FORM 10
PROJECT PERFORMANCE/OUTCOME MEASURE
DETAIL SHEET

Form 10 - Option 1 (Single Measure):

PERFORMANCE MEASURE:

Level:

Domain:

GOAL:

MEASURE:

DEFINITIONS:

Numerator:
Denominator:
Units:
Number:
Text:

HEALTHY PEOPLE 2020 OBJECTIVE (or other benchmark data):

GRANTEE DATA SOURCES:

SIGNIFICANCE:
Form 10 - Option 2 (Tiered Measure):

PERFORMANCE MEASURE:

   Level:

   Domain:

GOAL:

MEASURE:

DEFINITION:
   Tier 1:

   Tier 2- Activities/ Activity Areas:

   Tier 3- Process Measures:

   Tier 4- Outcome Measures:

BENCHMARK DATA SOURCES:

GRANTEE DATA SOURCES:

SIGNIFICANCE:
FORM 10
DETAIL SHEET INSTRUCTIONS
PROJECT PERFORMANCE MEASURE

Instructions:

This form is to be used for both the nationally required Project Performance Measures and the any Outcome Measure the project chooses to add. The project can choose to add either a single component Performance measure, using Option 1, or a tiered measure, using Option 2. Complete each section as appropriate for the measure being described.

Performance Measure: Enter the narrative description of the performance or outcome measure.

Level: Select from National, State, or Grantee the most appropriate classification for the measure being described.

Category: Select from Women’s and Maternal Health, Perinatal Infant Health, Child Health, Children with Special Health Care Needs, Adolescent Health, Life Course/ Crosscutting, or Capacity Building the most appropriate classification for the measure being described.

Goal: Enter a short statement indicating what the project hopes to accomplish by tracking this measure.

Measure: Enter a brief statement of the measure with information sufficient to interpret the meaning of a value associated with it (e.g., The percent of children with special health care needs age 0 to 18 whose families have adequate private and/or public insurance to pay for needed services). The measure statement should not indicate a desired direction (e.g., an increase).

Definition: Describe how the value of the measure is determined from the data. If the value of the measure is yes/no or some other narrative indicator such as a stage 1/stage 2/stage 3, a clear description of what those values mean and how they are determined should be provided.

If using Option 2:

Tier 1: Use dichotomous yes/no for respondents to state whether work is being done in the program

Tier 2: Enter a list of related process activities related to the area of measurement that projects can select from to demonstrate what activities are being done

Tier 3: Enter the same list as in Tier 2, but with space for reporting of numerical value for each process activity selected (e.g. if Technical Assistance is selected in Tier 2, then in Tier 3, space should be provided to report number of technical assistance encounters provided)

Tier 4 or Option 1: Enter the following for outcome measures to be reported.

Numerator: If the measure is a percentage, rate, or ratio, provide a clear description of the numerator.

Denominator: If the measure is a percentage, rate, or ratio, provide a clear description of the denominator.

Units: If the measure is a percentage, rate, ratio, or scale, indicate the units in which the measure is to be expressed (e.g., 1,000, 100) on the "Number" line and type of measure (e.g., percentage, rate, ratio or scale) on "Text" line. If the measure is a narrative, indicate yes/no or stage 1, stage 2", etc. on the "Text" line and make no entry on the "Number" line.

Healthy People 2020 Objective: If the measure is related to a Healthy People 2020 objective describe the objective and corresponding number. If it relates to another benchmark data source, please describe that and include relevant information.

Grantee Data
Sources: Enter the source(s) of the data used in determining the value of the measure and any issues concerning the methods of data collection or limitations of the data used.

Significance: Briefly describe why this measure is significant, especially as it relates to the Goal.

Note that the Performance Measure title and numerator and denominator data are to appear on Form 10 exactly as they appear on this Form.