

## **Attachment F – Core VIPP Evaluation**

Public Reporting burden of this collection of information is estimated at 90 minutes per response, including the time for reviewing instructions, research 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 NW, MS D-74, Atlanta, GA 30333; Attn: PRA (0920-0916).

## FFY2013 BIC Capacity Indicator Questionnaire

### I. Infrastructure: Workforce

#### State IVP Program Director

1. In FFY 2013, did the state IVP program have a director?

1. Yes, Full-time (e.g., 40+ hours a week) [Go to #2.]
2. Yes, Part-time (e.g., less than 40 hours a week) [Go to #2.]
3. NO [Go to #6.]

2. Now we would like to ask about the work experience of the state IVP program director. How many years and months has the state IVP program director...

	Year(s)	Month(s)	Enter zero (0) if you are only entering years.
worked in his or her current position?			
worked in the field of injury and violence prevention?			
worked in the field of public health?			

3. What was the highest level of education completed by the state IVP program director? (select one)

1. High School Diploma
2. Associate's Degree
3. Bachelor's degree
4. Graduate
5. Don't Know

4. What injury-specific trainings and/or certifications has the state IVP program director completed? (Check all that apply).

1. No trainings/certifications: The state IVP program director has not completed any injury-specific trainings and/or certifications
2. At least one graduate-level course in injury and/or violence prevention
3. A graduate-level training program in injury and/or violence prevention (e.g., University of Washington Graduate Certificate in Global Injury and Violence Prevention, University of Iowa Occupational Injury Prevention Program, MS/MPH/PhD with a focus on an area of injury prevention, etc.)
4. A university-affiliated training program/fellowship, (e.g., Johns Hopkins Summer Institute, Preventing Violence through Education, Networking, and Technical Assistance (PREVENT) training / University of North Carolina, etc.)
5. Training program/fellowship sponsored by a professional association (e.g., Safe States Alliance "Injury Prevention 101" Self-Study Training, etc.)
6. Training program/fellowship sponsored by a federal government agency (e.g. Indian Health Service Injury Prevention Courses, etc.)
7. The World Health Organization/Education Development Center TEACH IVP E-Learning Curriculum (one or more lessons)
8. Child Passenger Safety Technician
9. EMS professional (e.g., EMT, Paramedic, etc.)
10. Certified Health Education Specialist (CHES)
11. Certified in Public Health (CPH)
12. Registered Nurse (RN)
13. Please explain:

## State IVP Program Staff

5A. In FFY 2013, how many full time equivalents (FTEs) were staffed within the state IVP program

5B. In FFY 2013, how many FTEs were directly supported by CDC/NCIPC Core VIPP Base Integration Component (BIC)?

Please enter the number of FTEs by staff roles.

IMPORTANT NOTE: For an FTE calculator that will help you determine your total number of FTEs, copy/paste the following URL into a new internet browser, [www.safestates.org/associations/5805/files/FTE%20Calculator.xls](http://www.safestates.org/associations/5805/files/FTE%20Calculator.xls). Calculate part-time positions (partial FTEs) using the formula found here. For example, if you have a total of two (2) full-time staff positions at 40 hours/week (equal to 2 FTEs) and one 20 hour/week staff position (equal to one 0.5 FTE), the correct response for your total number of FTEs would be 2.5. Please enter 0.00, if the state IVP program did not have access to a primary role. All cells must have a numerical value.

	5A. FTEs within the state IVP Program	5B. FTEs Support by BIC Funding
Coalition building & coordination staff		
Communications staff		
Data analysis staff (e.g., epidemiologist, statistician, etc.)		
Evaluation staff		
Management staff		
Policy staff		
Program/Intervention staff		
Support and administrative staff		
Technical assistance & training staff		
Other		

6. In FFY 2013, were individuals outside of the state IVP program used to fill staff roles? (Check all that apply)

	Yes, within the state health department	Yes, by consultant	Yes, by Injury Control Research Center (ICRC)	No, did not use
Coalition building & coordination staff				
Communications staff				
Data analysis staff (e.g., epidemiologist, statistician, etc.)				
Evaluation staff				
Management staff				
Policy staff				
Program/Intervention staff				
Support and administrative staff				
Technical assistance & training staff				
Other				

## II. Infrastructure: Funding

In this section you'll be asked about the state IVP program funding sources, both current and past. Please be sure to have your records accessible before you begin this section.

Below is a list of funding sources you provided in the FFY 2011 State of the States Finance and Personnel Report.

Below is a list of funding sources you provided in the FFY 2011 State of the States Finance and Personnel Report.

7A. Please select all the funding sources the state IVP program had in FFY 2013 (October 1, 2011 – September 30, 2013).

