

NCCMT Registry of Knowledge Translation Methods and Tools for Public Health  
MEASUREMENT AND DESCRIPTIVE INFORMATION TOOL (MADI)

Use the companion manual to fill in this tool for each resource that receives a “green light” (i.e., Pursue Lead) after completing the Inclusion Tool.

SECTION I: RESOURCE AND REVIEWER IDENTIFICATION			
Resource Title			
Resource Author(s)			
Author(s)' Organization			
Resource Year			
Reviewer #1			
Review Date 1		NCCMT Main Ref ID #	
Reviewer #2		Search/Screening Ref ID #	
Review Date 2		Search Strategy	

SECTION II: EVALUATION AND MEASUREMENT CHARACTERISTICS		
Question/Item	Response Options	Comments/Details
1 Has this method/tool been evaluated?	<input type="checkbox"/> Has Been Evaluated → <input type="checkbox"/> Evaluation in Progress → <input type="checkbox"/> Has Not Been Evaluated <input type="checkbox"/> Information Not Available	
2 Do the validity properties of the method/tool meet accepted standards?	<input type="checkbox"/> Validity Properties Meet Accepted Standards → <input type="checkbox"/> Validity Properties Do Not Meet Accepted Standards <input type="checkbox"/> Validity Not Tested <input type="checkbox"/> Validity Testing in Progress <input type="checkbox"/> Information Not Available <input type="checkbox"/> Not Applicable	
3 Do the reliability properties of the method/tool	<input type="checkbox"/> Reliability Properties Meet	

	meet accepted standards?	Accepted Standards → <input type="checkbox"/> Reliability Properties Do Not Meet Accepted Standards <input type="checkbox"/> Reliability Not Tested <input type="checkbox"/> Reliability Testing in Progress <input type="checkbox"/> Information Not Available <input type="checkbox"/> Not Applicable	
4	Consult the companion manual to assign the appropriate methodological rating for this resource.	<input type="checkbox"/> Strong <input type="checkbox"/> Moderate <input type="checkbox"/> Weak <input type="checkbox"/> Unknown / No Evidence <input type="checkbox"/> Not Applicable	
5	Was the method/tool originally developed for use in public health contexts/groups/settings?	<input type="checkbox"/> Yes → <input type="checkbox"/> No <input type="checkbox"/> Information Not Available	
6	Was the method/tool originally developed for use by a particular sub-group or sub-area of public health?	<input type="checkbox"/> Yes → <input type="checkbox"/> No <input type="checkbox"/> Information Not Available <input type="checkbox"/> Not Applicable	
7	If the resource was developed for a particular group/area within public health, is it generalizable/transferable to other public health contexts/groups/settings?	<input type="checkbox"/> Yes → <input type="checkbox"/> No <input type="checkbox"/> Information Not Available (and reviewer cannot reasonably judge) <input type="checkbox"/> Not Applicable	
8	If the resource was developed for use within a field/sector outside public health, is it generalizable/transferable to public health contexts/groups/settings?	<input type="checkbox"/> Yes → <input type="checkbox"/> No (*see manual) <input type="checkbox"/> Information Not Available (and reviewer cannot reasonably judge) (*see manual) <input type="checkbox"/> Not Applicable	

**SECTION III: RESOURCE DESCRIPTION AND DEVELOPMENT**

Question/Item		Response Options		Comments/Details
1	Describe the purpose of the resource.	<input type="checkbox"/> Planning <input type="checkbox"/> Doing <input type="checkbox"/> Evaluating	<input type="checkbox"/> Synthesis <input type="checkbox"/> Dissemination <input type="checkbox"/> Exchange <input type="checkbox"/> Application	
2	Describe the rationale/need for developing the method/tool.			
3	Does the method/tool draw from one or more theories, models, frameworks, sets of principles, philosophies?	<input type="checkbox"/> Yes → <input type="checkbox"/> No <input type="checkbox"/> Information Not Available		
4	Describe the questions, sections, elements and/or activities included or involved in the resource.			
5	Identify and describe the individual(s), group(s) and/or organization(s) responsible for developing			

	the method/tool.		
6	Describe the processes or steps that were used/taken to develop the method/tool.		
7	In what year was the method/tool first released, made available for use, or put into practice?		

