FORM 7

DISCRETIONARY GRANT PROJECT **SUMMARY DATA**

1.	Project Service Focus										
	[] Urban/Central City [] Rural	[] Suburban [] Frontier	[] Metropolita [] Border (US	n Area (city & suburbs)							
	[] Kurar	[]Trontier	[] Bolder (OS	-Mexico)							
2.	Project Scope										
	[] Local	[] Mult	i-county	[] State-wide							
	[] Regional	[] Nation	onal								
3.	Grantee Organization T	`vne									
	State Agency										
	[] Community Government Agency										
	School District										
	University/Institution Of Higher Learning (Non-Hospital Based)										
	[] Academic Medical Center										
	[] Community-Based Non-Governmental Organization (Health Care)										
	[] Community-Based Non-Governmental Organization (Non-Health Care)										
	[] Professional Membership Organization (Individuals Constitute Its Membership)										
	[] National Organization (Other Organizations Constitute Its Membership)										
	[] National Organization (Non-Membership Based)										
	[] Independent Research/Planning/Policy Organization										
	[] Other										
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4.	Project Infrastructure F			ie							
	[] Guidelines/Standards Development And Maintenance										
		[] Policies And Programs Study And Analysis									
	[] Synthesis Of Data And Information										
	[] Translation Of Data And Information For Different Audiences										
	[] Dissemination Of Information And Resources [] Quality Assurance										
	[] Technical Assistance										
	Training										
	[] Systems Development										
	Other										
	լյատ										

Demographic Characteristics of Project Participants 5.

Indicate the service level:

Direct Health Care Services
Enabling Services
Public Health Services and Systems

		RACE (Indicate all that apply)				ETHNICITY						
	American Indian or Alaska Native	Asian	Black or African American	Native Hawaiian or Other Pacific Islander	White	More than One Race	Unrecorded	Total	Hispanic or Latino	Not Hispanic or Latino	Unrecorded	Total
Pregnant Women (All Ages)												
Infants <1 year												
Children 1 to 12 years												
Adolescent s 12-18 years												
Young Adults 18- 21 years												
CSHCN 0 - 21 years												
Non- Pregnant Women 22+ years												
Other Unknown TOTALS												

Cl	ients' Primary Language(s)
Popul	ation Served
	omeless
	carcerated
[] Se	verely Depressed
	grant Worker/ Population
	insured
	lolescent Pregnancy
	od Stamp Eligible
[] Ot	
[]0	
Resou	rce/TA and Training Centers ONLY
	er all that apply.
a.	
	Providers/ Professionals
	[] Local/ Community partners
	[] Title V
	[] Other state agencies/ partners
	[] Regional
	[] National
	[] International
b.	1
C.	\mathcal{E}
d.	1
e. f.	8
1.	Major Type of TA or Training Provided: [] continuing education courses,
	workshops,
	[] on-site assistance,
	[] distance learning classes
	[] one-on-one remote consultation
	other. Specify:

INSTRUCTIONS FOR THE COMPLETION OF FORM 7 PROJECT SUMMARY

Section 1 – Project Service Focus

Select all that apply

Section 2 – Project Scope

Choose the one that best applies to your project.

Section 3 – Grantee Organization Type

Choose the one that best applies to your organization.

Section 4 – Project Infrastructure Focus

If applicable, choose all that apply.

Section 5 – Demographic Characteristics of Project Participants

Indicate the service level for the grant program. Multiple selections may be made. Please fill in each of the cells as appropriate. CSHCN should be reported as a subset of all infants and children ages zero (0) through 21. The count for CSHCN will not be added to the overall total because their inclusion would result in a duplicated count.

Direct Health Care Services are those services generally delivered one-on-one between a health professional and a patient in an office, clinic or emergency room which may include primary care physicians, registered dietitians, public health or visiting nurses, nurses certified for obstetric and pediatric primary care, medical social workers, nutritionists, dentists, sub-specialty physicians who serve children with special health care needs, audiologists, occupational therapists, physical therapists, speech and language therapists, specialty registered dietitians. Basic services include what most consider ordinary medical care, inpatient and outpatient medical services, allied health services, drugs, laboratory testing, x-ray services, dental care, and pharmaceutical products and services. State Title V programs support - by directly operating programs or by funding local providers - services such as prenatal care, child health including immunizations and treatment or referrals, school health and family planning. For CSHCN, these services include specialty and sub-specialty care for those with HIV/AIDS, hemophilia, birth defects, chronic illness, and other conditions requiring sophisticated technology, access to highly trained specialists, or an array of services not generally available in most communities.

Enabling Services allow or provide for access to and the derivation of benefits from, the array of basic health care services and include such things as transportation, translation services, outreach, respite care, health education, family support services, purchase of health insurance, case management, coordination of with Medicaid, WIC and educations. These services are especially required for the low income, disadvantaged, geographically or culturally isolated, and those with special and complicated health needs. For many of these individuals, the enabling services are essential - for without them access is not possible. Enabling services most commonly provided by agencies for CSHCN include transportation, care coordination, translation services, home visiting, and family outreach. Family support activities include parent support groups, family training workshops, advocacy, nutrition and social work.

Public Health Services and Systems include preventive interventions and personal health services, developed and available for the entire MCH population of the State rather than for individuals in a one-on-one situation. Disease prevention, health promotion, and statewide outreach are major components. Common among these services are newborn screening, lead screening, immunization, Sudden Infant Death Syndrome counseling, oral health, injury prevention, nutrition and outreach/public education. These services are generally available whether the mother or child receives care in the private or public system, in a rural clinic or an HMO, and whether insured or not. The other critical aspect of Public Health Services and Systems are activities directed at improving and maintaining the health status of all women and children by providing support for development and maintenance of comprehensive health services systems and resources such as health services standards/guidelines, training, data and planning systems. Examples include needs assessment, evaluation, planning, policy development, coordination, quality assurance, standards development, monitoring, training, applied research, information systems and systems of care. In the development of systems of care it should be assured that the systems are family centered, community based and culturally competent.

Section 6 – Clients Primary Language(s)

Indicate which languages your clients speak as their primary language, other than English, for the data provided in Section 6. List up to three languages.

Section 7 – Check all population served

Section 8 – Resource/TA and Training Centers (Only)

Answer all that apply.