

**Prevention Research Centers
PRC Information System
(9020-0650)**

Complete PRC IS screenshots of
current system (August 21, 2006)

Deletions, modification, and additions are
noted throughout, numbered to correspond
with the change justification document
submitted June 1, 2006.

Pages with no changes are also included
and marked as such.



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National Center for Chronic Disease Prevention and Health Promotion

PREVENTION RESEARCH CENTERS

PRC Information System



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Welcome

**State University of New York at Albany
Prevention Research Center**

Select the fiscal year? Select one



No changes

Form Approved OMB NO.: 0920-0650

Expiration Date: 11/30/2007

Public reporting burden of this collection of information is estimated to average 4.25 hours per response (interim report), including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-24, Atlanta, Georgia 30333; ATTN: PRA (0920-0650)

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**Prevention Research Centers
PRC Information System**

**Center Information
Section**

Center Information



National Center for Chronic Disease Prevention and Health Promotion

PREVENTION RESEARCH CENTERS

PRC Information System



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**State University of New York at Albany
Prevention Research Center**

2005-2006

Edit General Information

Office mailing address

Address line 1*

Address line 2

City, * State, * ZIP* Select one

Overnight mailing address

Same as office mailing address?* Yes No

Address line 1

Address line 2

City, State, ZIP Select one

Telephone Ext.

Fax

Website

NCC region Northeast

NCC regional director Ralph Fucillo (Harvard University)

Community description*

Briefly describe the partnering community the center focuses on

① Delete

Mission

Briefly state the center's mission.

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Organizational Chart

To upload a copy of the center's organizational chart, enter the entire path of the organizational chart file or click the 'Browse' button.*

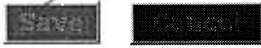
Entire path and file name

Date organizational chart last revised? (mm/dd/yyyy)

Can the organizational chart be shared with other PRCs?

Yes No

(13) Addition
→



(14) Addition

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National Center for Chronic Disease Prevention and Health Promotion

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No changes

State University of New York at Albany Prevention Research Center

2005-2006

5-Year Goals

CENTER INFORMATION

Evaluation Goals [Add Goal](#)

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Collaboration and Partnership Goals [Add Goal](#)

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**State University of New York at Albany
Prevention Research Center**

2005-2006

Add 5-Year Goal

Program Component Evaluation

Goal Statement

Briefly describe one of the center's 5-year goals.*

No changes

Status* Select one



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**State University of New York at Albany
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2005-2006

Add 5-Year Goal

Program Component Collaboration and Partnership

Goal Statement

Briefly describe one of the center's 5-year goals.*

No changes

Status* Select one



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**State University of New York at Albany
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2005-2006

Add 5-Year Goal

Program Component Communication and Dissemination

Goal Statement

Briefly describe one of the center's 5-year goals.*

No changes

Status

Select one



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**State University of New York at Albany
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2005-2006

Add 5-Year Goal

Program Component Infrastructure

Goal Statement

Briefly describe one of the center's 5-year goals. *

No changes

Status* Select one



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Add 5-Year Goal

Program Component Training and Education

Goal Statement

Briefly describe one of the center's 5-year goals. *

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No changes

Status Select one

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2005-2006

Annual Work Plan

Evaluation Objectives

[Add Objective](#)

Collaboration and Partnership Objectives

[Add Objective](#)

Communication and Dissemination Objectives

[Add Objective](#)

Infrastructure Objectives

[Add Objective](#)

Training and Education Objectives

[Add Objective](#)

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No changes

State University of New York at Albany Prevention Research Center

2005-2006

Add Work Plan Objective

CENTER INFORMATION

Relationship to Evaluation Goal

General Information

Select which 5-year goal the objective relates to.

5-Year Goals

Select one

Annual Work Plan

Center Staff

Objective

Community Committees

Briefly state the objective that supports the goal (include a measurable and specific intended outcome).*

National Community Committee (NCC) Representatives

Partners

Health Priorities

Research Agenda

Evaluation Plan

Expected date of completion Select one (yyyy)

Status Select one

Anticipated Challenges

Briefly describe any anticipated challenges and the plans to address them.*



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2005-2006

Add Work Plan Objective

Relationship to Collaboration and Partnership Goal

Select which 5-year goal the objective relates to.*

Select one

Objective

Briefly state the objective that supports the goal (include a measurable and specific intended outcome).*

No changes

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Expected date of completion Select one (yyyy)

Status Select one

Anticipated Challenges

Briefly describe any anticipated challenges and the plans to address them.*



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**State University of New York at Albany
Prevention Research Center**

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Add Work Plan Objective

Relationship to Communication and Dissemination Goal

Select which 5-year goal the objective relates to.