1. State General Revenue
2. Dedicated State Funding Stream (e.g., fines and fees)
3. State Highway Safety Office (e.g., Safe Routes to School)
4. Other State Funding 1
5. Other State Funding 2
6. Other State Funding 3
7. CDC/NCIPC Core VIPP Base Integration Component (BIC)
8. CDC/NCIPC Core VIPP Regional Network Leader (RNL)
9. CDC/NCIPC Core VIPP Surveillance Quality Improvement (SQI)
10. CDC/NCIPC Core VIPP Motor Vehicle Injury Prevention
11. CDC/NCIPC Core VIPP Falls Among Older Adults
12. CDC/NCIPC National Violent Death Reporting System (NVDRS)
13. CDC/NCIPC – Rape Prevention and Education (RPE)
14. CDC/NCIPC Domestic Violence Prevention Enhancement and Leadership Through Alliances (DELTA)
15. CDC/NCIPC Residential Fire-related Injury Prevention Program
16. CDC – Preventive Health and Health Services (PHHS) Block Grant
17. CDC – Communities Putting Prevention to Work
18. Consumer Product Safety Commission (CPSC)
19. Federal Emergency Management Agency (FEMA)
20. HRSA/MCHB – Title V Block Grant
21. HRSA/MCHB – Emergency Medical Services for Children (EMSC)
22. National Highway Traffic Safety Administration (NHTSA) CODES
23. National Highway Traffic Safety Administration (NHTSA) Other
24. Substance Abuse and Mental Health Services Administration (SAMHSA) Campus Suicide Prevention Grants
25. Substance Abuse and Mental Health Services Administration (SAMHSA) State and Tribal Youth Suicide Prevention Grants
26. U.S. Department of Justice
27. U.S. Department of Transportation (Federal, not through the state DOT or State Highway Safety Office)
28. Other Federal Funding 1
29. Other Federal Funding 2
30. Other Federal Funding 3
31. Corporate/Private
32. Foundation
33. Nonprofit Organizations (i.e., Safe Kids, Public Health Institutes, etc)
34. Universities
35. Other 1
36. Other 2
37. Other 3

7B. Please specify the name of other funding sources the state IVP program received.

Other State Funding 1	
Other State Funding 2	
Other State Funding 3	
Other Federal Funding 1	
Other Federal Funding 2	
Other Federal Funding 3	
Other 1	
Other 2	
Other 3	

### III. Infrastructure: Health Department Plan

Now we'd like to know if your state health department has a strategic plan that includes IVP goals and objectives and/or topics. A state health department strategic plan includes multiple departments and units within the state health department; this plan also includes multiple health issues that may include chronic diseases, infectious disease, injury, violence, and more. This question is NOT asking you to report on strategic plans solely developed and implemented by the state IVP program.

8. Did your state health department have a strategic plan in FFY 2013?

1. Yes, there was a completed strategic plan
2. Yes, but the plan was in development or was incomplete as of FFY 2013.
3. No, there was not a strategic plan [Go to #11.]
4. Don't Know [Go to #11.]

9. Were injury and/or violence prevention topics specifically included in the state health department strategic plan?

1. Yes, injury and/or violence prevention topics were specifically included in the plan.
2. No, injury and/or violence prevention topics were NOT specifically included in the plan. [Go to #11.]
3. Don't Know [Go to #11.]

10. Please select the option that best describes which specific injury and violence prevention topics were included within the state health department strategic plan.

- |                                       |   |                                  |
|---------------------------------------|---|----------------------------------|
| 1. All Terrain Vehicle (ATV) injury   | 9. Homicide                             | 17. School-based injury          |
| 2. Child abuse/neglect                | 10. Mass trauma/disaster-related        | 18. Sexual assault/rape          |
| 3. Child passenger safety             | 11. Motor vehicle injury                | 19. Spinal cord injury (SCI)     |
| 4. Domestic/intimate partner violence | 12. Motorcycle/motorized scooter injury | 20. Submersion injuries/drowning |
| 5. Elder Abuse                        | 13. Occupational injury                 | 21. Suicide/self-inflicted       |
| 6. Fall injuries                      | 14. Pedestrian injury                   | 22. Suicide attempts             |
| 7. Fire and burns injury              | 15. Poisoning                           | 23. Teen Dating Violence         |
| 8. Firearm injury                     | 16. Rural/agricultural injury           | 24. Traumatic brain injury (TBI) |
|                                       |   | 25. Other                        |

## IV. Surveillance: Access to and Use of Core Datasets

**CAUTION:** Once you click “Continue” to submit your answer(s) the question below, you will NOT be able to change your response. The answer(s) you select for this question will control the response options provided in subsequent questions. Therefore, please take care and be certain when selecting your response(s), as you will NOT be able to change your answer(s) after this point.

