

NCCMT Registry of Knowledge Translation Methods and Tools for Public Health

MEASUREMENT AND DESCRIPTIVE INFORMATION TOOL (MADI) – REVIEWER MANUAL

REVIEWER INSTRUCTIONS:

- This Manual outlines expectations for content, lists possible responses and provides relevant key definitions/terms for the Measurement and Descriptive Information (MADI) Tool.
- This tool should be filled in with as much detail as possible for each resource that receives a “green light” (i.e., Pursue Lead; Active Status) following completion of the Inclusion Tool.
- Wherever possible, reviewers should identify the page number (and/or the supplementary source) where the detail(s) was/were located.
- Do not leave questions blank (i.e., missing data). If a question is not applicable, or where information is not specified or unavailable to answer specific questions, indicate such by checking the appropriate box.
- The → symbol prompts reviewers to provide additional information, but does not need to be present for reviewers to use the comments section.
- Reviewers may either insert their responses directly into the appropriate sheets of the Access database, or fill in a hard copy of the tool and then transfer their responses into the Access database.
- Two individuals are needed to participate in this process. One reviewer (designated as Reviewer #1) completes the full tool. A second person (designated as Reviewer #2) who is familiar with (e.g., has read) the relevant method/tool materials will review the completed MADI for clarity and completeness. At least one of the reviewers should have a background in public health, knowledge translation, and research methods (e.g., one reviewer may have experience in public health; the other reviewer may have a background in knowledge translation and research methods).
- If Reviewer #2 does not concur with the responses provided by Reviewer #1 or believes responses are lacking in clarity and/or completeness, they two reviewers must discuss the discrepancies and address how to improve the recorded information. If the reviewers cannot reach agreement on any issue, a third party (i.e., the project supervisor) must make the decision.
- Once the MADI has been filled in, checked for clarity and completeness, and corrected or edited as necessary, the reviewers will decide which of them is responsible for writing the summary that will be posted on the Registry website. [For instructions on how to write the summary see the Summary Template and Writer’s Manual.]

SECTION I: RESOURCE AND REVIEWER IDENTIFICATION			
Resource Title	Title or name of the method/tool (primary source)		
Resource Author(s)	Name(s) of the resource author(s)/developer(s)		
Author(s)' Organization	Organizational/institutional affiliation(s) of the resource author(s)/developer(s)		
Resource Year	Publication or release date of the resource		
Reviewer #1	Name of the project staff member completing the full MADI		
Review Date 1	Date that reviewer #1 completed the tool for this resource	NCCMT Main Ref ID #	NCCMT Main Reference Manager Database ID number assigned to this resource
Reviewer #2	Name of the person reviewing the MADI for clarity/completeness	Search/Screening Ref ID #	Search/Screening Reference Manager ID number assigned to this resource
Review Date 2	Date that reviewer #2 completed review of MADI	Search Strategy	Strategy that located item: electronic database, targeted website, internet, recommendation, reference list, hand search

SECTION II: EVALUATION AND MEASUREMENT CHARACTERISTICS
<p>Q1: Has this method/tool been evaluated?</p> <p>If the answer to this question is YES, Has Been Evaluated, provide a narrative description of the evaluation details in the comments section, including:</p> <ul style="list-style-type: none"> ▪ type(s) of evaluation (e.g., process, formative, impact, outcome/summative, utilization focused, cost benefit, cost effectiveness) ▪ setting(s) ▪ stakeholder group(s) ▪ results ▪ evaluation reports or articles that can be accessed as supplementary materials for this resource (see also Section VI, Question 5) ▪ any other relevant details about evaluation of the resource <p>If the author indicates that the method/tool is currently being evaluated, select Evaluation in Progress; note, in the comments section, that an evaluation is underway but results are not currently available; provide any available details in relation to bullet points 1, 2, 3 and 6 above.</p> <p>If the resource author specifically states the method/tool has not been evaluated, select NO, Has Not Been Evaluated.</p>

If there is no mention of any evaluation(s) being conducted, select **Information Not Available**.