Select one

No changes

Objective

Briefly state the objective that supports the goal (include a measurable and specific intended outcome).*

Expected date of completion: Select one [dropdown] (yyyy)

Status:



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2005-2006

Add Work Plan Objective

Relationship to Infrastructure Goal

Select which 5-year goal the objective relates to.

Select one

No changes

Objective

Briefly state the objective that supports the goal (include a measurable and specific intended outcome).*

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Expected date of completion

Select one

(yyyy)

Status*

Select one

Anticipated Challenges

Briefly describe any anticipated challenges and the plans to address them.*



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2005-2006

Add Work Plan Objective

Relationship to Training and Education Goal

Select which 5-year goal the objective relates to.

Select one

No changes

Objective

Briefly state the objective that supports the goal (include a measurable and specific intended outcome).*

Expected date of completion

Select one

(yyyy)

Status

Select one

Anticipated Challenges

Briefly describe any anticipated challenges and the plans to address them.*

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State University of New York at Albany Prevention Research Center

2005-2006

Add Staff Person

Select from staff

- OR - Enter a new staff person below.

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- Partners
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NO changes

First name

Middle name

Last name

Degrees

Affiliation*

Telephone*

Ext.

Fax

E-mail*

Roles

Which roles does the staff person have at the center level?*

- | | |
|--|---|
| <input type="checkbox"/> Director | <input type="checkbox"/> Communications contact |
| <input type="checkbox"/> Principal investigator | <input type="checkbox"/> Data manager |
| <input type="checkbox"/> Co-principal investigator | <input type="checkbox"/> Evaluation lead |
| <input type="checkbox"/> Co-director | <input type="checkbox"/> Information system contact |
| <input type="checkbox"/> Deputy director | <input type="checkbox"/> Graduate Student |
| <input type="checkbox"/> Investigator | <input type="checkbox"/> Research Coordinator |
| <input type="checkbox"/> Research scientist | <input type="checkbox"/> Other (specify below) |
| <input type="checkbox"/> Administrative support | |

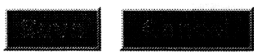
Staff Person Participation

In which of these activities is the staff person most likely to participate?*

- Evaluation
- Collaborations and partnerships

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- Research
- Communication and dissemination
- Infrastructure
- Training and education
- Not applicable



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Add Community Committee

Select from committees

- **OR** - Enter a new community committee below.

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No changes

Committee Name

When was this community committee established?*

Select one

Number of members?*

Committee Composition

Which perspectives do the committee members bring to the center?*

- | | |
|--|--|
| <input type="checkbox"/> Academia | <input type="checkbox"/> Indian Health Service (IHS) |
| <input type="checkbox"/> Advocate of health issue | <input type="checkbox"/> Labor union |
| <input type="checkbox"/> Business sector | <input type="checkbox"/> Managed care |
| <input type="checkbox"/> Community coalition | <input type="checkbox"/> Media |
| <input type="checkbox"/> Community health center or clinic | <input type="checkbox"/> National nonprofit organization |
| <input type="checkbox"/> Community resident | <input type="checkbox"/> Public health practitioner |
| <input type="checkbox"/> Community-based organization | <input type="checkbox"/> Research center |
| <input type="checkbox"/> County or local government agency | <input type="checkbox"/> School or school-based organization |
| <input type="checkbox"/> County or local health department | <input type="checkbox"/> State government agency |
| <input type="checkbox"/> Cultural organization | <input type="checkbox"/> State health department |
| <input type="checkbox"/> Environmental agency | <input type="checkbox"/> State; county or local nonprofit organization |
| <input type="checkbox"/> Faith-based organization | <input type="checkbox"/> Training center |
| <input type="checkbox"/> Federal government agency | <input type="checkbox"/> Tribal government agency |
| <input type="checkbox"/> Foundation | <input type="checkbox"/> Tribal health department |
| <input type="checkbox"/> Healthcare or medical professional organization | <input type="checkbox"/> Youth agency |
| <input type="checkbox"/> Healthcare provider | <input type="checkbox"/> Other (specify below) |
| <input type="checkbox"/> Hospital | |

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Activities

In which center activities is the community committee engaged?

