

DGIS USER GUIDE CORE FORMS

Version 3.0 – Updated 09/29/2023

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CORE FORMS

In the **Core** form, the grantee must provide details on improving health equity. **Core** forms are assigned to all grantees reporting into DGIS.

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: Core Forms

Core Form			
Applicable Forms	Report Types		
	NCPR	NCCPR	PPER
Core 3 – Health Equity	✓	✓	✓

CORE 3 – HEALTH EQUITY

FORM INSTRUCTIONS

CORE 3 DETAIL SHEET

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

1. *Core 3 Health Equity*
2. *Performance Measure*
3. *Goal*
4. *Level*
5. *Domain*
6. *Definition*
7. *Benchmark Data Sources*
8. *Grantee Data Sources*
9. *Significance*

Figure 2: Core 3 – Health Equity: Detail Sheet

Core 3

▶ DG000
Due In: 130 Days | Status: In Progress

▶ Resources

Fields with ★ are required.

▼ **Core 3 Detail Sheet**

Core 3 - Health Equity	The percent of programs promoting and/ or facilitating improving health equity.
Performance Measure	The percent of MCHB funded projects with specific measurable aims related to promoting health equity.
Goal	To ensure MCHB grantees have established specific aims related to improving health equity.
Level	Grantee
Domain	Core
Definition	No further definitions.
Benchmark Data Sources	N/A
Grantee Data Sources	Grantee self-reported.
Significance	Health equity is achieved when every individual has the opportunity to attain his or her full health potential and no one is "disadvantaged from ... Show more

TIER 1

In this section, the grantee must state if they are promoting and/or facilitating health equity by selecting *Yes* or *No*. This is a required field, and if the grantee selects *No*, then they must provide a justification for their selection in the *Comments* section. If the grantee selects *No*, the form is complete.

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.

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

- *The next tier will be unlocked only after the grantee has answered all the required questions.*
- *Health equity is achieved when every individual has the opportunity to attain his or her full health potential and no one is “disadvantaged from achieving this potential because of social position or socially determined consequences.”*
- *Achieving health equity is a top priority in the United States.*
- *Tier 1 is applicable to New Competing Performance Reports (NCPRs) only.*

Figure 3: Core 3 – Health Equity: Tier 1

The screenshot shows a survey interface for Tier 1. At the top, there is a dropdown menu labeled 'Tier 1'. Below it is a question: '★ Are you promoting and/or facilitating health equity in your program?' with two radio button options: 'Yes' (which is selected) and 'No'. Below the question is a 'Comments' field with a placeholder text '(If 'No', then please enter explanation here)'. At the bottom of the comments field, it says '0/5000 characters'.

TIER 2 (REQUIRED)

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

- *Through which activity domains are you promoting and/or facilitating health equity with your program. Select all that apply.*
- *What type(s) of equity topics do your activities target? Select all that apply.*
- *Other Health Equity Topic Description (Required if you selected 'Other').*

NOTE: The next tier will be unlocked after the grantee answers all the required questions.

