

## **CE 11-1101 Core Violence and Injury Prevention Program (Core VIPP)**

**Annual Progress Report: BIC Year 4** 

Awardee:	
Award Number:	

**Instructions:** Using the template provided below, verify start and end dates, select progress status, and describe progress during **Year 4** toward objectives and activities submitted in your Year 4 continuation application. You may choose to modify activities for standardized objectives or your state objectives based on the information you provided in your Year 4 Continuation Application and more current information to better reflect Year 4 activities. Indicate any changes made to progress report objectives and activities in the related "Progress Description" field and provide a brief justification for the change(s).

#### **Definitions:**

- Objective = Specific statements about how to achieve a goal
- Measurement = Description of how all activities specific to the objective will be monitored
- Activity = Specific steps/tasks needed to accomplish objectives
- Start date = Date an activity will begin
- End date = Projected completion date for an activity
- Progress status:
  - Not started = Activity is not yet started
  - Redirected = Activity redirected to next funding year
  - Planning = Planning the implementation and evaluation of the activity
  - o Ongoing/Implementation = Activity is ongoing and/or being implemented and evaluated
  - o Complete = Completed implementation and evaluation of the activity
  - n/a = Not applicable
- **Description of Progress** = Brief but sufficient description of the level of progress achieved for the activity during the reporting period must be entered (do not just refer to attachments). Please include activity successes for all activities and barriers to progress for activities "not started" or "redirected."

Public reporting burden of this collection of information is estimated to average 22 hours for the initial population of the tool, and 11 hours for annual reporting for awardees funded for BASE component. The response includes 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 Information Collection Review Office, 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-XXXXX).

## **Base Integration Component (BIC)**

## Goal 1: Enhance injury and violence prevention program infrastructure

Activity (500 character limit)	Start and End Date (mm/dd/yy)	Progress Status	Description of Progress (1000 character limit)		
	<b>Objective 1.4:</b> Annually support at least one workforce development activity for key staff or partners, building capacity in the Core Competencies (for a description of Core Competencies please refer to the FOA, p. 11).				
Measurement:					
Activity 1.4.1:	Start:	Select One			
	End:				
Activity 1.4.2:	Start:	Select One			
	End:				
Activity 1.4.3:	Start:	Select One			
	End:				
Activity 1.4.4:	Start:	Select One			
	End:				
Activity 1.4.5:	Start:	Select One			
	End:				
Activity 1.4.6:	Start:	Select One			
	End:				
Activity 1.4.7:	Start:	Select One			
	End:				
Objective 1.5: Annually use	media and communication	strategies to disseminate inf	ormation related to injury and/or violence prevention.		
Measurement:					
Activity 1.5.1:	Start:	Select One			
	End:				
Activity 1.5.2:	Start:	Select One			
	End:				
Activity 1.5.3:	Start:	Select One			

Activity (500 character limit)	Start and End Date (mm/dd/yy)	Progress Status	Description of Progress (1000 character limit)
	End:		
Activity 1.5.4:	Start:	Select One	
	End:		
Activity 1.5.5:	Start:	Select One	
	End:		
Activity 1.5.6:	Start:	Select One	
	End:		
Activity 1.5.7:	Start:	Select One	
	End:		
<b>Objective 1.6:</b> Annually generate sup (please describe activities related to			pport integrated state violence and injury prevention program activities
Measurement:			
Activity 1.6.1:	Start:	Select One	
	End:		
Activity 1.6.2:	Start:	Select One	
	End:		
Activity 1.6.3:	Start:	Select One	
	End:		
Activity 1.6.4:	Start:	Select One	
	End:		
Activity 1.6.5:	Start:	Select One	
	End:		
Activity 1.6.6:	Start:	Select One	
	End:		
Activity 1.6.7:	Start:	Select One	
	End:		

Activity (500 character limit)	Start and End Date (mm/dd/yy)	Progress Status	Description of Progress (1000 character limit)	
<b>Objective 1.7:</b> Annually support ICPC control.	<b>Objective 1.7:</b> Annually support ICPG by providing funding and resources, and assure access to current information about injury and violence prevention and control.			
Measurement:				
Activity 1.7.1:	Start:	Select One		
	End:			
Activity 1.7.2:	Start:	Select One		
	End:			
Activity 1.7.3:	Start:	Select One		
	End:			
Activity 1.7.4:	Start:	Select One		
	End:			
Activity 1.7.5:	Start:	Select One		
	End:			
Activity 1.7.6:	Start:	Select One		
	End:			
Activity 1.7.7:	Start:	Select One		
	End:			
<b>Objective 1.8:</b> Annually implement s plan related to Focus Area SMART of		out activities agreed upon w	ith partner organizations and the ICPG (please describe components of state	
Measurement:				
Activity 1.8.1:	Start:	Select One		
	End:			
Activity 1.8.2:	Start:	Select One		
	End:			
Activity 1.8.3:	Start:	Select One		
	End:			
Activity 1.8.4:	Start:	Select One		

Activity (500 character limit)	Start and End Date (mm/dd/yy)	Progress Status	Description of Progress (1000 character limit)
	End:		
Activity 1.8.5:	Start:	Select One	
	End:		
Activity 1.8.6:	Start:	Select One	
	End:		
Activity 1.8.7:	Start:	Select One	
	End:		
CDC/Safe States meeting, webinars,			o Core VIPP, including but not limited to, regional networks, annual joint sistance.
Measurement:		I	
Activity 1.9.1:	Start:	Select One	
	End:		
Activity 1.9.2:	Start:	Select One	
	End:		
Activity 1.9.3:	Start:	Select One	
	End:		
Activity 1.9.4:	Start:	Select One	
	End:		
Activity 1.9.5:	Start:	Select One	
	End:		
Activity 1.9.6:	Start:	Select One	
	End:		
Activity 1.9.7:	Start:	Select One	
	End:		
Objective 1.A:			
Measurement:			