*+

- Identifying national; regional; or local health priorities and health disparities within the partnering community
- Facilitating communication and collaboration between the center and the partnering community or other partners
- Establishing the center research agenda
- Identifying or approving research projects to be implemented in the community
- Developing or implementing the center evaluation activities
- Developing or implementing the center training; technical assistance; and mentoring activities
- Developing or implementing the center communication and dissemination activities
- Conducting advocacy activities
- Providing or obtaining funding
- Other (specify below)

Committee Guidelines

To upload a copy of the committee guidelines, enter the entire path of the guidelines file or click the 'Browse' button. +

Entire path and file name

Date guidelines last revised? (mm/dd/yyyy)

Can the guidelines be shared with other PRCs?

Yes No



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No changes

**State University of New York at Albany
Prevention Research Center**

2005-2006

Add National Community Committee (NCC) Representative

CENTER INFORMATION

First name

Middle name

Last name*

Affiliation*

Telephone Ext.

Fax

E-mail*

Type* Primary Alternate

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2005-2006

Add Partner

Partner type*+ Individual Organization

If organization, enter name

When was this partnership established?*+

Select one (yyyy)

How would the center and partner characterize their relationship?+

Select one

② Delete

Perspectives

Which perspectives does the partner bring to the center?*+

- | | |
|--|--|
| <input type="checkbox"/> Academia | <input type="checkbox"/> Indian Health Service (IHS) |
| <input type="checkbox"/> Advocate of health issue | <input type="checkbox"/> Labor union |
| <input type="checkbox"/> Business sector | <input type="checkbox"/> Managed care |
| <input type="checkbox"/> Community coalition | <input type="checkbox"/> Media |
| <input type="checkbox"/> Community health center or clinic | <input type="checkbox"/> National nonprofit organization |
| <input type="checkbox"/> Community resident | <input type="checkbox"/> Public health practitioner |
| <input type="checkbox"/> Community-based organization | <input type="checkbox"/> Research center |
| <input type="checkbox"/> County or local government agency | <input type="checkbox"/> School or school-based organization |
| <input type="checkbox"/> County or local health department | <input type="checkbox"/> State government agency |
| <input type="checkbox"/> Cultural organization | <input type="checkbox"/> State health department |
| <input type="checkbox"/> Environmental agency | <input type="checkbox"/> State; county or local nonprofit organization |
| <input type="checkbox"/> Faith-based organization | <input type="checkbox"/> Training center |
| <input type="checkbox"/> Federal government agency | <input type="checkbox"/> Tribal government agency |
| <input type="checkbox"/> Foundation | <input type="checkbox"/> Tribal health department |
| <input type="checkbox"/> Healthcare or medical professional organization | <input type="checkbox"/> Youth agency |
| <input type="checkbox"/> Healthcare provider | <input type="checkbox"/> Other (specify below) |
| <input type="checkbox"/> Hospital | |

Activities

In which center activities is the partner engaged?*+

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- Identifying national; regional; or local health priorities and health disparities within the partnering community
- Facilitating communication and collaboration between the center and the partnering community or other partners
- Establishing the center research agenda
- Identifying or approving research projects to be implemented in the community
- Developing or implementing the center evaluation activities
- Developing or implementing the center training; technical assistance; and mentoring activities
- Developing or implementing the center communication and dissemination activities
- Conducting advocacy activities
- Providing or obtaining funding
- Other (specify below)



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Add Health Priority

CENTER INFORMATION

Enter one of the center's health priorities.

General Information

Health priority*+

5-Year Goals

Annual Work Plan

How did the idea for this health priority originate?*

Center Staff

Community Committees

National Community Committee (NCC) Representatives

Partners

~~Health Priorities~~

Research Agenda

Evaluation Plan

Data Sources and Documents

Which data sources and documents were used to support the prioritization of this topic?*

National data sources and documents

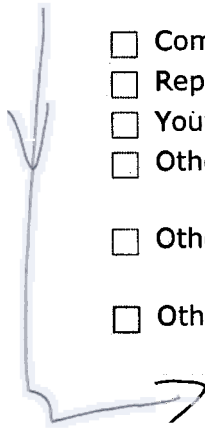
- Behavioral Risk Factor Survey Surveillance (BRFSS)
- Centers for Medicare and Medicaid Services (CMS)
- Guide to Clinical Preventive Services recommendations
- Guide to Community Preventive Services recommendations
- Health Plan Employer Data and Information Sets (HEDIS)
- Healthy People 2010
- National Ambulatory Medical Care Survey
- National Health and Nutrition Examination Survey (NHANES)
- National Health Interview Survey (NHIS)
- National Hospital Discharge Survey (NHDS)
- Peer Review Organization/Quality Improvement Organization
- Pregnancy Risk Assessment Monitoring System (PRAMS)
- Technical report national agency
- U.S. Bureau of Census Data
- Vital Statistics
- Youth Risk Behavior Surveillance System (YRBSS)
- Other published report or review document (specify below)
- Other (specify below)

