individuals with planning and decision making authority.

☐ There is an advisory group or a formal board that includes family, community and state partners, and other stakeholders who can leverage resources or otherwise help to sustain the successful aspects of the program or initiative.

☐ The program's successes and identification of needs are communicated within and outside the organization among partners and the public, using various internal communication, outreach, and marketing strategies.

☐ The grantee identified, actively sought out, and obtained other funding sources and in-kind resources to sustain the entire MCHB-funded program or initiative.

☐ Policies and procedures developed for the successful aspects of the program or initiative are incorporated into the parent or another organization's system of programs and services.

☑ The responsibilities for carrying out key successful aspects of the program or initiative have begun to be transferred to permanent staff positions in other ongoing programs or organizations.

☑ The grantee has secured financial or in-kind support from within the parent organization or external organizations to sustain the successful aspects of the MCHB-funded program or initiative.

☑ Other

'Other' Processes/ Mechanisms Description

(Required if you selected 'Other')

⚠ Provide a description for 'Other'.

FORM-LEVEL RULES AND VALIDATIONS

1. The grantee must 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. 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).

CAPACITY BUILDING FORM 5

FORM INSTRUCTIONS
CAPACITY BUILDING FORM 5 DETAIL SHEET

The following information is under the **CB 5 Detail Sheet**. The grantee may expand the accordion menu to view the following details:

1. Capacity Building (CB 5) – Peer-reviewed Publications
2. Performance Measure
3. Goal
4. Level
5. Domain
6. Definition
7. Benchmark Data Sources
8. Grantee Data Sources
9. Significance

Figure 15: Capacity Building 5: – Detail Sheet

Capacity Building (CB 5)		
▸ DG000		Due In: 130 Days | Status: Complete
▸ Resources ⤢		

Fields with ★ are required.

▾ CB 5 Detail Sheet	
Capacity Building (CB 5) - Peer-reviewed Publications	The percent of programs supporting the production of peer-reviewed publications and through what means, and related outcomes.
Performance Measure	The percent of MCHB funded projects programs supporting the production of peer-reviewed publications.
Goal	To ensure supportive programming for the production of peer-reviewed publications.
Level	Grantee
Domain	Capacity Building
Definition	No further definitions.

Benchmark Data Sources	N/A
Grantee Data Sources	Grantee Self-Reported
Significance	Advancing the field of MCH based on evidence-based, field-tested quality products. Collection of the types of and dissemination of MCH products and … Show more

TIER 1 (REQUIRED)

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

1. *Are you supporting the production of peer-reviewed publications 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 only required to fill out Tier 1.
   - The grantee may proceed to the next tier only after providing a response to this question.

Figure 16: Capacity Building 5: Tier 1

▼ Tier 1	
★ Are you supporting the production of peer-reviewed publications in your program?	◉Yes ○No
Comments	(If 'No', then please enter explanation here) 0/5000 characters

TIER 2 (REQUIRED)

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

1. *Indicate the categories of peer-reviewed publications that have been produced with grant support (either fully or partially) during the reporting period*. Select all that apply.

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

   - The grantee may proceed to the next tier only after providing a response to this question.
   - Tier 2 is required for **Non-Competing Continuation Performance Reports (NCCPRs)** and **Project Period End Reports (PPERs)**.

   NOTE: The grantee may proceed to the next tier only after providing responses to each required question.

Figure 17: Capacity Building 5: Tier 2

▼ Tier 2		
How many are reached through those activities?		
★ Indicate the categories of peer-reviewed publication that have been produced with grant support (either fully or partially) during the reporting period. *(Select all that apply)*	☑ Submitted ☑ Published	☐ In Press

TIER 3 (REQUIRED)

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

1. *Number of Peer-reviewed Publications*: Enter an integer from 0–999,999.

<u>NOTE</u>: The grantee may proceed to the next tier only after providing responses to each required question.

Figure 18: Capacity Building 5: Tier 3

TIER 4 (OPTIONAL)

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

1. *How, if at all, have these publications been disseminated?* Select all that apply.

Figure 19: Capacity Building 5: Tier 4 (Optional)

FORM-LEVEL RULES AND VALIDATIONS

1. The grantee must 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).

CAPACITY BUILDING FORM 6

FORM INSTRUCTIONS

CAPACITY BUILDING FORM 6 DETAIL SHEET

The following information is under the **CB 6 Detail Sheet**. The grantee may expand the accordion menu to view the following details:

1. Capacity Building (CB 6) – Products
2. Performance Measure
3. Goal
4. Level
5. Domain
6. Definition
7. Benchmark Data Sources
8. Grantee Data Sources
9. Significance

Figure 20: Capacity Building 6: Detail Sheet

Capacity Building (CB 6)		
▶ DG000		Due In: 130 Days | Status: In Progress
▶ Resources ↗		

Fields with ★ are required.

▼ CB 6 Detail Sheet

Capacity Building (CB 6) - Products	The percent of programs supporting the development of informational products and through what means, and related outcomes.
Performance Measure	The percent of MCHB funded projects supporting the development of informational products, and through what processes.
Goal	To ensure supportive programming for the development of informational products.
Level	Grantee
Domain	Capacity Building
Definition	No further definitions.
Benchmark Data Sources	N/A
Grantee Data Sources	Grantee Self-Reported
Significance	Advancing the field of MCH based on evidence-based, field-tested quality products. Collection of the types of and dissemination of MCH products and … Show more

TIER 1 (REQUIRED)

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

1. *Are you creating products as part of your MCHB-supported program*? The grantee must select either Yes or No. If the grantee chooses No, they must justify their selection in the *Comments* section.