Activity (500 character limit)	Start and End Date (mm/dd/yy)	Progress Status	Description of Progress (1000 character limit)
Activity 1.A.1:	Start:	Select One	
	End:		
Activity 1.A.2:	Start:	Select One	
	End:		
Activity 1.A.3:	Start:	Select One	
	End:		
Activity 1.A.4:	Start:	Select One	
	End:		
Activity 1.A.5:	Start:	Select One	
	End:		
Activity 1.A.6:	Start:	Select One	
	End:		
Activity 1.A.7:	Start:	Select One	
	End:		

# Goal 2: Collect and analyze data

Activity (500 character limit)	Start and End Date (mm/dd/yy)	Progress Status	Description of Progress (1000 character limit)
<b>Objective 2.2:</b> Annually collect, analyze and interpret statewide centralized electronic injury data (emergency department data, hospital discharge data, and mortality data) and use to prepare required annual data reports (Annual Injury Data Report, Infant and Early Childhood Injury Special Emphasis Report, TBI Special Emphasis Report).			
Measurement:			
Activity 2.2.1:	Start:	Select One	
	End:		
Activity 2.2.2:	Start:	Select One	
	End:		
Activity 2.2.3:	Start:	Select One	
	End:		

Activity (500 character limit)	Start and End Date (mm/dd/yy)	Progress Status	Description of Progress (1000 character limit)
Activity 2.2.4:	Start:	Select One	
	End:		
Activity 2.2.5:	Start:	Select One	
	End:		
Activity 2.2.6:	Start:	Select One	
	End:		
Activity 2.2.7:	Start:	Select One	
	End:		
Objective 2.4: Annually promote a	and facilitate the use	of injury data to meet the ne	eds of injury prevention control groups and service agencies.
Measurement:		_	
Activity 2.4.1:	Start:	Select One	
	End:		
Activity 2.4.2:	Start:	Select One	
	End:		
Activity 2.4.3:	Start:	Select One	
	End:		
Activity 2.4.4:	Start:	Select One	
	End:		
Activity 2.4.5:	Start:	Select One	
	End:		
Activity 2.4.6:	Start:	Select One	
	End:		
Activity 2.4.7:	Start:	Select One	
	End:		
Objective 2.A:			
Measurement:			

Activity (500 character limit)	Start and End Date (mm/dd/yy)	Progress Status	Description of Progress (1000 character limit)
Activity 2.A.1:	Start:	Select One	
	End:		
Activity 2.A.2:	Start:	Select One	
	End:		
Activity 2.A.3:	Start:	Select One	
	End:		
Activity 2.A.4:	Start:	Select One	
	End:		
Activity 2.A.5:	Start:	Select One	
	End:		
Activity 2.A.6:	Start:	Select One	
	End:		
Activity 2.A.7:	Start:	Select One	
	End:		

Goal 3: Support and evaluate program and policy interventions

Objective 3.5: Annually colle	Objective 3.5: Annually collect and analyze data to evaluate the effectiveness of intervention programs and policy strategies.			
Please use Focus Ar	rea SMART Objectives	section to report progres	s. NOTE: This will be reported in the Year 4 APR.	
Objective 3.6: Annually pro	vide support for the im	plementation of at least	two program interventions and two policy strategies (i.e. technical assistance,	
training/training materials, i	monitoring fidelity, tro	ubleshooting barriers, etc	. <b>).</b>	
Measurement:				
Activity 3.6.1:	Start:	Select One		
	End:			
Activity 3.6.2:	Start:	Select One		
	End:			
Activity 3.6.3:	Start:	Select One		
	End:			

Activity 3.6.4:	Start:	Select One	
	End:		
Activity 3.6.5:	Start:	Select One	
	End:		
Activity 3.6.6:	Start:	Select One	
	End:		
Activity 3.6.7:	Start:	Select One	
	End:		
	evaluation of at lea	st two program intervention	s and two policy strategies (describe activities related to support of your
evaluation plan).			
Measurement:	1		
Activity 3.7.1:	Start:	Select One	
	End:		
Activity 3.7.2:	Start:	Select One	
	End:		
Activity 3.7.3:	Start:	Select One	
	End:		
Activity 3.7.4:	Start:	Select One	
	End:		
Activity 3.7.5:	Start:	Select One	
	End:		
Activity 3.7.6:	Start:	Select One	
	End:		
Activity 3.7.7:	Start:	Select One	
	End:		
Objective 3.A:			
Measurement:			
Activity 3.A.1:	Start:	Select One	

	End:		
Activity 3.A.2:	Start:	Select One	
	End:		
Activity 3.A.3:	Start:	Select One	
	End:		
Activity 3.A.4:	Start:	Select One	
	End:		
Activity 3.A.5:	Start:	Select One	
	End:		
Activity 3.A.6:	Start:	Select One	
	End:		
Activity 3.A.7:	Start:	Select One	
	End:		

# **Goal 4: Inform policy**

Activity (500 character limit)	Start and End Date (mm/dd/yy)	Progress Status	Description of Progress (1000 character limit)			
	<b>Objective 4.5:</b> Annually use communication science to inform policy in the two priority areas identified by the ICPG policy subgroup (including NCIPC, CDC, and other communication science tools).					
Measurement:						
Activity 4.5.1:	Start:	Select One				
	End:					
Activity 4.5.2:	Start:	Select One				
	End:					
Activity 4.5.3:	Start:	Select One				
	End:					
Activity 4.5.4:	Start:	Select One				