State, county or local data sources and documents

- Behavioral Risk Factor Survey Surveillance (BRFSS)

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- Community needs or assets assessment conducted by PRC
- Report or data provided by the partnering community
- Youth Risk Behavior Surveillance System (YRBSS)
- Other state report (specify below)

- Other local report (specify below)

- Other (specify below)

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Edit Research Agenda

Overall Research Agenda

Briefly describe the overall center research agenda.*+

Partner Involvement

In which research agenda activities were the partners involved? *+

- Assessing the needs or assets of the partnering community
- Communicating the research agenda to the community or partners
- Identifying or selecting research topics
- Planning the research agenda
- Other (specify below)

Evidence of Partner Input

Where can evidence be found of partner input into the activities listed above? *+

- | | |
|--|--|
| <input type="checkbox"/> Letters of support | <input type="checkbox"/> Retreat summary |
| <input type="checkbox"/> Meeting minutes | <input type="checkbox"/> Other (specify below) |
| <input type="checkbox"/> Memorandum of understanding | |

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Edit Evaluation Plan

Community Committee Involvement

In which center evaluation plan activities is the community committee involved?*

- Collecting data for the evaluation
- Communicating results to the community or partners
- Communicating results in publications or presentations
- Developing or refining the PRC logic model
- Developing the evaluation plan
- Recruiting or engaging other partners in implementing the evaluation
- Recruiting or engaging other partners in planning the evaluation
- Other (specify below)

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Delete

Evidence of Community Committee Input

Where can evidence be found of community committee input into the center evaluation plan?*

- Letters of support
- Meeting minutes
- Memorandum of understanding
- Retreat summary
- Other (specify below)

Evaluation Plan

To upload a copy of the center evaluation plan, enter the entire path of the evaluation plan file or click the 'Browse' button.*

Entire path and file name

Date evaluation plan last revised (mm/dd/yyyy)

Can the evaluation plan be shared with other PRCs?

Yes No

Evaluation Plan Files

Name	Size	Revised	Share	Delete
UAlbany_draft_eval_plan.pdf	155 K	02/28/2004	N	<input type="checkbox"/>

Logic Model

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To upload a copy of the center logic model and narrative, enter the entire path of the file or click the 'Browse' button.*+

Entire path and file name

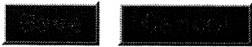
Date logic model last revised (mm/dd/yyyy)

Can the logic model be shared with other PRCs?

Yes No

Logic Model Files

Name	Size	Revised	Share	Delete
our logic model_final.pdf	15 K	05/05/2004	Y	<input type="checkbox"/>



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Left and right menus – How the PRC IS will look with the revised Center Information Section

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- Products
- Trainings
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Log-out

Data Entry fields will go here

Center Information

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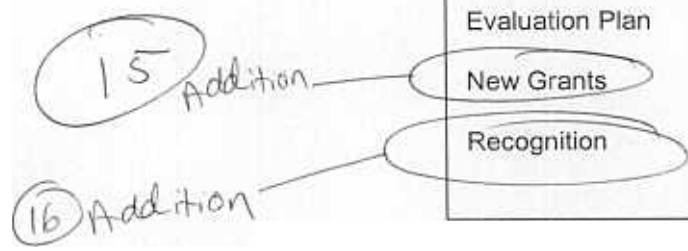
National Community Committee (NCC) Representatives

Partners

Evaluation Plan

New Grants

Recognition



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Project Section

Project



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State University of New York at Albany Prevention Research Center

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Educational Resources Video Project

Edit General Information

Title* Educational Resources Video Project

Principal investigator

Type Other Project

Start date* June 2005

End date November 2005

Is the project a research project?*

Yes No

If yes, indicate the type of research.

- | | |
|--|--|
| <input type="checkbox"/> Determinant | <input type="checkbox"/> Intervention |
| <input type="checkbox"/> Dissemination | <input type="checkbox"/> Other (specify below) |

If yes, indicate level of prevention.