This section asks about your program’s access to and use of various datasets.

11. What datasets did the state IVP program have access to in FFY 2013?

- |   |  |
|---|--|
| 1. NONE   | (NISVS)  |
| 2. Addiction and Mental Health Surveys                              | 13. National Occupant Protection Use Survey (NOPUS)                  |
| 3. Behavioral Risk Factor Surveillance System (BRFSS)               | 14. National Violent Death Reporting System (NVDRS)                  |
| 4. Child Death Review (CDR)   | 15. Nationwide Emergency Department Sample (NEDS)                    |
| 5. Emergency Department (ED) data                                   | 16. Pregnancy Risk Assessment Monitoring System (PRAMS)              |
| 6. Emergency Medical Services (EMS) data                            | 17. Prescription Drug Monitoring Program                             |
| 7. Fatality Analysis Reporting System (FARS)                        | 18. Uniform Crime Reporting System (UCR)                             |
| 8. Hospital Discharge Data (HDD)                                    | 19. Vital Records  |
| 9. Medical Examiner   | 20. Web-based Injury Statistics Query and Reporting System (WISQARS) |
| 10. Motor Vehicle Traffic Records                                   | 21. Youth Risk Behavior Surveillance System (YRBSS)                  |
| 11. National Emergency Medical Services Information System (NEMSIS) | 22. Other  |
| 12. National Intimate Partner and Sexual Violence Survey            |  |

12. How did the state IVP program use each of the following datasets? (Check all that apply)

	To identify topic-specific injury and violence issues	To identify a geographic region where an injury or violence issue is occurring	To identify specific population groups that are affected by an injury or violence issue	To identify risk and/or protective factors associated with an injury or violence issue
Addiction and Mental Health Surveys				
Behavioral Risk Factor Surveillance System (BRFSS)				
Child Death Review (CDR)				
Emergency Department (ED) data				
Emergency Medical Services (EMS) data				
Fatality Analysis Reporting System (FARS)				
Hospital Discharge Data (HDD)				
Medical Examiner				
Motor Vehicle Traffic Records				
National Emergency Medical Services Information System (NEMSIS)				
National Intimate Partner and Sexual Violence Survey (NISVS)				
National Occupant Protection Use Survey (NOPUS)				
National Violent Death Reporting System (NVDRS)				
Nationwide Emergency Department Sample (NEDS)				
Pregnancy Risk Assessment Monitoring System (PRAMS)				
Prescription Drug Monitoring Program				
Uniform Crime Reporting System (UCR)				
Vital Records				
Web-based Injury Statistics Query and Reporting System				

(WISQARS)				
Youth Risk Behavior Surveillance System (YRBSS)				

13. How did the state IVP program use surveillance data to address the FFY 2013 BIC focus areas? (Check all that apply)

	#{custom19}	#{custom41}	#{custom63}	#{custom85}	#{custom107}
To inform program or policy development					
To track/monitor program or policy implementation					
To inform evaluations of programs or policies					
To assess costs of injury problems					
To analyze cost implications of interventions (program or policy)					

## V. Surveillance: Dissemination of Surveillance Data

14. Did the state IVP program use surveillance data of any kind to produce any of the following? (Check all that apply).

1. The state IVP program did NOT develop any data reports or summaries. [Go to #17.]
2. Fact sheets about injury generally or specific injury problems for the public and/or policy makers
3. Presentations/posters at conferences and workshops
4. Publications in peer-reviewed journals
5. Publications in print media (e.g., newspapers)
6. Technical reports
7. Other

15. To whom were the reports and/or summaries disseminated? (Check all that apply.)

1. Reports and/or summaries were NOT disseminated [Go to #17.]
2. Federal agencies
3. Injury Community Planning Group (ICPG) members
4. Injury Control Research Centers (ICRCs) or other academic centers
5. IVP programs in other states
6. Local public health departments
7. Non-governmental agencies
8. Other state agencies
9. Other state health department divisions
10. To subscribers of peer-reviewed publications
11. Other stakeholders

16. Were any next steps/action items identified in the reports and/or summaries produced?

1. NO
2. YES

The next sections of the questionnaire will ask about evaluation activities and partnerships within each of the BIC Focus Areas for your state.

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

17. In FFY 2013, what types of evaluations did the state IVP program conduct for any strategy related to \${custom19}?

	The state IVP program completed this evaluation type in FFY 2013.	The state IVP program was in the process of completing this evaluation type in FFY 2013.	An evaluation plan for this type was developed, but evaluation activities were not started in FFY 2013.	The state IVP program did NOT have an evaluation plan for this type in FFY 2013
Outcome evaluation				
Process evaluation				
Formative evaluation				

18. For the outcome evaluations completed or that were in the process of being completed in FFY 2013, did any evaluation findings result in policy/programmatic improvements within \${custom19}?

