

# BIC Capacity Indicators Questionnaire

## I. Infrastructure: Workforce

2. If YES, how long (in years) has the person been the injury program director?

3. How long (in years) has the person worked in the injury prevention field?

4. What type of training (or academic preparation) does the injury program director have? (Check all that apply).

### Highest Education Attainment:

- Bachelors degree
- Graduate degree (e.g., MPH, MS, MPA, DrPH, PhD); NO graduate-level curriculum related to injury prevention
- Graduate degree (e.g. MPH, MS, MPA, DrPH, PhD); graduate-level curriculum related to injury prevention

### Trainings and/or Certifications:

- No Training
- Specific injury prevention training program/fellowship that is university-affiliated, sponsored by a professional association, and/or sponsored by a federal government agency (e.g., Johns Hopkins Summer Institute, PREVENT violence prevention program, Indian Health Service Program Development or Epidemiology fellowship, University of Michigan Summer Institute)
- Professional development webinars, short trainings, mentoring, etc.
- Other (please explain)

7. What type of training does the epidemiologist/statistician/data professional have? If you have more than one person devoted to this role, please provide the highest level of training attained by any person in this role.

- Graduate degree in epidemiology or biostatistics
- Other graduate degree in a quantitative science, such as engineering, economics, demography, etc.
- Other graduate degree, not-quantitatively related
- Undergraduate degree (please explain)

10. What type of training does the program evaluator have? If you have more than one person devoted to this role, please provide the highest level of training attained by any person in this role.

- Graduate degree that included specific coursework in program evaluation, such as public health program evaluation, education, or policy evaluation
- Other graduate degree
- Undergraduate degree (please explain)

11. Does your VIP program have access to staff support for communications ?

[If YES go to #12. If NO go to #14.]

- Yes, within the VIP program
- Yes, within the state health department
- Yes, by consultant
- Yes, by Injury Control Research Center
- No
- Other (please specify)

12. How many FTEs are devoted to VIP communication as a primary role? Please note that a full time individual can serve multiple roles, but his or her time cannot add up to more than 1.00 FTE. For example, if you already reported that one person is 1.00 FTE equivalent as programs/interventions, you cannot report this same person as one FTE communications.

- 0.0 FTE
- 0.01-0.25 FTE
- 0.26-0.50 FTE
- 0.51-0.75 FTE

- 0.76-0.99 FTE
- 1.0, or equivalent to one FTE
- More than 1.0, or equivalent to more than one FTE

**13. What type of training does the communications staff have? If you have more than one person devoted to this role, please provide the highest level of training attained by any person in this role.**

- Graduate degree that included training in health communication
- Other graduate degree
- Undergraduate degree (please explain)

**14. Does your VIP program have access to staff support for policy work?**

[If YES go to #15 If NO go to #17.]

- Yes, within the VIP program
- Yes, within the state health department
- Yes, by consultant
- Yes, by Injury Control Research Center
- No
- Other (please specify)

**15. How many FTEs are devoted to VIP policy work as a primary role?** Please note that a full time individual can serve multiple roles, but his or her time cannot add up to more than 1.00 FTE. For example, if you already reported that one person is 1.00 FTE equivalent as programs/ interventions, you cannot report this same person as one FTE policy work.

- 0.0 FTE
- 0.01-0.25 FTE
- 0.26-0.50 FTE
- 0.51-0.75 FTE
- 0.76-0.99 FTE
- 1.0, or equivalent to one FTE
- More than 1.0, or equivalent to more than one FTE

**16. What type of training does the policy staff have? If you have more than one person devoted to this role, please provide the highest level of training attained by any person in this role.**

- Graduate degree that included training in health policy, government, political science
- Other graduate degree
- Undergraduate degree (please explain)

**17. Does your VIP program have access to staff support for programs/interventions?**

[If YES go to #18. If NO go to #20.]

- Yes, within the VIP program
- Yes, within the state health department
- Yes, by consultant
- Yes, by Injury Control Research Center
- No
- Other (please specify)

**18. How many FTEs are devoted to VIP programs/interventions as a primary role?** Please note that a full time individual can serve multiple roles, but his or her time cannot add up to more than 1.00 FTE. For example, if you already reported that one person is 1.00 FTE equivalent as communications, you cannot report this same person as one FTE programs/interventions.