- | | |
|-------------------------------------|--|
| <input type="checkbox"/> Primordial | <input type="checkbox"/> Tertiary |
| <input type="checkbox"/> Primary | <input type="checkbox"/> Other (specify below) |
| <input type="checkbox"/> Secondary | |

Project description

Briefly describe the project.

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No changes

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Add Project Goal

Goal Statement

Briefly describe one of the project goals.*

Expected date of completion* (yyyy)

Status*



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Educational Resources Video Project

Add Work Plan Objective

Relationship to Project Goal

Select which project goal the objective relates to.

Select one

Objective

Briefly state the objective that supports the goal (include a measurable and specific intended outcome).*

Expected date of completion: (yyyy)

Status*:

Anticipated Challenges

Briefly describe any anticipated challenges and the plans to address them.*



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PROJECT

Add Project Contact

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Select from project contacts

- OR - Enter a new project contact below

First name*

Middle name

Last name*

Degrees

Affiliation*

Telephone*

Ext.

Fax

E-mail*

Contact Type

Select one

Roles

Which role does the staff person have at the project level?*

- | | |
|--|--|
| <input type="checkbox"/> Principal investigator | <input type="checkbox"/> Project manager |
| <input type="checkbox"/> Co-principal investigator | <input type="checkbox"/> Research Coordinator |
| <input type="checkbox"/> Investigator | <input type="checkbox"/> Graduate Student |
| <input type="checkbox"/> Project director | <input type="checkbox"/> Other (specify below) |



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Add Funding Source

Source of funding*

Select one

If source above is 'Other', specify below

No changes

Yearly amount

Enter the amount of yearly funding dollars.



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Edit Data Sources & Focus Areas

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Data Sources

Which data sources were used to support the development of the project?

- Guide to Clinical Preventive Services
- Guide to Community Preventive Services
- Healthy People 2010
- Other national data source (specify below)

- Other state data source (specify below)

- Other local data source (specify below)

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Delete

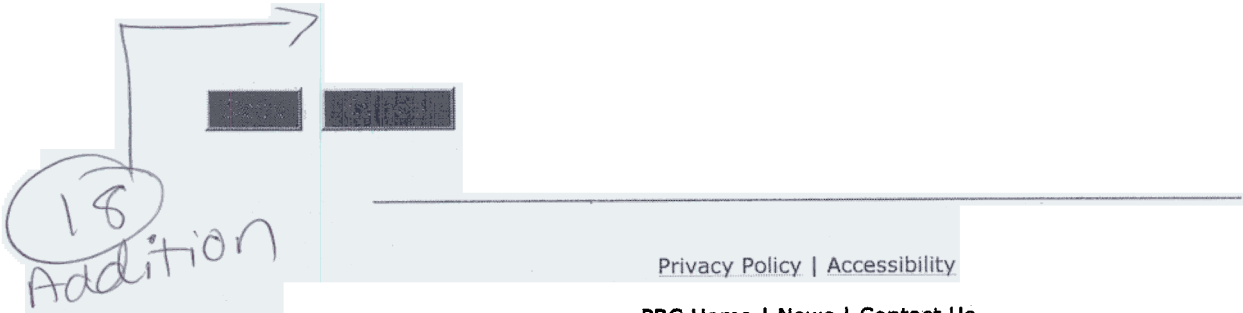
Focus areas

Which focus areas relate to the project (as listed in Healthy People 2010, Guide to Clinical Preventive Services, and Guide to Community Preventive Services)?*

- | | |
|---|---|
| <input type="checkbox"/> Access to quality care | <input type="checkbox"/> Medical product safety |
| <input type="checkbox"/> Arthritis; osteoporosis; chronic back conditions | <input type="checkbox"/> Mental health and mental illness |
| <input type="checkbox"/> Cancer | <input type="checkbox"/> Nutrition and overweight |
| <input type="checkbox"/> Chronic kidney disease | <input type="checkbox"/> Occupational safety and health |
| <input type="checkbox"/> Diabetes | <input type="checkbox"/> Oral Health |
| <input type="checkbox"/> Disability and secondary conditions | <input type="checkbox"/> Physical fitness and activity |
| <input type="checkbox"/> Educational and community-based programs | <input type="checkbox"/> Public health infrastructure |
| <input type="checkbox"/> Environmental health | <input type="checkbox"/> Respiratory diseases |
| <input type="checkbox"/> Family planning | <input type="checkbox"/> Sexually transmitted diseases |
| <input type="checkbox"/> Food safety | <input type="checkbox"/> Social determinants |
| <input type="checkbox"/> Health communication | <input type="checkbox"/> Substance abuse |

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- Heart disease and stroke
- Human Immunodeficiency Virus (HIV)
- Immunization and infectious diseases
- Injury and violence prevention
- Maternal; infant; child health
- Tobacco use
- Vision and hearing
- Other national focus area (specify below)
- Other state focus area (specify below)
- Other local focus area (specify below)



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Edit Population Studied

Which of the following best characterizes the sample population of the project?