Q2: Do the validity properties of the method/tool meet accepted standards?

YES, Validity Properties Meet Accepted Standards is the appropriate response if one or more of the validity properties tested meets conventional levels/criteria for demonstrating validity (see below for definitions and guidelines).

In the comments section,

- identify which form(s) of validity has/have been tested (e.g., construct, content, criterion);
- record the statistical results of testing, if provided; and/or
- provide a narrative description of the procedures used to assess validity and the results of such testing.

NO, Validity Properties Do Not Meet Accepted Standards is the appropriate response if the author indicates validity has been tested, but the results do not meet conventional levels/criteria for demonstrating validity. If available, provide details in comments section.

Validity Not Tested is the appropriate response if the author indicates that validity testing has not been undertaken for the method/tool.

Validity Testing in Progress is the appropriate response if the author indicates that validity testing is currently in progress with no results yet available. If details are available, provide in comments section.

Information Not Available is the appropriate response if the author makes no mention of validity testing.

Not Applicable is the appropriate response if the method/tool does not have psychometric properties.

Validity: “the degree to which something is well founded, just, or sound.” (p. 539: Rychetnick, L., Howe, P., Waters, E., Barratt, A., & Frommer, M. (2004). A glossary for evidence based public health. *Journal of Epidemiology and Community Health*, 58, 538-545.)

Accepted Standards: validity properties of the method/tool are reported at levels that are conventionally accepted by experts in the field

Measurement Validity: “the degree to which a measurement actually measures what it purports to. Measurement validity is classified into three types [construct validity, criterion validity, and predictive validity].” (Rychetnick et al., 2004, p. 539)

Construct Validity: “the extent to which the measurement corresponds to theoretical concepts or constructs” (Rychetnick et al., 2004, p. 539); does the method/tool measure the hypothetical construct(s) or concept(s) of interest? does the method/tool measure what you think it measures?

Content Validity: “the extent to which the measurement incorporates the scope or domain of the phenomenon under study” (Rychetnick et al., 2004, p. 539); does the method/tool measure the content it was intended to measure? does the method/tool seem reasonable? usually established through expert judgments, having experts in the content area check items to ensure they accurately reflect all the possible topics and ideas that would be expected to be included on a test of that nature

Criterion Validity: “the extent to which the phenomenon correlates with an external criterion of that phenomenon. Criterion validity can be *concurrent* (the measurement and criterion refer to the same point in time) or *predictive* (the ability of the measurement to predict the criterion).” (Rychetnick et al., 2004, p. 539); how well does the method/tool predict performance or outcomes on the criterion in question?

Q3: Do the reliability properties of the method/tool meet accepted standards?

YES, Reliability Properties Meet Accepted Standards is the appropriate response if one or more of the reliability properties tested meets conventional levels/criteria for reliability (see below for definitions and guidelines).

In the comments section:

- identify which form(s) of reliability has/have been tested (e.g., inter-rater, test-retest, internal consistency);
- record the statistical results of testing, if provided; and/or
- provide a narrative description of the procedures used to assess reliability and the results of such testing.

NO, Reliability Properties Do Not Meet Accepted Standards is the appropriate response if the author indicates reliability has been tested, but the results do not meet conventional levels/criteria for demonstrating reliability. If available, provide details in comments section.

Reliability Not Tested is the appropriate response if the author indicates that reliability testing has not yet been undertaken for the method/tool.

Reliability Testing in Progress is the appropriate response if the author indicates that reliability testing is currently in progress with no results yet available. If details are available, include in comments section.

Information Not Available is the appropriate response if the author makes no mention of reliability testing.

Not Applicable is the appropriate response if the method/tool does not have psychometric properties.

Reliability: “the degree to which observations or measures can be replicated, when repeated under the same conditions. Reliability is necessary,

but not sufficient, to establish the validity of a proposition. Poor reliability can be due to variability in the observer or measurement tool, or instability in the actual phenomenon of study.” (Rychetnick et al., 2004, p. 539)

Inter-rater Reliability: the extent to which two individuals arrive at the same conclusions; measured by conducting a comparison of scores given by two different raters to arrive at the percentage of agreement between raters

Test-retest Reliability: the stability of a test/instrument over time; are individuals consistent or do they vary their responses when they complete the test a second time? measured by calculating a Pearson correlation coefficient (r) which compares the first set of scores with the second set of scores.