Figure 4: Core 3 – Health Equity: Tier 2

Tier 2									
<p>★ Through which activity domains are you promoting and/or facilitating health equity with your program: <i>(Select all that apply)</i></p>	<p> <input checked="" type="checkbox"/> Creating and Supporting Collaborations and Partnerships with other health and non-health sectors that influence the well-being of individuals. Collaboration is necessary to address social determinants of health and can include family/community representatives as advisors or leaders. <input checked="" type="checkbox"/> Creating and Supporting a Culture of Equity by increasing organizational diversity and inclusion. <input type="checkbox"/> Creating and Supporting the Infrastructure and Capacity for Equity by improving data capacity, workforce knowledge and cultural competence, and promoting policies and procedures that advance equity. <input type="checkbox"/> Collecting and Using Data on race, ethnicity, etc. to measure and address equity. <input type="checkbox"/> Providing Services to individuals and communities in a manner that promotes equity. </p>								
<p>★ What type(s) of equity topics do your activities target? <i>(Select all that apply)</i></p>	<table border="0"> <tr> <td><input checked="" type="checkbox"/> Race/ ethnicity</td> <td><input type="checkbox"/> Income/ socioeconomic status</td> </tr> <tr> <td><input checked="" type="checkbox"/> Sex/ gender/ sexual orientation/ gender identity</td> <td><input type="checkbox"/> Age</td> </tr> <tr> <td><input type="checkbox"/> Health status/ disability</td> <td><input type="checkbox"/> Geography – rural/urban</td> </tr> <tr> <td><input type="checkbox"/> Language</td> <td><input type="checkbox"/> Other</td> </tr> </table>	<input checked="" type="checkbox"/> Race/ ethnicity	<input type="checkbox"/> Income/ socioeconomic status	<input checked="" type="checkbox"/> Sex/ gender/ sexual orientation/ gender identity	<input type="checkbox"/> Age	<input type="checkbox"/> Health status/ disability	<input type="checkbox"/> Geography – rural/urban	<input type="checkbox"/> Language	<input type="checkbox"/> Other
<input checked="" type="checkbox"/> Race/ ethnicity	<input type="checkbox"/> Income/ socioeconomic status								
<input checked="" type="checkbox"/> Sex/ gender/ sexual orientation/ gender identity	<input type="checkbox"/> Age								
<input type="checkbox"/> Health status/ disability	<input type="checkbox"/> Geography – rural/urban								
<input type="checkbox"/> Language	<input type="checkbox"/> Other								
<p>Other Health Equity Topic Description <i>(Required if you selected 'Other')</i></p>	<div style="border: 1px solid #ccc; height: 20px; width: 100%;"></div>								

TIER 3 (REQUIRED)

In this section, the grantee must indicate if the program has set stated goals/objectives for health equity by selecting *Yes* or *No*. If the grantee selects *Yes*, they must describe their goals/objectives in the *Comments* section.

NOTE: The next tier will be unlocked after the grantee answers all the required questions.

Figure 5: Core 3 – Health Equity: Tier 3

Tier 3	
<p>★ Has your program set stated goal/ objectives for health equity?</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
<p>If yes, what are those goals/ objectives?</p>	<p>⚠ Since you have selected the measure to be applicable, provide an explanation of up to 1,000 characters.</p> <div style="border: 1px solid #ccc; height: 40px; width: 100%;"></div> <p>0/1000 characters</p>

TIER 4 (REQUIRED)

In this section, the grantee must indicate if the program has made progress on stated goals/objectives around health equity by selecting *Yes* or *No*. If the grantee selects *Yes*, they must justify their selection in the *Comments* section.

Figure 6: Core 3 – Health Equity: Tier 4

The screenshot shows a form section titled "Tier 4". It contains two main parts: a question and a text input field. The question is "Has your program made progress on your stated goals/objectives around health equity?" with radio buttons for "Yes" (selected) and "No". Below the question is a text box for the answer, with a note: "Since you have selected the measure to be applicable, provide an explanation of up to 1,000 characters." The text box is currently empty and has a character count of "0/1000 characters" at the bottom.

FORM-LEVEL RULES AND VALIDATIONS

1. For **NCPRs**, the grantee is required to provide a response for Tier 1 only. Regardless of the grantee’s response in Tier 1, all subsequent tiers will be disabled.
2. For **NCCPRs** and **PPERs**, if the grantee selected Yes in Tier 1, then Tiers 2–4 will be enabled, and they will be required to provide responses in Tiers 2–3. If the grantee selected No in Tier 1, then all tiers are disabled.
3. Tier 3: If yes, what are those goals/objectives? (**NOTE**: This field will accept both text values and numerical values. This field will accept a maximum of 1,000 characters.)
4. For **NCCPRs** and **PPERs**, if the grantee selected Yes in Tier 3, then Tier 4 will be enabled and they will be required to provide responses in Tier 4.
5. Tier4: If yes, what progress has been made? (**NOTE**: This field will accept both text values and numerical values. This field will accept a maximum of 1,000 characters.)

The Comments text box will accept both text and numerical values (maximum of 5,000 characters).