Ethnicity*

- | | |
|---|---|
| <input type="checkbox"/> Hispanic or Latino | <input type="checkbox"/> Unknown at this time |
| <input type="checkbox"/> Not Hispanic or Latino | <input type="checkbox"/> No specific focus on ethnicity |

Race* (Check all that apply)

- | | |
|--|--|
| <input type="checkbox"/> African American or Black | <input type="checkbox"/> White |
| <input type="checkbox"/> American Indian or Alaska Native | <input type="checkbox"/> Unknown at this time |
| <input type="checkbox"/> Asian | <input type="checkbox"/> No specific focus on race |
| <input type="checkbox"/> Native Hawaiian or Other Pacific Islander | |

Age group*

- | | |
|-------------------------------------|---|
| <input type="checkbox"/> Infant | <input type="checkbox"/> Older adult |
| <input type="checkbox"/> Child | <input type="checkbox"/> Unknown at this time |
| <input type="checkbox"/> Adolescent | <input type="checkbox"/> No specific focus on age group |
| <input type="checkbox"/> Adult | <input type="checkbox"/> Other (specify below) |

Sex*

- | | |
|---|---|
| <input type="checkbox"/> Men or boys | <input type="checkbox"/> No specific focus on sex |
| <input type="checkbox"/> Women or girls | <input type="checkbox"/> Other (specify below) |
| <input type="checkbox"/> Unknown at this time | |

Setting or site*

- | | |
|---|---|
| <input type="checkbox"/> City | <input type="checkbox"/> Urban area |
| <input type="checkbox"/> County or parish | <input type="checkbox"/> Worksite |
| <input type="checkbox"/> Medical or clinical site | <input type="checkbox"/> Unknown at this time |
| <input type="checkbox"/> Rural Area | <input type="checkbox"/> No specific focus on setting or site |
| <input type="checkbox"/> School | <input type="checkbox"/> Other (specify below) |
| <input type="checkbox"/> Tribal nation | |

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modification

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Study sample size

Underlying population size



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Add Keyword

To search for CDC keywords, enter three or more letters of a word and click 'Search' button.

Search phrase

No changes

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Add Community Committee

Select from committees
Select one

- **OR** - Enter a new community committee below.

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No changes

Committee name

When did the community committee and the center start working together on this project?

Select one (yyyy)

Number of members

Committee Composition

Which perspectives do the committee members bring to the project?

- | | |
|--|--|
| <input type="checkbox"/> Academia | <input type="checkbox"/> Indian Health Service (IHS) |
| <input type="checkbox"/> Advocate of health issue | <input type="checkbox"/> Labor union |
| <input type="checkbox"/> Business sector | <input type="checkbox"/> Managed care |
| <input type="checkbox"/> Community coalition | <input type="checkbox"/> Media |
| <input type="checkbox"/> Community health center or clinic | <input type="checkbox"/> National nonprofit organization |
| <input type="checkbox"/> Community resident | <input type="checkbox"/> Public health practitioner |
| <input type="checkbox"/> Community-based organization | <input type="checkbox"/> Research center |
| <input type="checkbox"/> County or local government agency | <input type="checkbox"/> School or school-based organization |
| <input type="checkbox"/> County or local health department | <input type="checkbox"/> State government agency |
| <input type="checkbox"/> Cultural organization | <input type="checkbox"/> State health department |
| <input type="checkbox"/> Environmental agency | <input type="checkbox"/> State; county or local nonprofit organization |
| <input type="checkbox"/> Faith-based organization | <input type="checkbox"/> Training center |
| <input type="checkbox"/> Federal government agency | <input type="checkbox"/> Tribal government agency |
| <input type="checkbox"/> Foundation | <input type="checkbox"/> Tribal health department |
| <input type="checkbox"/> Healthcare or medical professional organization | <input type="checkbox"/> Youth agency |
| <input type="checkbox"/> Healthcare provider | <input type="checkbox"/> Other (specify below) |
| <input type="checkbox"/> Hospital | |

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Activities

In which project activities is the community committee engaged?