Activity (500 character limit)	Start and End Date (mm/dd/yy)	Progress Status	Description of Progress (1000 character limit)
	End:		
Activity 4.5.5:	Start:	Select One	
	End:		
Activity 4.5.6:	Start:	Select One	
	End:		
Activity 4.5.7:	Start:	Select One	
	End:		
policy agenda/plan (refer to F			partners in developing and/or implementing the state injury and violence
Measurement:	T		
Activity 4.6.1:	Start:	Select One	
	End:		
Activity 4.6.2:	Start:	Select One	
	End:		
Activity 4.6.3:	Start:	Select One	
	End:		
Activity 4.6.4:	Start:	Select One	
	End:		
Activity 4.6.5:	Start:	Select One	
	End:		
Activity 4.6.6:	Start:	Select One	
	End:		
Activity 4.6.7:	Start:	Select One	
	End:		
Objective 4.7: Annually enga	ge SHD staff in at least thr	ee activities that affect polic	y (refer to FOA Recipient Activities for specific details).
Measurement:			

Activity (500 character limit)	Start and End Date (mm/dd/yy)	Progress Status	Description of Progress (1000 character limit)
Activity 4.7.1:	Start:	Select One	
	End:		
Activity 4.7.2:	Start:	Select One	
	End:		
Activity 4.7.3:	Start:	Select One	
	End:		
Activity 4.7.4:	Start:	Select One	
	End:		
Activity 4.7.5:	Start:	Select One	
	End:		
Activity 4.7.6:	Start:	Select One	
	End:		
Activity 4.7.7:	Start:	Select One	
	End:		
Objective 4.A:			
Measurement:			
Activity 4.A.1:	Start:	Select One	
	End:		
Activity 4.A.2:	Start:	Select One	
	End:		
Activity 4.A.3:	Start:	Select One	
	End:		
Activity 4.A.4:	Start:	Select One	
	End:		
Activity 4.A.5:	Start:	Select One	
	End:		

Activity (500 character limit)	Start and End Date (mm/dd/yy)	Progress Status	Description of Progress (1000 character limit)
Activity 4.A.6:	Start:	Select One	
	End:		
Activity 4.A.7:	Start:	Select One	
	End:		

## **Goal 5: Program evaluation**

Measurement:

Activity (500 character limit)	Start and End Date (mm/dd/yy)	Progress Status	Description of Progress (1000 character limit)				
Objective 5.2: Annually use	Objective 5.2: Annually use surveillance findings to guide evaluation of the overall Core VIPP or injury prevention and control program.						
Measurement:							
Activity 5.2.1:	Start:	Select One					
	End:						
Activity 5.2.2:	Start:	Select One					
	End:						
Activity 5.2.3:	Start:	Select One					
	End:						
Activity 5.2.4:	Start:	Select One					
	End:						
Activity 5.2.5:	Start:	Select One					
	End:						
Activity 5.2.6:	Start:	Select One					
	End:						
Activity 5.2.7:	Start:	Select One					
	End:						
Objective 5.3: Annually use	e evaluation findings to make	e broad-level programm	natic changes, including a description of how the findings impacted the program.				

Activity (500 character limit)	Start and End Date (mm/dd/yy)	Progress Status	Description of Progress (1000 character limit)
Activity 5.3.1:	Start:	Select One	
	End:		
Activity 5.3.2:	Start:	Select One	
	End:		
Activity 5.3.3:	Start:	Select One	
	End:		
Activity 5.3.4:	Start:	Select One	
	End:		
Activity 5.3.5:	Start:	Select One	
	End:		
Activity 5.3.6:	Start:	Select One	
	End:		
Activity 5.3.7:	Start:	Select One	
	End:		
Objective 5.A:			
Measurement:			
Activity 5.A.1:	Start:	Select One	
	End:		
Activity 5.A.2:	Start:	Select One	
	End:		
Activity 5.A.3:	Start:	Select One	
	End:		
Activity 5.A.4:	Start:	Select One	
	End:		
Activity 5.A.5:	Start:	Select One	
	End:		

Activity (500 character limit)	Start and End Date (mm/dd/yy)	Progress Status	Description of Progress (1000 character limit)
Activity 5.A.6:	Start:	Select One	
	End:		
Activity 5.A.7:	Start:	Select One	
	End:		

### **Focus Area SMART Objectives**

#### Instructions:

Using the template provided below, please indicate the focus areas selected for the funding cycle and describe the SMART objectives and related program and policy strategies for each focus area. Please identify <u>at least one proximal and one distal</u> SMART objective for each focus area and complete the related fields for each SMART objective in the related "Distal SMART Objectives" and "Supporting Proximal SMART Objectives" tables. Please also indicate <u>at least one program or policy strategy</u> for each focus area in the "Strategies" table. **All text fields are limited to 500 characters.** 

#### **Focus Area Definitions:**

- Focus Area = this list includes the 23 possible focus areas and "other." Please select only one.
- Other = if other is selected, please specify the focus area category
- **Description** = brief description of the specific focus area addressed
- New/Revised = if this is a new or revised focus area (compared to Year 1), please check the box

### **SMART Objective Definitions:**

- **SMART:** Focus area objectives should be **S**pecific, **M**easurable, **A**ttainable, **R**easonable, and **T**ime-bound (SMART) and reflect the desired outcome of the focus area strategies supported by the grantee. The suggested format for reporting focus area objectives and an explanation of each of the components are included below:
- Distal objective = directly related to population morbidity, mortality, disparity, and cost
- **Supporting Proximal objective** = grounded in science and logically related to population morbidity, mortality, disparity, and cost. These objectives may include measures of knowledge, attitudes, and behaviors IF supporting evidence exists to indicate a logical relationship to the burden of violence and injury for the defined focus area.
- New/Revised = if this is a new or revised objective (compared to Year 1), please check the box
- Increase or Decrease = indicate whether or not the goal is to increase or decrease the baseline measurement

