

**TECHNICAL ASSISTANCE/COLLABORATION FORM – REVISED JULY 2019**

DEFINITION: Technical Assistance/Collaboration refers to mutual problem solving and collaboration on a range of issues, which may include program development, clinical services, collaboration, program evaluation, needs assessment, and policy & guidelines formulation. It may include administrative services, site visitation and review/advisory functions. Collaborative partners might include State or local health agencies, and education or social service agencies. Faculty may serve on advisory boards to develop &/or review policies at the local, State, regional, national or international levels. The technical assistance (TA) effort may be a one-time or on-going activity of brief or extended frequency. The intent of the measure is to illustrate the reach of the training program beyond trainees.

Provide the following summary information on **ALL** TA provided

Total Number of Technical Assistance/ Collaboration Activities	Total Number of TA Recipients	TA Activities by Type of Recipient	Number of TA Activities by Target Audience
_____	_____	<input type="checkbox"/> Other Divisions/ Departments in a University <input type="checkbox"/> Title V (MCH Programs) <input type="checkbox"/> State Health Dept. <input type="checkbox"/> Health Insurance/ Organization <input type="checkbox"/> Education <input type="checkbox"/> Medicaid agency <input type="checkbox"/> Social Service Agency <input type="checkbox"/> Mental Health Agency <input type="checkbox"/> Juvenile Justice or other Legal Entity <input type="checkbox"/> State Adolescent Health <input type="checkbox"/> Developmental Disability Agency <input type="checkbox"/> Early Intervention <input type="checkbox"/> Other Govt. Agencies <input type="checkbox"/> Mixed Agencies <input type="checkbox"/> Professional Organizations/Associations <input type="checkbox"/> Family and/or Consumer Group <input type="checkbox"/> Foundations <input type="checkbox"/> Clinical Programs/ Hospitals <input type="checkbox"/> Other: Please Specify _____	Local _____ Title V _____ Within State _____ Another State _____ Regional _____ National _____ International _____

**B.** Provide information below on the **5-10 most significant** technical assistance/ collaborative activities in the past year. In the notes, briefly state why these were the most significant TA events.

Title	Topic of Technical Assistance/Collaboration <i>Select one from list A and all that apply from List B.</i>		Recipient of TA/ Collaborator	Intensity of TA	Primary Target Audience	
	List A (select one)  A. Clinical care related (including medical home) B. Cultural C. Competence Related D. Data, Research, Evaluation Methods (Knowledge Translation) E. Family Involvement F. Interdisciplinary Teaming G. Healthcare Workforce Leadership H. Policy I. Prevention J. Systems Development/Improvement	List B (select all that apply)  1. CSHCN/ Developmental Disabilities 2. Autism 3. Prenatal Care 4. Perinatal/ Postpartum Care 5. Well Woman Visit/ Preventive Health Care 6. Depression Screening 7. Safe Sleep 8. Breastfeeding 9. Newborn Screening 10. Quality of Well Child Visit 11. Child Well Visit 12. Injury Prevention 13. Family Engagement 14. Medical Home (Access to and use of medical home) 15. Transition 16. Adolescent Well Visit 17. Injury Prevention 18. Screening for Major Depressive Disorder 19. Health Equity 20. Adequate health insurance coverage 21. Tobacco and eCigarette Use 22. Oral Health 23. Nutrition 24. Other	A. Other Divisions/ Departments in a University B. Title V (MCH Programs) C. State Health Dept. D. Health Insurance/ Organization E. Education F. Medicaid agency G. Social Service Agency H. Mental Health Agency I. Juvenile Justice or other Legal Entity J. State Adolescent Health K. Developmental Disability Agency L. Early Intervention M. Other Govt. Agencies N. Mixed Agencies O. Professional Organizations/ Associations P. Family and/or Consumer Group Q. Foundations R. Clinical Programs/ Hospitals S. Other (specify)	1. One time brief (single contact) 2. One time extended (multi-day contact provided one time) 3. On-going infrequent (3 or less contacts per year) 4. On-going frequent (more than 3 contacts per year)	1. Local 2. Title V 3. Within State 4. Another State 5. Regional 6. National 7. International	
1	Example	G- Policy	21- Oral Health	E - Education	2	2

C. In the past year have you provided technical assistance on emerging issues that are not represented in the topic list above? YES/ NO.

If yes, specify the topic(s): \_\_\_\_\_