- Conceptualizing the project
- Selecting the project
- Establishing project goals and objectives
- Developing and planning the project
- Conducting or implementing project activities
- Evaluating the project
- Communicating or disseminating project activities and results
- Other (specify below)



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Educational Resources Video Project

Add Partner

Select from partners

- OR - Enter a new partner below.

Partner type* Individual Organization

If organization, enter name

When did the partner and center start working together on the project?

Select one (yyyy)

How would the center and partner characterize their relationship?

Select one

Perspectives

Which perspectives does the partner bring to the project?

- | | |
|--|--|
| <input type="checkbox"/> Academia | <input type="checkbox"/> Indian Health Service (IHS) |
| <input type="checkbox"/> Advocate of health issue | <input type="checkbox"/> Labor union |
| <input type="checkbox"/> Business sector | <input type="checkbox"/> Managed care |
| <input type="checkbox"/> Community coalition | <input type="checkbox"/> Media |
| <input type="checkbox"/> Community health center or clinic | <input type="checkbox"/> National nonprofit organization |
| <input type="checkbox"/> Community resident | <input type="checkbox"/> Public health practitioner |
| <input type="checkbox"/> Community-based organization | <input type="checkbox"/> Research center |
| <input type="checkbox"/> County or local government agency | <input type="checkbox"/> School or school-based organization |
| <input type="checkbox"/> County or local health department | <input type="checkbox"/> State government agency |
| <input type="checkbox"/> Cultural organization | <input type="checkbox"/> State health department |
| <input type="checkbox"/> Environmental agency | <input type="checkbox"/> State; county or local nonprofit organization |
| <input type="checkbox"/> Faith-based organization | <input type="checkbox"/> Training center |
| <input type="checkbox"/> Federal government agency | <input type="checkbox"/> Tribal government agency |
| <input type="checkbox"/> Foundation | <input type="checkbox"/> Tribal health department |

⑦ Delete

PROJECT

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- Healthcare or medical professional organization
- Youth agency
- Healthcare provider
- Other (specify below)
- Hospital

Activities

In which project activities is the partner engaged?

- Conceptualizing the project
- Selecting the project
- Establishing project goals and objectives
- Developing and planning the project
- Conducting or implementing project activities
- Evaluating the project
- Communicating or disseminating project activities and results
- Other (specify below)



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Prevention Research Center**

2005-2006

Educational Resources Video Project

PROJECT

Edit Outcomes & Advances

[General Information](#)

Expected Outcomes in Community, Practice, Policy, and Health

[Project Goals](#)

What are the expected outcomes for the project?

[Annual Work Plan](#)

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8
Delete

Actual Outcomes in Community, Practice, Policy, and Health

Which has been an outcome of the project?*

- | | |
|--|--|
| <input type="checkbox"/> Change in health status or behavior | <input type="checkbox"/> Enhanced community capacity |
| <input type="checkbox"/> Change in physical environment | <input type="checkbox"/> Policy change |
| <input type="checkbox"/> Change in clinical practice | <input type="checkbox"/> Uptake of intervention |
| <input type="checkbox"/> Change in public health practice | <input type="checkbox"/> Not applicable at this time |
| <input type="checkbox"/> Change in sociocultural environment | <input type="checkbox"/> Other (specify below) |

Actual Outcome Description

Briefly describe each outcome checked above. (Include specific community or communities affected, numbers reached or served, and time frame of outcome.)

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Methodological and Theoretical Advances

The project furthered the field of prevention research by developing, testing, or disseminating which of the following?*

- Guidelines
- Measures
- Methods
- Models
- Procedures
- Theories
- Not applicable at this time
- Other (specify below)

8
Cont'd

Methodological and Theoretical Advances Description

Briefly describe each methodological and theoretical advance checked above.



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Educational Resources Video Project

Products

Title	Type	Authors
-------	------	---------

NO changes

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Prevention Research Centers
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Left and right menus – How the PRC IS will look with the revised Projects Section

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Project

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Annual Work Plan

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Products

Intervention Outputs

Intervention Outcomes

20 Addition

21 Addition

Prevention Research Centers PRC Information System

Product Section

Product



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2005-2006

Test Journal Article

Edit General Information

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Title*

Test Journal Article

Authors

Related project*

Evidence-based Public Health Training

Type**

Journal article

Other product type

Peer reviewed*

Yes No

Status*

Select one

Date completed
(published or available)

Select one (yyyy)

Product description*

Enter a brief description (75 words or less) of the product.