- **Count/crude rate/percent/cost** = the numeric value of the measure of the burden of violence and injury for the defined focus area. The value reported should be derived from the most current dataset the grantee has access to at the time of reporting. If reporting a rate, please report a crude rate so we can better identify the population impact across the program in the form of a count of actual injuries prevented/lives saved.
  - Select one = indicate if the numeric value is a count, rate, percent, cost, or TBD ("to be determined" by Year 2 reporting)
  - Data Year = indicate the year of data used OR the year range for trend data
  - o **Baseline** = the value of the proximal or distal measure for the focus area SMART objectives available to the grantee at the time of annual reporting for Year 1. When deciding on a baseline measure, please consult the grantee's epidemiologist to determine the most appropriate baseline measure for the data available. When deciding on baseline for focus area strategies that began prior to the current funding cycle, the use of trend data (e.g., rate of increase/decrease over a time period) is recommended over multiple year averages in most cases. Please consider the frequency of data availability during the project period when using trend data.
  - **Goal** = the anticipated value of the measure of the burden of violence and injury for the focus area available to the grantee at the "year the end goal is achieved"
- **Affected Population Count** = The count of the entire subpopulation within the geographic region that is being addressed. *Note: This field may not apply to your proximal objectives.*
- Data source = source of data for the measure indicated
- Sub population = the specific sub-population addressed by the focus area strategies (e.g., children, minorities, youth, older drivers, pedestrians)
- Measure = the measure the burden of violence and injury for the defined focus area

#### Distal:

- o Hospitalization data
- Emergency department data
- Vital statistics data

#### Proximal:

- Knowledge Change : General Awareness
- o Attitude Change: Personal view, opinion, or feeling
- o Behavior Change: Manner of acting
- Geographical Region = the geographic area addressed by the focus area strategies (e.g. statewide, county, city, ZIP code)
- Goal Year End = the anticipated year the objective will be achieved

## **Strategy Definitions:**

- **Strategy Description** = brief description of the related focus area program or policy strategy
- New/Revised = if this is a new or revised strategy (compared to Year 1), please check the box
- Strategy Type= indicate whether the related focus area strategy is focused on policy efforts, program interventions, or both
- **Reach** = indicate the level of impact anticipated for the strategy. The levels include: state, region/district, county/counties, city, ZIP code, organization.
  - Specify = indicate the specific geographic region for the strategy
- **Type of Support** = indicate how the grantee is supporting the strategy. Please select ALL that apply.
- **Progress Status** = not started, redirected, planning, ongoing/implementation, complete, n/a (see page 1 for a description of the categories)

<ul> <li>Progress Description = Brief description of the level of progress achieved for the strategy during the reporting period. Please include and barriers to progress for activities. Fields should reflect progress for all of Year 2. Do not leave blank and include sufficient information.</li> </ul>	•

Focus Area 1:	Select One		Other:					
Description:			New/Revised:	w/Revised:				
	Distal SMART Objectives							
Distal Objecti	ve 1:							
New/Revised	: If revised, provide brie	f explanation:						
Increase or De	Increase or Decrease: Select One  Affected Population Count:							
	Count/Rate/%/Cost	Data Year	Data Source:					
Baseline:	Select One		Subpopulation:					
Year 2:			Measure Type:	Select One	If other, please specify:			
Year 3			Geographic Region:					
Year 4:			Goal count/rate/%/Cost:					
Year 5:			Goal Year End:					
Distal Objecti	ve 2:							
New/Revised	: If revised, provide brief	explanation:						
Increase or De	ecrease: Select One		Affected Population Count:					
	Count/Rate/%/Cost	Data Year	Data Source:					
Baseline:	Select One		Subpopulation:					
Year 2:			Measure Type:	Select One	If other, please specify:			
Year 3			Geographic Region:					
Year 4:			Goal count/rate/%/Cost:					
Year 5:			Goal Year End:					
Distal Objecti	ve 3:							
New/Revised	: If revised, provide brief	explanation:						
Increase or De	ecrease: Select One		Affected Population Count:					
	Count/Rate/%/Cost	Data Year	Data Source:					
Baseline:	Select One		Subpopulation:					
Year 2:			Measure Type:	Select One	If other, please specify:			
Year 3			Geographic Region:					
Year 4:			Goal count/rate/%/Cost:					
Year 5:			Goal Year End:		•			

	Focus Area 1						
	Supporting Proximal SMART Objectives						
Proximal Obje	Proximal Objective 1:						
New/Revised		explanation:					
Increase or De	ecrease: Select One		Affected Population Count:				
	Count/Rate/%/Cost	Data Year	Data Source:				
Baseline:	Select One		Subpopulation:				
Year 2:			Measure Type:	Select One	If other, please specify:		
Year 3			Geographic Region:		·		
Year 4:			Goal count/rate/%/Cost:				
Year 5:			Goal Year End:				
Proximal Obje	ective 2:		•	•			
New/Revised	:  If revised, provide brief e	explanation:					
Increase or De	ecrease: Select One		Affected Population Count:				
	Count/Rate/%/Cost	Data Year	Data Source:				
Baseline:	Select One		Subpopulation:				
Year 2:			Measure Type:	Select One	If other, please specify:		
Year 3			Geographic Region:				
Year 4:			Goal count/rate/%/Cost:				
Year 5:			Goal Year End:				
Proximal Obje	ective 3:						
New/Revised	: If revised, provide brief e	explanation:					
Increase or De	ecrease: Select One		Affected Population Count:				
	Count/Rate/%/Cost	Data Year	Data Source:				
Baseline:	Select One		Subpopulation:				
Year 2:			Measure Type:	Select One	If other, please specify:		
Year 3			Geographic Region:				
Year 4:			Goal count/rate/%/Cost:				
Year 5:			Goal Year End:				
Proximal Obje	Proximal Objective 4:  New/Revised: If revised, provide brief explanation:						
	ecrease: Select One	Apidilation.	Affected Population Count:				
mercase or De	Count/Rate/%/Cost	Data Vear	Data Source:				