   Note the following requirements before completing this section:

   - For **New Competing Performance Reports (NCPRs)**, the grantee is only required to fill out Tier 1.
   - The grantee may proceed to the next tier only after providing a response to this question.

Figure 21: Capacity Building 6: Tier 1

TIER 2 (REQUIRED)

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

1. *Indicate the categories of products that have been produced with grant support (either entirely or partially) during the reporting period*. If the grantee selects Other, then the text box below will become active, and the grantee must provide a description in the *Comments* field.
2. *Other Product Category Description:* This is required if the grantee selected Other.

   Note the following requirements before completing this section:

   - The grantee may proceed to the next tier only after responding to the required questions.
   - Tier 2 is required for **Non-Competing Continuation Performance Reports (NCCPRs)** and **Project Period End Reports (PPERs)**.

Figure 22: Capacity Building 6: Tier 2

▼ Tier 2

★ Indicate the categories of products that have been produced with grant support (either fully or partially) during the reporting period
(Select all that apply)

☑ Books
☑ Book chapters
☑ Reports and monographs (including policy briefs, best practice reports, white papers)
☑ Conference presentations and posters presented
☐ Web-based products (website, blogs, webinars, newsletters, distance learning modules, wikis, RSS feeds, social networking sites)
☐ Audio/ Video products (podcasts, produced videos, video clips, CD-ROMs, CDs, or audio)
☐ Press communications (TV/ Radio interviews, newspaper interviews, public service announcements, and editorial articles)
☐ Newsletters (electronic or print)
☐ Pamphlets, brochures, or fact sheets
☐ Academic course development
☐ Distance learning modules
☐ Doctoral dissertations/ Master's theses
☐ Other

'Other' Product Category Description
(Required if you selected 'Other')

TIER 3 (REQUIRED)

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

1. *Number of products created in all categories*: Enter an integer from 0–999,999.

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

   - Count the original completed products, rather than the number of times it was disseminated or presented.
   - The grantee may proceed to the next tier only after responding to the required questions.

Figure 23: Capacity Building 6: Tier 3

▼ Tier 3

★ Number of products created in all categories   5

FORM-LEVEL RULES AND VALIDATIONS

1. The grantee must 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).

CAPACITY BUILDING FORM 8

FORM INSTRUCTIONS

CAPACITY BUILDING FORM 8 DETAIL SHEET

The following information is under the **CB 8 Detail Sheet**. The grantee may expand the accordion menu to view the following details:

1. Capacity Building (CB 8) – Quality Improvement
2. Performance Measure
3. Goal
4. Level
5. Domain
6. Definition
7. Benchmark Data Sources
8. Grantee Data Sources
9. Significance

Figure 24: Capacity Building 8: Detail Sheet

Capacity Building (CB 8)		
▸ DG0000		Due In: 49 Days | Status: Not Started
▸ Resources ⬀		
▾ CB 8 Detail Sheet		
Capacity Building (CB 8) - Quality Improvement	The percent of programs engaging in quality improvement and through what means, and related outcomes.	
Performance Measure	The percent of MCHB funded projects implementing quality improvement initiatives.	
Goal	To measure quality improvement initiatives.	
Level	Grantee	
Domain	Capacity Building	
Definition	No further definitions.	
Benchmark Data Sources	N/A	
Grantee Data Sources	Grantee self-reported.	
Significance	N/A	

TIER 1 (REQUIRED)

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

1. Are you implementing quality improvement (QI) initiatives in your program? The grantee must select either Yes or No. This is a required field, and if the grantee selects No, they must justify their selection in the Comments section.

Note the following requirements before completing this section:

- For **New Competing Performance Reports (NCPRs)**, the grantee is only required to fill out Tier 1.
- The grantee may proceed to the next tier only after providing a response to this question.

Figure 25: Capacity Building 8: Tier 1

TIER 2 (REQUIRED)

In this section, the grantee must select the types of QI structures and aims applicable to their QI initiative.

1. *What type of QI structure do you have?* Select all that apply.
2. *What types of aims are included in your QI Initiative?* Select all that apply.

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

- The grantee may proceed to the next tier only after providing a response to this question.
- Tier 2 is required for **Non-Competing Continuation Performance Reports (NCCPRs)** and **Project Period End Reports (PPERs)**.

NOTE: The grantee may proceed to the next tier only after providing responses to each required question.

Figure 261: Capacity Building 8: Tier 2

TIER 3 (REQUIRED)

In this section, the grantee must provide responses to the following questions:

1. *Are QI goals directly aligned with organization's strategic goals?* The grantee must select either Yes or No.
2. *Has the QI team received training in QI?* The grantee must select either Yes or No.
3. *Do you have metrics to track improvement?* The grantee must select either Yes or No.
4. *Which methodology are you utilizing for quality improvement?*

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

- All the fields are required.
- Select all that apply.
- If the grantee selects *Other*, they must provide the *Other Methodology Description* for it.
- The next tier will be unlocked only after the grantee has answered all the required questions.

Figure 27: Capacity Building 8: Tier 3

TIER 4 (OPTIONAL)

In this section, the grantee must provide responses to the following questions.

1. *Is there data to support improvement in population health as a result of the QI activities?* The grantee may select either Yes or No.
2. *Is there data to support organizational improvement as a result of QI activities?* The grantee may select either Yes or No.
3. *Is there data to support improvement in cross-sectorial collaboration as a result of QI activities?* The grantee may select either Yes or No.

Figure 28: Capacity Building 8: Tier 4

FORM-LEVEL RULES AND VALIDATIONS

1. The grantee must 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).