9 Delete

10 Delete



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Test Journal Article

Add Primary Contact

Select from contacts

Select one

- OR - Enter a new contact below.

First name

Middle name

Last name*

Degrees

Affiliation*

Telephone*

Ext.

Fax

E-mail*



No changes

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Test Journal Article

Edit Content Focus

Focus

Does the content of the product focus on any particular group?*

Yes No

If yes, please describe (75 words or less) the group.

①
Delete

Intended Audience

For whose use is the product intended?*

- | | |
|--|--|
| <input type="checkbox"/> Academia | <input type="checkbox"/> Private funding agencies |
| <input type="checkbox"/> Community groups or organizations | <input type="checkbox"/> Public health practitioners |
| <input type="checkbox"/> Federal government agencies | <input type="checkbox"/> Public health students |
| <input type="checkbox"/> Federal policy and decision makers | <input type="checkbox"/> Researchers |
| <input type="checkbox"/> General public | <input type="checkbox"/> Schools or teachers |
| <input type="checkbox"/> Healthcare or medical professional organizations | <input type="checkbox"/> Special interest groups |
| <input type="checkbox"/> Healthcare providers | <input type="checkbox"/> State or local educational agencies |
| <input type="checkbox"/> Media | <input type="checkbox"/> State; county or local policy and decision makers |
| <input type="checkbox"/> National policy and decision makers | <input type="checkbox"/> State; county or local public health departments |
| <input type="checkbox"/> National; state; or local nonprofit organizations | <input type="checkbox"/> Study participants |
| <input type="checkbox"/> PRC Network | <input type="checkbox"/> Other (specify below) |

Addition
②



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Edit Languages

In which language is the product available?*

- Arabic
- Chinese
- English
- French
- Korean
- Russian
- Spanish
- Vietnamese
- Other (specify below)

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Add Author

Select from authors

- OR - Enter a new author below.

First name*

Middle name

Last name*

Author order*



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Published title *

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No changes

Journal name* [Search Journals](#)

Publishing location

Publisher name

Publication date* Select one (yyyy) In press

Page numbers*

Volume*

Edition*

Issue number*

If published on the World Wide Web(WWW), enter the following information:

Sponsoring organization

Complete URL

Date website was last updated (mm/dd/yyyy)



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Add Keyword

To search for CDC keywords, enter three or more letters of a word and click 'Search' button.

Search phrase:

2005-2006

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Add Product Sample

To upload a copy of the product, enter the entire path of the product file or click the 'Browse' button.

Entire path and file name*

Date sample revised* (mm/dd/yyyy)

Can this sample be shared with other PRCs?*
 Yes No

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Prevention Research Centers
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Left and right menus – How the PRC IS will look with the revised Products Section

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Prevention Research Centers PRC Information System

**Training
Section**

(NEW)

Training

Prevention Research Centers
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Left and right menus – How the PRC IS will look with the
new Training Section

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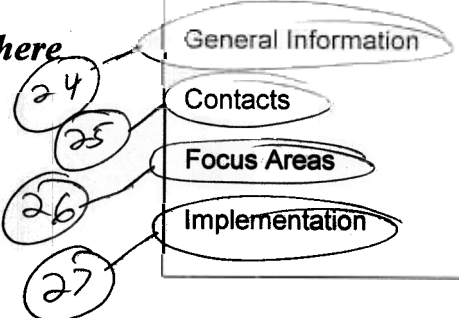
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Training

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- Focus Areas
- Implementation





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2005-2006

REQUIRED REPORTS

Interim Report

Interim Report

Due: May 12

Step	Status
1. <u>Review 2005-2006 Center Goals, Objectives & Activities</u>	Complete
2. <u>Review 2005-2006 Project Goals, Objectives & Activities</u>	Complete
3. <u>Transfer Information to 2006-2007</u>	Incomplete
4. <u>Review 2006-2007 Center Goals, Objectives & Activities</u>	Incomplete
5. <u>Review 2006-2007 Project Goals, Objectives & Activities</u>	Incomplete
6. <u>View, Finalize and Print Report</u>	DRAFT: Past Due

*Report only
No Data Entry*

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