Baseline:	Select One		Subpopulation:		
Year 2:			Measure Type:	Select One	If other, please
					specify:
Year 3			Geographic Region:		
Year 4:			Goal count/rate/%/Cost:		
Year 5:			Goal Year End:		
Proximal Obje	ective 5:				
New/Revised:	: If revised, provide br	ef explanation:			
Increase or De	ecrease: Select One		Affected Population Count:		
	Count/Rate/%/Cost	Data Year	Data Source:		
Baseline:	Select One		Subpopulation:		
Year 2:			Measure Type:	Select One	If other, please
					specify:
Year 3			Geographic Region:		
Year 4:			Goal count/rate/%/Cost:		
Year 5:			Goal Year End:		

Focus Area 1 Strategies						
Strategy Description	Strategy Type	Reach	Type of Support	Progress Status	Progress Description	
New/Revised:   If revised, provide brief explanation:	Select One	Select One  Specify:	Funding Technical Assistance Staff Support Data Support Lead Agency Coordinating Agency Other:	Select One		
New/Revised:   If revised, provide brief explanation:	Select One	Select One	Funding Technical Assistance Staff Support Data Support Lead Agency Coordinating Agency Other:	Select One		

			Focus Area 1 Strategies		
Strategy Description	Strategy Type	Reach	Type of Support	Progress Status	Progress Description
		Specify:			
New/Revised:   If revised, provide brief explanation:	Select One	Select One  Specify:	Funding Technical Assistance Staff Support Data Support Lead Agency Coordinating Agency Other:	Select One	
New/Revised:   If revised, provide brief explanation:	Select One	Select One Specify:	Funding Technical Assistance Staff Support Data Support Lead Agency Coordinating Agency Other:	Select One	
New/Revised:   If revised, provide brief explanation:	Select One	Select One  Specify:	Funding Technical Assistance Staff Support Data Support Lead Agency Coordinating Agency Other:	Select One	

Focus Area 1 Strategies								
Strategy Description	Strategy Type	Reach	Type of Support	Progress Status	Progress Description			
New/Revised:   If revised, provide brief explanation:	Select One	Select One  Specify:	Funding Technical Assistance Staff Support Data Support Lead Agency Coordinating Agency Other:	Select One				

Focus Area 2:	Select One			Other:				
Description:		New/Revised:						
			Dis	stal SMART Objectives				
Distal Objecti	ve 1:							
New/Revised	: If revised	d, provide brief	explanation:					
Increase or D	ecrease: Select O	ne		Affected Population Count:				
	Count/Rate	e/%/Cost	Data Year	Data Source:				
Baseline:		Select One		Subpopulation:				
Year 2:				Measure Type:	Select One	If other, please specify:		
Year 3				Geographic Region:				
Year 4:				Goal count/rate/%/Cost:				
Year 5:				Goal Year End:				
Distal Objecti	ve 2:							
New/Revised	: If revised	d, provide brief	explanation:					
Increase or D	ecrease: Select O	ne		Affected Population Count:				
	Count/Rate	e/%/Cost	Data Year	Data Source:				
Baseline:		Select One		Subpopulation:				
Year 2:				Measure Type:	Select One	If other, please specify:		
Year 3				Geographic Region:		56.50		

Year 4:			Goal count/rate/%/Cost:		
Year 5:			Goal Year End:		
Distal Object New/Revised		planation:			
Increase or D	ecrease: Select One		Affected Population Count:		
	Count/Rate/%/Cost	Data Year	Data Source:		
Baseline:	Select One		Subpopulation:		
Year 2:			Measure Type:	Select One	If other, please specify:
Year 3			Geographic Region:		<u>.</u>
Year 4:			Goal count/rate/%/Cost:		
Year 5:			Goal Year End:		•

	Focus Area 2									
			Supporting Proxin	nal SMART Objectives						
Proximal Obje	ective 1:									
New/Revised	If revise	d, provide brief	explanation:							
Increase or De	ecrease: Select C	)ne		Affected Population Count:						
	Count/Rat	te/%/Cost	Data Year	Data Source:						
Baseline:		Select One		Subpopulation:						
Year 2:				Measure Type:	Select One	If other, please				
						specify:				
Year 3				Geographic Region:						
Year 4:				Goal count/rate/%/Cost:						
Year 5:				Goal Year End:						
Proximal Obje	ective 2:									
New/Revised	If revise	d, provide brief	explanation:							
Increase or De	ecrease: Select C	)ne		Affected Population Count:						
	Count/Rat	te/%/Cost	Data Year	Data Source:						
Baseline:		Select One		Subpopulation:						
Year 2:				Measure Type:	Select One	If other, please				
						specify:				
Year 3				Geographic Region:						
Year 4:				Goal count/rate/%/Cost:						
Year 5:				Goal Year End:						

Proximal Obje	ctive 3:				
New/Revised:	If revised, provide brief	explanation:			
Increase or De	crease: Select One		Affected Population Count:		
	Count/Rate/%/Cost	Data Year	Data Source:		
Baseline:	Select One		Subpopulation:		
Year 2:			Measure Type:	Select One	If other, please specify:
Year 3			<b>Geographic Region:</b>		
Year 4:			Goal count/rate/%/Cost:		
Year 5:			Goal Year End:		
Proximal Obje	ctive 4:				
New/Revised:	If revised, provide brief	explanation:			
Increase or De	crease: Select One		Affected Population Count:		
	Count/Rate/%/Cost	Data Year	Data Source:		
Baseline:	Select One		Subpopulation:		
Year 2:			Measure Type:	Select One	If other, please specify:
Year 3			Geographic Region:		
Year 4:			Goal count/rate/%/Cost:		
Year 5:			Goal Year End:		
Proximal Obje	ctive 5:				
New/Revised:	If revised, provide brief	explanation:			
Increase or De	crease: Select One		Affected Population Count:		
	Count/Rate/%/Cost	Data Year	Data Source:		
Baseline:	Select One		Subpopulation:		
Year 2:			Measure Type:	Select One	If other, please specify:
Year 3			<b>Geographic Region:</b>		
Year 4:			Goal count/rate/%/Cost:		
Year 5:			Goal Year End:		