- 0.0 FTE
- 0.01-0.25 FTE
- 0.26-0.50 FTE
- 0.51-0.75 FTE
- 0.76-0.99 FTE
- 1.0, or equivalent to one FTE
- More than 1.0, or equivalent to more than one FTE

**19. What type of training does the programs/interventions staff have? If you have more than one person devoted to this role, please provide the highest level of training attained by any person in this role.**

- Graduate degree that included training in public health program implementation/behavioral sciences (Y/N)
- Other graduate degree
- Undergraduate degree (please explain)

**II. Infrastructure: Funding**

**For each funding source, please indicate how long the funding has been available and how far into the future you have a commitment of funding.**

	How long has this funding continuously been available? [# of years]	How far into the future do you have a commitment of funding? [# of years]
State General Revenue <a href="#">XTR</a>	<input type="text"/>	<input type="text"/>
Dedicated State Funding Stream (e.g., fines and fees) <a href="#">XTR</a>	<input type="text"/>	<input type="text"/>
State Highway Safety Office (e.g., Safe Routes to School) <a href="#">XTR</a>	<input type="text"/>	<input type="text"/>
Other State Funding 1 <a href="#">XTR</a>	<input type="text"/>	<input type="text"/>
Other State Funding 2 <a href="#">XTR</a>	<input type="text"/>	<input type="text"/>
Other State Funding 3 <a href="#">XTR</a>	<input type="text"/>	<input type="text"/>
CDC/NCIPC Integrated Core Injury Prevention and Control Program (Core State Injury and Violence Prevention Program Grant Part A) <a href="#">XTR</a>	<input type="text"/>	<input type="text"/>
CDC/NCIPC Traumatic Brain Injury Extended Surveillance Program (Core State Injury and Violence Prevention Program Grant Part B) <a href="#">XTR</a>	<input type="text"/>	<input type="text"/>
CDC/NCIPC Traumatic Brain Injury Emergency Department Surveillance Program (Core State Injury and Violence Prevention Program Grant Part C) <a href="#">XTR</a>	<input type="text"/>	<input type="text"/>
CDC/NCIPC Traumatic Brain Injury Service Linkage Program (Core State Injury and Violence Prevention Program Grant Part D) <a href="#">XTR</a>	<input type="text"/>	<input type="text"/>
CDC/NCIPC Older Adult Falls Program (Core II) <a href="#">XTR</a>	<input type="text"/>	<input type="text"/>
CDC/NCIPC Child Injury Prevention Program (Core II) <a href="#">XTR</a>	<input type="text"/>	<input type="text"/>
CDC/NCIPC Teen Dating Violence Initiative (Core II) <a href="#">XTR</a>	<input type="text"/>	<input type="text"/>
CDC/NCIPC Core VIPP Base Integration Component (BIC) <a href="#">XTR</a>	<input type="text"/>	<input type="text"/>
CDC/NCIPC Core VIPP Regional Network Leader (RNL) <a href="#">XTR</a>	<input type="text"/>	<input type="text"/>
CDC/NCIPC Core VIPP Surveillance Quality Improvement (SQI) <a href="#">XTR</a>	<input type="text"/>	<input type="text"/>
CDC/NCIPC Core VIPP Motor Vehicle Injury Prevention <a href="#">XTR</a>	<input type="text"/>	<input type="text"/>
CDC/NCIPC Core VIPP Falls Among Older Adults <a href="#">XTR</a>	<input type="text"/>	<input type="text"/>
CDC/NCIPC National Violent Death Reporting System (NVDRS) <a href="#">XTR</a>	<input type="text"/>	<input type="text"/>
CDC/NCIPC – Rape Prevention and Education (RPE) <a href="#">XTR</a>	<input type="text"/>	<input type="text"/>
CDC/NCIPC Domestic Violence Prevention Enhancement and Leadership Through Alliances (DELTA) <a href="#">XTR</a>	<input type="text"/>	<input type="text"/>
CDC/NCIPC Residential Fire-related Injury Prevention Program <a href="#">XTR</a>	<input type="text"/>	<input type="text"/>
CDC – Preventive Health and Health Services (PHHS) Block Grant <a href="#">XTR</a>	<input type="text"/>	<input type="text"/>
CDC – Communities Putting Prevention to Work <a href="#">XTR</a>	<input type="text"/>	<input type="text"/>
Consumer Product Safety Commission (CPSC) <a href="#">XTR</a>	<input type="text"/>	<input type="text"/>
Federal Emergency Management Agency (FEMA) <a href="#">XTR</a>	<input type="text"/>	<input type="text"/>
HRSA/MCHB – Title V Block Grant <a href="#">XTR</a>	<input type="text"/>	<input type="text"/>
HRSA/MCHB – Emergency Medical Services for Children (EMSC) <a href="#">XTR</a>	<input type="text"/>	<input type="text"/>
National Highway Traffic Safety Administration (NHTSA) CODES <a href="#">XTR</a>	<input type="text"/>	<input type="text"/>
National Highway Traffic Safety Administration (NHTSA) Other <a href="#">XTR</a>	<input type="text"/>	<input type="text"/>
Substance Abuse and Mental Health Services Administration (SAMHSA) Campus Suicide Prevention Grants <a href="#">XTR</a>	<input type="text"/>	<input type="text"/>
Substance Abuse and Mental Health Services Administration (SAMHSA) State and Tribal Youth Suicide Prevention Grants <a href="#">XTR</a>	<input type="text"/>	<input type="text"/>
U.S. Department of Justice <a href="#">XTR</a>	<input type="text"/>	<input type="text"/>