<b>SECTION IV: IMPLEMENTATION</b>			
	<b>Question/Item</b>	<b>Response Options</b>	<b>Comments/Details</b>
1	Identify and describe who would be involved in the delivery and/or administration of the method/tool.		
2	Identify and describe who would be involved as participants or respondents of the method/tool.		
3	Describe the steps/process for using/implementing the method/tool.		

4	How much time is needed for each individual to participate in or complete the method/tool?	<input type="checkbox"/> 10 minutes or less <input type="checkbox"/> 10 to 30 minutes <input type="checkbox"/> 30 to 60 minutes <input type="checkbox"/> 1 to 2 hours <input type="checkbox"/> 2 to 4 hours <input type="checkbox"/> 4 to 8 hours <input type="checkbox"/> More than 8 hours <input type="checkbox"/> Information Not Available	
5	How much time is needed for the overall implementation of the method/tool?		

**SECTION V: RESOURCES NEEDED TO ACCESS AND/OR USE THE METHOD/TOOL**

	Question/Item	Response Options	Comments/Details
1	Is there a monetary cost for accessing the method/tool?	<input type="checkbox"/> Yes → <input type="checkbox"/> None	

		<input type="checkbox"/> Not Specified	
2	Are other resources needed to use or implement the method/tool (tangible resources)?	<input type="checkbox"/> Yes → <input type="checkbox"/> None <input type="checkbox"/> Not Specified	
3	Are special expertise and/or training needed to implement the method/tool and/or analyze resulting data (skills)?	<input type="checkbox"/> Yes → <input type="checkbox"/> None <input type="checkbox"/> Not Specified	

#### SECTION VI: OTHER ACCESS CONSIDERATIONS

	Question/Item	Response Options	Comments/Details
1	Which language(s) is the resource available in?	<input type="checkbox"/> English <input type="checkbox"/> French <input type="checkbox"/> Other _____	
2	Which medium/media format(s) is/are used to access the method/tool?	<input type="checkbox"/> Paper copy <input type="checkbox"/> CD or DVD <input type="checkbox"/> On-line / Web-based <input type="checkbox"/> Periodical <input type="checkbox"/> Other _____	
3	How can the primary resource document for the method/tool be posted, linked, or referenced on the Registry website?	<input type="checkbox"/> Posted PDF Hosted by Registry <input type="checkbox"/> Linked to a Web Address <input type="checkbox"/> Citation Information	
4	Are there any restrictions or conditions on	<input type="checkbox"/> Yes →	

	accessing or using the method/tool?	<input type="checkbox"/> None <input type="checkbox"/> Not Specified	
5	Are there any additional resource materials available for the method/tool?	<input type="checkbox"/> Yes → <input type="checkbox"/> No	
6	How can the additional resource materials be posted, linked, or referenced on the Registry website?	<input type="checkbox"/> Posted PDF Hosted by Registry <input type="checkbox"/> Linked to a Web Address <input type="checkbox"/> Citation Information <input type="checkbox"/> Not Applicable	
7	Are there any restrictions or conditions on accessing or using the additional resource materials?	<input type="checkbox"/> Yes → <input type="checkbox"/> None <input type="checkbox"/> Not Specified <input type="checkbox"/> Not Applicable	

**SECTION VII: OTHER CONSIDERATIONS/DETAILS**

	Question/Item	Response Options	Comments/Details
1	Are there any other points of interest or relevance that should be noted and/or reported about this	<input type="checkbox"/> Yes → <input type="checkbox"/> No	

	resource?		
--	-----------	--	--

SECTION VIII: RESOURCE CONTACT INFORMATION			
	Question/Item	Response Options	Comments/Details
1	Identify the name and contact information for the person, position, or organization that can offer further information about the method/tool and if necessary address requests for proprietary materials.		
2	Is the contact person/source able and willing to provide training, support and/or other method/tool related services to users?	<input type="checkbox"/> Yes → <input type="checkbox"/> No	
3	Has the contact person/source agreed to have their name and contact information posted on the Registry website?	<input type="checkbox"/> Yes → <input type="checkbox"/> No	

Check when complete:

Information entered into Access database