Focus Area 2 Strategies						
Strategy Description	Strategy Type	Reach	Type of Support	Progress Status	Progress Description	

			Focus Area 2 Strategies		
Strategy Description	Strategy Type	Reach	Type of Support	Progress Status	Progress Description
New/Revised:   If revised, provide brief explanation:	Select One	Select One  Specify:	Funding Technical Assistance Staff Support Data Support Lead Agency Coordinating Agency Other:	Select One	
New/Revised:   If revised, provide brief explanation:	Select One	Select One  Specify:	Funding Technical Assistance Staff Support Data Support Lead Agency Coordinating Agency Other:	Select One	
New/Revised:   If revised, provide brief explanation:	Select One	Select One Specify:	Funding Technical Assistance Staff Support Data Support Lead Agency Coordinating Agency Other:	Select One	
New/Revised:   If revised, provide brief explanation:	Select One	Select One	Funding Technical Assistance Staff Support Data Support Lead Agency Coordinating Agency Other:	Select One	

	Focus Area 2 Strategies								
Strategy Description	Strategy Type	Reach	Type of Support	Progress Status	Progress Description				
		Specify:							
New/Revised:   If revised, provide brief explanation:	Select One	Select One  Specify:	Funding Technical Assistance Staff Support Data Support Lead Agency Coordinating Agency Other:	Select One					
New/Revised:   If revised, provide brief explanation:	Select One	Select One  Specify:	Funding Technical Assistance Staff Support Data Support Lead Agency Coordinating Agency Other:	Select One					

Focus Area 3:	Select One	Select One Other:							
<b>Description:</b>				New/Revised:					
	Distal SMART Objectives								
Distal Objecti	ve 1:								
New/Revised	: If revised	, provide brief	explanation:						
Increase or D	ecrease: Select On	ne		<b>Affected Population Count</b>	t:				
	Count/Rate	e/%/Cost	Data Year	Data Source:					
Baseline:		Select One		Subpopulation:					
Year 2:				Measure Type:		Select One	If other, please		

		<del>_</del>		
				specify:
		Geographic Region:		
		Goal count/rate/%/Cost:		
		Goal Year End:		
ve 2:				
: If revised, provide brief	explanation:			
ecrease: Select One		Affected Population Count:		
Count/Rate/%/Cost	Data Year	Data Source:		
Select One		Subpopulation:		
		Measure Type:	Select One	If other, please specify:
		Geographic Region:		, ,
		Goal count/rate/%/Cost:		
		Goal Year End:		•
ve 3:				
: If revised, provide brief	explanation:			
ecrease: Select One		Affected Population Count:		
Count/Rate/%/Cost	Data Year	Data Source:		
Select One		Subpopulation:		
		Measure Type:	Select One	If other, please specify:
		Geographic Region:		<u> </u>
		Goal count/rate/%/Cost:		
		Goal Year End:		
	ve 3:  If revised, provide briefecrease: Select One  Count/Rate/%/Cost	If revised, provide brief explanation:  crease: Select One  Count/Rate/%/Cost  Select One  Select One  If revised, provide brief explanation:  crease: Select One  Count/Rate/%/Cost  Data Year	Goal count/rate/%/Cost:    Goal Year End:	Goal count/rate/%/Cost: Goal Year End:  ve 2: :

	Focus Area 3									
	Supporting Proximal SMART Objectives									
Proximal Obje	ective 1:									
New/Revised	: If revise	d, provide brief	explanation:							
Increase or D	ecrease: Select O	)ne		Affected Population Count:						
	Count/Rat	te/%/Cost	Data Year	Data Source:						
Baseline:		Select One		Subpopulation:						
Year 2:				Measure Type:	Select One	If other, please				
						specify:				
Year 3				Geographic Region:						

Year 4:			Goal count/rate/%/Cost:		
Year 5:			Goal Year End:		
Proximal Obje	ective 2:				
New/Revised	: If revised, provide brief	explanation:			
Increase or Do	ecrease: Select One		Affected Population Count:		
	Count/Rate/%/Cost	Data Year	Data Source:		
Baseline:	Select One		Subpopulation:		
Year 2:			Measure Type:	Select One	If other, please specify:
Year 3			Geographic Region:		<u> </u>
Year 4:			Goal count/rate/%/Cost:		
Year 5:			Goal Year End:		<u>.</u>
Proximal Obje	ective 3:				
New/Revised	: If revised, provide brief	explanation:			
Increase or Do	ecrease: Select One		Affected Population Count:		
	Count/Rate/%/Cost	Data Year	Data Source:		
Baseline:	Select One		Subpopulation:		
Year 2:			Measure Type:	Select One	If other, please specify:
Year 3			<b>Geographic Region:</b>		
Year 4:			Goal count/rate/%/Cost:		
Year 5:			Goal Year End:		
Proximal Obje	ective 4:				
New/Revised	: If revised, provide brief	explanation:			
Increase or De	ecrease: Select One		Affected Population Count:		
	Count/Rate/%/Cost	Data Year	Data Source:		
Baseline:	Select One		Subpopulation:		
Year 2:			Measure Type:	Select One	If other, please specify:
Year 3			Geographic Region:		
Year 4:			Goal count/rate/%/Cost:		
Year 5:			Goal Year End:		
Proximal Obje	ective 5:				
New/Revised	: If revised, provide brief	explanation:			
Increase or De	ecrease: Select One		Affected Population Count:		
	Count/Rate/%/Cost	Data Year	Data Source:		

Baseline:	Sele	ect One	Subpopulation:			
Year 2:			Measure Type:		Select One	If other, please specify:
Year 3			Geographic Region:			
Year 4:			Goal count/rate/%/Co	ost:		
Year 5:			Goal Year End:			