U.S. Department of Transportation (Federal, not through the state DOT or State Highway Safety Office) XTR

Other Federal Funding 1 XTR

Other Federal Funding 2 XTR

Other Federal Funding 3 XTR

Corporate/Private XTR

Foundation XTR

Nonprofit Organizations (i.e., Safe Kids, Public Health Institutes, etc) XTR

Universities XTR

Other 1 XTR

Other 2 XTR

Other 3 XTR

Other 4 XTR

**21. Please tell me about plans that are currently in place to sustain your VIP program's efforts. Is the diversification of funding sources considered a strategy for sustainability? If so, how?**

## IV. Surveillance: Uses of Core Datasets

**26. Considering all of the datasets we just discussed, in which of the following ways do you use surveillance data? (Check all that apply.)**

	YES	NO
a. To inform policy	<input type="radio"/>	<input type="radio"/>
b. To determine the effectiveness of programs	<input type="radio"/>	<input type="radio"/>
c. To do cost analysis	<input type="radio"/>	<input type="radio"/>
d. To inform decisions about planning injury and violence prevention initiatives	<input type="radio"/>	<input type="radio"/>

**27. Do you have a systematic way of selecting your priorities using surveillance data?**

- YES
- NO

**28. Which of these do you use when setting priorities? [select all that apply]**

- High morbidity rates
- High mortality rates
- Cost of injury
- Disparities across population groups
- Trend analysis
- Other

## V. Surveillance: Dissemination of Surveillance Data

**30. If your program developed data reports or summaries, what types of reports or summaries were produced? (Check all that apply)**

- Fact sheets for the public and/or policy makers

- Frequencies/Descriptive data about injury problems
- Narratives interpreting data
- Narratives outlining case reports about injured individuals
- Publications in peer-reviewed journals
- Presentations at conferences and workshops
- Posters at conferences and workshops
- Cost of injury reports
- Disparities among population groups or regions
- Reports with analytic measures (for example, Odds Ratio, Confidence Intervals, regression analyses)
- Regression/Trend Analysis

**31. Were these reports disseminated?**

- YES [Go to #32.]
- NO [Go to #35.]

**32. To whom were these reports disseminated? (Check all that apply.)**

- ICRCs or other academic centers
- Local public health depts.
- Through peer-reviewed publications
- VIP programs in other states
- ICPG members
- State health dept leadership
- Other stakeholders

**33. For reports distributed...**

	YES	NO
a. Was there any discussion with these partners/stakeholders about the reports?	<input type="radio"/>	<input type="radio"/>
b. Were any next steps/action items identified from the reports?	<input type="radio"/>	<input type="radio"/>

**34. If next steps were identified, please explain.**

**The following next sections are going to ask about your strategies, evaluation activities, and partnerships within each Year 1 BIC Focus Areas for your state.**

**VII. Evaluation: Uses Evaluation Findings**  
**VIII. Evaluation: Disseminates Evaluation Findings**

**36. In the past year, did your program evaluate any strategies in [\\${custom19}](#)?**

- YES [Go to i]
- NO [Go to #45.]

