

Form Approve

OMB No:0920-1369

Exp. Date: xx-xx-xxxx

Public Reporting burden of this collection of information is estimated at 11 hours, 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 NW, MS D-74, Atlanta, GA 30333; Attn: PRA (0920-xxxx).

Partner's Portal Screenshots

Core State Injury Prevention Program – CE21-2101

Task Details

Partner's Portal

Select Grantee

NOFO Admin

Program Tasks

Task Details

View Report

All Sections

Year 3 Annual Progress Report

Technical Review Only

Year 3 Annual Progress Report

Questions & Support

For content-related questions and assistance contact your Project Officer.

Related Information

Injury Prevention & Control

Form Approved

OMB NO: 0920-1369
Exp. Date: 07/31/2025

OMB NO: 0920-1369
Exp. Date: 09/30/2025

Public reporting burden of this collection of information is estimated at 12 hours per response, 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/Information Collection Review Office, 1600 Clifton Road, NE, MS D-74, Atlanta, GA 30333; Attn: PRA (0920-1369).

Task Details

Oldahoma

ProgramCore SIPP

TaskYear 3 Annual Progress Report

Description

The APR is divided by sections. One person can check-out and edit a section at a time. The maximum section check-out time for editing is 4 hours. After 4 hours someone else can check-out the section for editing.

Submit your APR to CDC once it is complete. If you need to make updates before the deadline, you can submit again.

Each time you submit, an email notification will be sent to your CDC State Support team as well as Core SIPP team members in your state who have access to the Partner's Portal.

Check the Core SIPP SharePoint site for training videos and an updated user manual. For any questions or access issues, please email partnersportal@cdc.gov.

Due Date3/31/2024 - 0 days remaining

Cross-cutting Indicators

Description	Edit Status	Last Check-out	Ready
Manage Cross-Cutting Indicators	Available		

Year 3 Annual Progress Report

Core SIPP Base

Section Description	Edit Status	Last Check-out	Ready
1 Engage in Robust Data/Surveillance for Public Health Action			
+ Add Activity			
Rubric	Available		
2 Strengthen Strategic Collaborations and Partnerships for Public Health Action			
+ Add Activity			
Rubric	Available		
3 Conduct Assessment and Evaluation for Public Health Action			
+ Add Activity			
Rubric	Available		
4 Technical Assistance Needs and Barriers/Challenges			
5 Success Stories			
+ Add Success Story			
6 File Uploads			

Fields on page 2-7 will be completed for all 3 primary strategies and the Enhanced component strategy (Activity Overview, Indicators, Sub-Activities):

- Engage in Robust Data/Surveillance
- Strengthen Strategic Collaboration
- Conduct Assessment and Evaluation

- Implementation and Enhanced Evaluation (Enhanced component only)

Activity Overview (Base and Enhanced component)

Strategy: Engage in Robust Data/Surveillance for Public Health Action

[← Back to Task Details](#)

i The Activity should be an overarching strategy/approach to preventing injury that is addressed across multiple years or the entire 5-year project period.

* = required field

Activity Title *

(500 character max)


Topic Area(s)

i Please select the topic area(s) that apply for this question. If you select "Optional Flex Topic" please write-in the appropriate topic area. "General Injury/Not Topic Area Specific" should be used for activities that are not topic specific, but address injury broadly.

- ☐ ACES
- ☐ Transportation Safety
- ☐ TBI
- ☐ General Injury/Not Topic Area Specific
- ☐ Optional Flex Topic (write-in option)


Description

(10000 character max)



html

Alignment with Logic Model Activities

 Please select the element(s) from the logic model that aligns with this activity.


- ☐ Identify data sources for surveillance of emerging injury topics of interest and disproportionately-affected population
- ☐ Analyze data and produce surveillance products for topics of interest and disproportionately-affected populations
- ☐ Translate and disseminate products to community stakeholders and other partners to drive public health action
- ☐ Participate in a national learning community for robust injury and data and surveillance methods

Status

Select One...



Does this activity support additional strategies?

 For example, development of a behavioral health survey may support data and evaluation. Check as many supporting strategies as apply.