Focus Area 3 Strategies						
Strategy Description	Strategy Type	Reach	Type of Support	Progress Status	Progress Description	
New/Revised:   If revised, provide brief explanation:	Select One	Select One  Specify:	Funding Technical Assistance Staff Support Data Support Lead Agency Coordinating Agency Other:	Select One		
New/Revised:   If revised, provide brief explanation:	Select One	Select One  Specify:	Funding Technical Assistance Staff Support Data Support Lead Agency Coordinating Agency Other:	Select One		
New/Revised:   If revised, provide brief explanation:	Select One	Select One	Funding Technical Assistance Staff Support Data Support Lead Agency Coordinating Agency Other:	Select One		

Focus Area 3 Strategies					
Strategy Description	Strategy Type	Reach	Type of Support	Progress Status	Progress Description
		Specify:			
New/Revised:   If revised, provide brief explanation:	Select One	Select One Specify:	Funding Technical Assistance Staff Support Data Support Lead Agency Coordinating Agency Other:	Select One	
New/Revised:   If revised, provide brief explanation:	Select One	Select One Specify:	Funding Technical Assistance Staff Support Data Support Lead Agency Coordinating Agency Other:	Select One	
New/Revised:   If revised, provide brief explanation:	Select One	Select One  Specify:	Funding Technical Assistance Staff Support Data Support Lead Agency Coordinating Agency Other:	Select One	

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Focus Area 4:	Select One	Other:
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Description :		New/Revised:				
		Distal SN	IART Objectives			
Distal Objection New/Revised		explanation:				
Increase or De	ecrease: Select One		Affected Population Count:			
	Count/Rate/%/Cost	Data Year	Data Source:			
Baseline:	Select One		Subpopulation:			
Year 2:			Measure Type:	Select One	If other, please specify:	
Year 3			Geographic Region:			
Year 4:			Goal count/rate/%/Cost:			
Year 5:			Goal Year End:		·	
Distal Objection New/Revised		explanation:				
Increase or Decrease: Select One Affected Population Count:						
	Count/Rate/%/Cost	Data Year	Data Source:			
Baseline:	Select One		Subpopulation:			
Year 2:			Measure Type:	Select One	If other, please specify:	
Year 3			Geographic Region:			
Year 4:			Goal count/rate/%/Cost:			
Year 5:			Goal Year End:			
Distal Objection New/Revised		explanation:				
Increase or De	ecrease: Select One		Affected Population Count:			
	Count/Rate/%/Cost	Data Year	Data Source:			
Baseline:	Select One		Subpopulation:			
Year 2:			Measure Type:	Select One	If other, please specify:	
Year 3			Geographic Region:			
Year 4:			Goal count/rate/%/Cost:			
Year 5:			Goal Year End:			

Focus Area 4
Supporting Proximal SMART Objectives

Proximal Obje					
New/Revised:		explanation:			
Increase or De	ecrease: Select One		Affected Population Count:		
	Count/Rate/%/Cost	Data Year	Data Source:		
Baseline:	Select One		Subpopulation:		
Year 2:			Measure Type:	Select One	If other, please specify:
Year 3			Geographic Region:		
Year 4:			Goal count/rate/%/Cost:		
Year 5:			Goal Year End:		
Proximal Obje New/Revised:	If revised, provide brief	explanation:			
Increase or De	ecrease: Select One	T	Affected Population Count:		
	Count/Rate/%/Cost	Data Year	Data Source:		
Baseline:	Select One		Subpopulation:		T .
Year 2:			Measure Type:	Select One	If other, please specify:
Year 3			Geographic Region:		
Year 4:			Goal count/rate/%/Cost:		
Year 5:			Goal Year End:		
Proximal Obje		explanation:			
Increase or De	ecrease: Select One		Affected Population Count:		
	Count/Rate/%/Cost	Data Year	Data Source:		
Baseline:	Select One		Subpopulation:		
Year 2:			Measure Type:	Select One	If other, please specify:
Year 3			Geographic Region:		
Year 4:			Goal count/rate/%/Cost:		
Year 5:			Goal Year End:		
Proximal Obje		explanation:			
Increase or De	ecrease: Select One		Affected Population Count:		
	Count/Rate/%/Cost	Data Year	Data Source:		
Baseline:	Select One		Subpopulation:		
Year 2:			Measure Type:	Select One	If other, please

					specify:
Year 3			<b>Geographic Region:</b>		
Year 4:			Goal count/rate/%/Cost:		
Year 5:			Goal Year End:		
Proximal Obj	ective 5:				
New/Revised	: If revised, provide brief	explanation:			
Increase or D	ecrease: Select One		Affected Population Count:		
	Count/Rate/%/Cost Data Year		Data Source:		
Baseline:	Select One		Subpopulation:		
Year 2:			Measure Type:	Select One	If other, please
					specify:
Year 3			Geographic Region:		
Year 4:			Goal count/rate/%/Cost:		
Year 5:			Goal Year End:		•

Focus Area 4 Strategies						
Strategy Description	Strategy Type	Reach	Type of Support	Progress Status	Progress Description	
New/Revised:   If revised, provide brief explanation:	Select One	Select One  Specify:	Funding Technical Assistance Staff Support Data Support Lead Agency Coordinating Agency Other:	Select One		
New/Revised:   If revised, provide brief explanation:	Select One	Select One  Specify:	Funding Technical Assistance Staff Support Data Support Lead Agency Coordinating Agency Other:	Select One		

			Focus Area 4 Strategies		
Strategy Description	Strategy Type	Reach	Type of Support	Progress Status	Progress Description
New/Revised:   If revised, provide brief explanation:	Select One	Select One  Specify:	Funding Technical Assistance Staff Support Data Support Lead Agency Coordinating Agency Other:	Select One	
New/Revised:   If revised, provide brief explanation:	Select One	Select One  Specify:	Funding Technical Assistance Staff Support Data Support Lead Agency Coordinating Agency Other:	Select One	
New/Revised:  If revised, provide brief explanation:	Select One	Select One  Specify:	Funding Technical Assistance Staff Support Data Support Lead Agency Coordinating Agency Other:	Select One	