**37. Did any evaluation findings result in policy/programmatic improvements within [\\${custom19}](#)?**

- We reviewed evaluation findings AND made policy/programmatic changes
- We reviewed evaluation findings, BUT DID NOT make policy/programmatic changes
- We DID NOT review evaluation findings for policy/programmatic changes

**40. If YES, What types of evaluation reports or summaries were produced? (Check all that apply)**

- Summary reports including data and narrative information
- Final report to funder
- Brief summary report in a newsletter/regular communication
- Present evaluation findings during webinars/group conference calls
- Publications in peer-reviewed journals
- Presentations at conferences and workshops

- Posters at conferences and workshops
- Other: please specify

**41. Were any evaluation reports or summaries disseminated?**

- YES [Go to #42.]
- NO [Go to #45.]

**42. To whom were these reports distributed?**

- ICRCs or other academic centers
- Local public health depts.
- Through peer-reviewed publications
- VIP programs in other states
- ICPG members
- State health dept leadership
- Other stakeholders
- Webinar/conference call attendants
- Conference attendants

**43. For reports distributed...**

YES [If YES, go to #44.]    NO [If NO, go to #45.]

- |   |                       |                       |
|---|-----------------------|-----------------------|
| a. Was there any discussion with these partners/stakeholders about the reports? | <input type="radio"/> | <input type="radio"/> |
| b. Were any next steps/action items identified from the reports?                | <input type="radio"/> | <input type="radio"/> |

**44. If yes, please explain.**

**IX. Collaboration**

**We are interested to know what other partners may have provided resources – either financial or in-kind -- to assist you in promoting or implementing work in each of your BIC focus areas. Please focus on partners that enable you to do things you would not have been able to do on your own, and/or significantly expanded the reach of your program.**

**Review of [\\${custom1}](#) Annual Progress report shows that you listed the following partners/collaborators for your work in [\\${custom19}](#):**

- [\\${custom26}](#)**
- [\\${custom27}](#)**
- [\\${custom28}](#)**
- [\\${custom29}](#)**
- [\\${custom30}](#)**
- [\\${custom31}](#)**
- [\\${custom32}](#)**
- [\\${custom33}](#)**
- [\\${custom34}](#)**
- [\\${custom35}](#)**
- [\\${custom36}](#)**
- [\\${custom37}](#)**
- [\\${custom38}](#)**
- [\\${custom39}](#)**
- [\\${custom40}](#)**

**45. Please confirm that this list is complete and representative of your collaborations and partnerships for [\\${custom19}](#) in Year 1:**

- YES, this is a complete list. [Go to # 46.]
- NO, this is not a complete list: [Go to i]

i. If this is not a complete list, please enter in the name of the partnerships/collaboration that are not represented in the list above. Also note here if one of the partners listed above should be removed from the list.

Additional Partners:

Partners to be Removed:

Considering your list of partners, please list your top three (3) collaborations and partnerships for your work in **#{custom19}** in Year 1.

Partner #1:

Partner #2:

Partner #3:

46. Still thinking about your top organizations with which you partnered for your **#{custom19}**, tell us what type of assistance partner organizations provided. Please select all that apply.

	Partner #1	Partner #2	Partner #3
Cash support (i.e. leveraging funds)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Staff time for planning or implementing initiative	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Loan of facilities or vehicles or equipment	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Publicity through mailings, listserv	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Safety equipment to give away (e.g., smoke alarms, gun locks)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Access to experts for training staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Access to experts for direct intervention with participants	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Contacts with other partners for fundraising efforts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Contacts with other partners for advocacy efforts	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Printing materials, making supplies, or structures	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Making data available for planning or evaluation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Assisting with data analysis for planning or evaluation	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Assisting with disseminating results	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Provides access to target population	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

47. Considering all the resources (funding and other resources) needed for **#{custom19}**, please select the description from the list below that most accurately describes your work with partners for this focus area: (Choose one)

- The VIP program is the primary program implementer
- The VIP program and its partners are equal collaborators in program implementation
- The partners are the primary program implementers

\_\_\_\_\_