- ☒ Engage in Robust Data/Surveillance for Public Health Action
- ☐ Strengthen Strategic Collaborations and Partnerships for Public Health Action
- ☐ Conduct Assessment and Evaluation for Public Health Action

Save

Save & Close

Cancel

Indicators (Base and Enhanced component)


Is this indicator a qualitative or quantitative indicator? *

☒ Qualitative ☐ Quantitative

Are you still tracking this indicator? *

☒ Yes ☐ No

Indicator Name *


 Please ensure indicators are written in the SMART format.

(200 character max)

Description

(2000 character max)

Population(s) of Interest

 Population of Interest should reflect the group among which the expected change is happening, including if this is your program.

(1000 character max)

Type of Indicator

Select One...



Data Source

(500 character max)

Baseline

Select One...▼

Year 1

Select One...▼

Year 2

Select One...▼

Year 3

Select One...▼

Year 4

Select One...▼

Year 5

Select One...▼

Notes

(5000 character max)

Save

Save & Close

Cancel

Sub-Activities (Base and Enhanced component)

Sub-Activity Name ☆

(500 character max)

Description

(10000 character max)

(5000 character max)

1 If you anticipate this sub-activity will occur during all program years, please select 'Annual.'

- ☐ Year 1
- ☐ Year 2
- ☐ Year 3
- ☐ Year 4
- ☐ Year 5
- ☐ Annual

Select One...

(500 character max)

Save

Save & Close

Cancel

Success Stories (Base and Enhanced component)

Suggested Title *

(250 character max)

The Problem: Describe the problem identified ⓘ Describe the topic area related problem the program, initiative, or activity is addressing:

- Explain why the problem was important to address
- Describe which population was affected by the problem
- Note the data sources or systems used to describe the extent of the problem

(2000 character max)

The Narrative: How was Core SIPP funding used to address the problem? ⓘ Describe your program, initiative, or activity aimed to address the problem:

- What program, initiative, or activity are you highlighting?
- Who (e.g. state/local health department and/or local/state partners) was involved in developing, supporting, or leading the program, initiative, or activity?
- Describe how the activity is innovative
- Include references, if applicable
- Identify in simple terms the methods used, if applicable

(2000 character max)

Outcomes and Impact: What outcomes (short-, intermediate-, or long-term) resulted from your actions? ⓘ Describe the evaluation of the activity:

- Identify the measurable short-term outcomes (e.g. early results of the process), intermediate outcomes (e.g. results of the short-term outcomes), and/or long-term outcomes that demonstrate how the activity addressed the problem (e.g. change in prevention policy, programs, or practices; increased funding)
- The first year of success stories can focus on short-term outcomes
- Avoid stories lacking an outcome (e.g. "A fact sheet was created and distributed to stakeholders."). Be more specific and provide details (e.g. describe what was included in the factsheet, why it was relevant to specific stakeholders, and how stakeholders used the fact sheet)


(2000 character max)

Lessons Learned: What lesson(s) was learned that can help others with similar problems in the future? (optional).

- ⓘ If applicable, share any lessons learned from your program, initiative, or activity highlighted in the success story:
- Provide a conclusion that effectively wraps up the story
 - Summarize the problem, activity, and outcomes
 - Discuss barriers overcome or facilitators that contributed to success
 - Avoid using broad statements like "There was a noticeable decrease." Be specific and reference data

(2000 character max)

Check if any of the following are being submitted to complement your story

 Please upload any additional documents into the Document Upload tab.

- ☐ Press Release
- ☐ Project Photos
- ☐ Promotional Materials
- ☐ Publication (e.g., news story, journal article)
- ☐ Quote from Partner/Participant
- ☐ Sample of Materials Produced
- ☐ Testimonials
- ☐ Video/Audio Clip
- ☐ Website URL
- ☐ Other

Save

Save & Close

Cancel

Technical Assistance Needs and Challenges/Barriers (Base and Enhanced component)

Please describe the barrier or challenge *

(5000 character max)

Please provide the status of the barrier or challenge *

☐ Ongoing ☐ Resolved/Addressed

Please select the activities that this barrier or challenge is related to.

Activities

test

Add

Remove

Selected Activities

Save

Save & Close

Cancel

Technical Assistance Needed

4 Please include any technical assistance currently necessary to complete your Core SIPP activities. If you do not have any technical assistance needs, please indicate that as well.
(10000 character max)

Save

Save & Close

Cancel

Enhanced Component

Core SIPP Enhanced

Section Description	Edit Status	Last Check-out	Ready
1 Implementation and Enhanced Evaluation			
+ Add Activity			