Focus Area 4 Strategies							
Strategy Description	Strategy	Reach	Type of Support	Progress Status	<b>Progress Description</b>		
	Туре						
New/Revised:   If revised, provide brief explanation:	Select One	Select One  Specify:	Funding Technical Assistance Staff Support Data Support Lead Agency Coordinating Agency Other:	Select One			

Focus Area 5:	Select One			Other:	ner:				
Description:				New/Revised:					
			Dis	stal SMART Objectives					
Distal Objecti	Distal Objective 1:								
New/Revised	New/Revised: If revised, provide brief explanation:								
Increase or D	ecrease: Select O	ne		Affected Population Count:					
	Count/Rat	e/%/Cost	Data Year	Data Source:					
Baseline:		Select One		Subpopulation:					
Year 2:				Measure Type:	Select One	If other, please specify:			
Year 3				Geographic Region:					
Year 4:				Goal count/rate/%/Cost:					
Year 5:				Goal Year End:					
Distal Objective 2:  New/Revised: If revised, provide brief explanation:									
Increase or D	ecrease: Select O	ne		Affected Population Count:					
Count/Rate/%/Cost Data Year		Data Source:							
Baseline:		Select One		Subpopulation:					
Year 2:				Measure Type:	Select One	If other, please			
						specify:			
Year 3				Geographic Region:					

Year 4:			Goal count/rate/%/Cost:		
Year 5:			Goal Year End:		
Distal Object					
New/Revised	<b>I:</b> If revised, provide brief	explanation:			
Increase or D	ecrease: Select One		Affected Population Count:		
	Count/Rate/%/Cost	Data Year	Data Source:		
Baseline:	Select One		Subpopulation:		
Year 2:			Measure Type:	Select One	If other, please specify:
Year 3			Geographic Region:		<u>.</u>
Year 4:			Goal count/rate/%/Cost:		
Year 5:			Goal Year End:		•

Focus Area 5									
	Supporting Proximal SMART Objectives								
Proximal Obje	ective 1:								
New/Revised	If revise	d, provide brief	explanation:						
Increase or De	ecrease: Select C	ne		Affected Population Count:					
	Count/Rat	te/%/Cost	Data Year	Data Source:					
Baseline:		Select One		Subpopulation:					
Year 2:				Measure Type:	Select One	If other, please			
						specify:			
Year 3				Geographic Region:					
Year 4:				Goal count/rate/%/Cost:					
Year 5:				Goal Year End:					
Proximal Obje	ective 2:								
New/Revised	If revise	d, provide brief	explanation:						
Increase or De	e <mark>crease:</mark> Select C	ne		Affected Population Count:					
	Count/Rat	te/%/Cost	Data Year	Data Source:					
Baseline:		Select One		Subpopulation:					
Year 2:				Measure Type:	Select One	If other, please			
						specify:			
Year 3				Geographic Region:					
Year 4:				Goal count/rate/%/Cost:					
Year 5:				Goal Year End:					

Proximal Obje	ective 3:				
New/Revised:	If revised, provide brie	f explanation:			
Increase or Decrease: Select One			Affected Population Count:		
	Count/Rate/%/Cost	Data Year	Data Source:		
Baseline:	Select One		Subpopulation:		
Year 2:			Measure Type:	Select One	If other, please specify:
Year 3			<b>Geographic Region:</b>		
Year 4:			Goal count/rate/%/Cost:		
Year 5:			Goal Year End:		
Proximal Obje	ective 4:				
New/Revised:	If revised, provide brie	f explanation:			
Increase or De	ecrease: Select One		Affected Population Count:		
	Count/Rate/%/Cost	Data Year	Data Source:		
Baseline:	Select One		Subpopulation:		
Year 2:			Measure Type:	Select One	If other, please specify:
Year 3			Geographic Region:		
Year 4:			Goal count/rate/%/Cost:		
Year 5:			Goal Year End:		
Proximal Obje	ective 5:				
New/Revised:	If revised, provide brie	f explanation:			
Increase or De	ecrease: Select One		Affected Population Count:		
	Count/Rate/%/Cost	Data Year	Data Source:		
Baseline:	Select One		Subpopulation:		
Year 2:			Measure Type:	Select One	If other, please specify:
Year 3			<b>Geographic Region:</b>		
Year 4:			Goal count/rate/%/Cost:		
Year 5:			Goal Year End:		

Focus Area 5 Strategies						
Strategy Description	Strategy Type	Reach	Type of Support	Progress Status	Progress Description	

Focus Area 5 Strategies							
Strategy Description	Strategy Type	Reach	Type of Support	Progress Status	Progress Description		
New/Revised:   If revised, provide brief explanation:	Select One	Select One  Specify:	Funding Technical Assistance Staff Support Data Support Lead Agency Coordinating Agency Other:	Select One			
New/Revised:   If revised, provide brief explanation:	Select One	Select One  Specify:	Funding Technical Assistance Staff Support Data Support Lead Agency Coordinating Agency Other:	Select One			
New/Revised:   If revised, provide brief explanation:	Select One	Select One  Specify:	Funding Technical Assistance Staff Support Data Support Lead Agency Coordinating Agency Other:	Select One			
New/Revised:   If revised, provide brief explanation:	Select One	Select One	Funding Technical Assistance Staff Support Data Support Lead Agency Coordinating Agency Other:	Select One			

Focus Area 5 Strategies							
Strategy Description	Strategy Type	Reach	Type of Support	Progress Status	Progress Description		
		Specify:					
New/Revised:   If revised, provide brief explanation:	Select One	Select One  Specify:	Funding Technical Assistance Staff Support Data Support Lead Agency Coordinating Agency Other:	Select One			
New/Revised:   If revised, provide brief explanation:	Select One	Select One  Specify:	Funding Technical Assistance Staff Support Data Support Lead Agency Coordinating Agency Other:	Select One			