1. YES, staff reviewed the evaluation findings AND made policy/programmatic changes
2. Staff reviewed evaluation findings, BUT DID NOT make policy/programmatic changes
3. NO, staff DID NOT review evaluation findings or make any policy/programmatic changes

19. For the outcome evaluations completed or are in the process of being completed, what types of methodologies or approaches did the state IVP program use for \${custom19}? (Check all that apply)

1. Surveys/Questionnaires
2. Experimental studies (e.g., RCT)
3. Quasi-experimental studies (e.g., Time Series/Analysis)
4. Interviews
5. Focus Groups
6. Participant Observation
7. Document Reviews
8. Other (please explain)

20. In FFY 2013, what types of evaluation reports and/or summaries were produced? (Check all that apply)

- |   |   |
|---|---|
| <ol style="list-style-type: none"> <li>1. The state IVP program did NOT develop any evaluation reports or summaries [Go to #23.]</li> <li>2. Article in a newsletter and/or regular communication</li> <li>3. Final report to funder</li> <li>4. Internal or informal report</li> <li>5. Presentation during webinar/conference call</li> </ol> | <ol style="list-style-type: none"> <li>6. Posters at conferences and workshops</li> <li>7. Presentations at conferences and workshops</li> <li>8. Publications in peer-reviewed journals</li> <li>9. Summary reports including data and narrative information</li> <li>10. Other: please specify</li> </ol> |
|---|---|

21. To whom were the reports and/or summaries disseminated? (Check all that apply.)

- |   |   |
|---|---|
| <ol style="list-style-type: none"> <li>1. Reports and/or summaries were NOT disseminated [Go to #23.]</li> <li>2. Federal agencies</li> <li>3. Injury Community Planning Group (ICPG) members</li> <li>4. Injury Control Research Centers (ICRCs) or other academic centers</li> <li>5. IVP programs in other states</li> </ol> | <ol style="list-style-type: none"> <li>6. Local public health departments</li> <li>7. Non-governmental agencies</li> <li>8. Other state agencies</li> <li>9. Other state health department divisions</li> <li>10. Through peer-reviewed publications</li> <li>11. Other (Please specify)</li> </ol> |
|---|---|

22. Were any next steps/action items identified from the reports?



1. NO
2. YES

## VIII. Collaboration

Below is a list of partners that were included in your most recent Annual Progress Report (APR) to address \${custom19}.  
 \${custom26}\${custom27}\${custom28}\${custom29}\${custom30}\${custom31}\${custom32}\${custom33}\${custom34}\${custom35}\${  
 {custom36}\${custom37}\${custom38}\${custom39}\${custom40}

23. Please review this list and confirm if the list is complete and representative of your partnerships for this Focus Area in FFY 2013:
1. YES, this is a complete list. [Go to # 24.]
  2. NO, this is not a complete list: [Go to i]
    - i. Please enter in the name of the partners that are not represented in the list above. Also, please note here if one or more of the partners listed above should be removed from the list.

Additional Partners

Partners to be Removed

24. Thinking about all of your partners for \${custom19}, please list up to three (3) that would be considered key or most important partners in FFY 2013.

Partner #1:  
 Partner #2:  
 Partner #3:

25. Still thinking about the key partners identified in the previous question that supported your work in \${custom19}, please tell us what types of assistance your partner organizations provided in FFY 2013. (Check all that apply)

	Partner #1	Partner #2	Partner #3
Provided funding to support state IVP staff for program planning, implementation, and/or evaluation			
Provided funding to support state IVP staff for data collection and/or analysis			
Dedicated staff (in-kind) to assist with program planning/implementation			
Loaned or purchased facilities or meeting space			
Provided safety equipment for dissemination (e.g., smoke alarms, gun locks)			
Provided access to key target population(s)			
Provided contacts with other partners for fundraising efforts			
Conducted programs/interventions for target population(s)			
Provided access to experts to train/support state IVP staff			
Collaborated on policy (e.g., policy development, policy implementation, advocacy, etc.)			
Provided access to a dataset			
Assisted with implementing evaluation activities (plan development, data collection, and/or data analysis)			
Assisted with disseminating evaluation results			
Assisted with communication activities (e.g., dissemination/promotion of activities through mailings/listservs, development of printed materials, etc.)			
Other			

26. Thinking about the time and resources necessary to work in the focus area of \${custom19}, please select the description from the list below that most accurately describes your work with partners for this Focus Area: (Choose one)

1. The state IVP program is the primary program implementer
2. The state IVP program and one or more of its partners are equal collaborators in program implementation
3. One or more partners are the primary program implementers