Internal Consistency: the extent to which items in a test represent the same, single construct; commonly measured using Cronbach’s Alpha which essentially correlates the score of each item with the total score

(may use Kuder-Richardson or split halves correlations)

Accepted Standards: reliability properties of the method/tool are reported at levels that are conventionally accepted by experts in the field

Pearson Correlation Coefficient (r): Used for measuring test-retest reliability; compares the first set of scores on a test with the second set of scores on the same test. The reliability coefficient (r) should be in the positive range, 0.00 to +1.00 with higher scores representing greater reliability. General guidelines for interpreting correlation coefficients: 0.0 to 0.2 = weak or no relationship; 0.2 to 0.4 = weak relationship; 0.4 to 0.6 = moderate relationship; 0.6 to 0.8 = strong relationship; 0.8 to 1.0 = very strong relationship. To be noticeable, the r value should be at least 0.4, but values of 0.6 and higher are typically considered acceptable. Streiner and Norman suggest a minimum r value of 0.5 [Streiner, D.L., & Norman, G.R. (2003). *Health measurement scales: A practical guide to their development and use* (3rd ed.). Oxford: Oxford University Press.]

Cohen’s Kappa: Cohen's kappa coefficient is a statistical measure of inter-rater reliability. It is generally thought to be a more robust measure than simple percent agreement calculation since κ takes into account the agreement occurring by chance. Cohen's kappa measures the agreement between two raters who each classify N items into C mutually exclusive categories. [Source: Cohen's kappa. (2008, June 9). In Wikipedia, The Free Encyclopedia. June 17, 2008, http://en.wikipedia.org/w/index.php?title=Cohen%27s_kappa&oldid=218233104]

Cronbach’s Alpha (α): Used to measure internal consistency, The α coefficient should be between 0 and 1, with higher scores (closer to 1) indicating greater internal consistency. To be considered acceptable, the alpha value should exceed 0.8 (Streiner & Norman, 2003).

Q4: Consult the companion manual to assign the appropriate methodological rating for this resource.

Use the responses given above to questions 2 (validity) and 3 (reliability) and the descriptions and table below to determine the appropriate methodological rating for the resource. Select that rating from the list in the response options column. If you are entering information directly into the Access database, the program will automatically enter the response for this question based on the responses given for questions 2 and 3. In the comments section provide any relevant details that support the decision. The following list describes the appropriate basis for each rating:

Strong:

- validity properties have been tested and they meet or exceed accepted standards and
- reliability properties have been tested and they meet or exceed accepted standards

Moderate:

- validity properties have been tested and meet or exceed accepted standards and reliability is either not acceptable, or not tested, or not mentioned or
- reliability properties have been tested and meet or exceed accepted standards and validity is either not acceptable, or not tested, or not mentioned

Weak:

- validity properties have been tested and they do not meet accepted standards and
- reliability properties have been tested and they do not meet accepted standards

No Evidence or Unknown (in this situation no conclusions can be drawn whether the method/tool meets or fails to meet accepted measurement standards):

- validity has not been tested, or validity testing is in progress, or there is no mention of validity and
- reliability has not been tested, or reliability testing is in progress, or there is no mention of reliability

Not Applicable:

- reliability and validity standards are not appropriate to assess the method/tool in question,
- there are no psychometric properties to assess

Question		Response					
2	Validity	Meets Standards	Meets Standards	Does Not Meet Standards, NT, TP or INA	Does Not Meet Standards	NT, TP or INA	NA
3	Reliability	Meets Standards	Does Not Meet Standards, NT, TP or INA	Meets Standards	Does Not Meet Standards	NT, TP or INA	NA
Overall Rating		Strong	Moderate		Weak	No Evidence or Unknown	Not Applicable

NT=Not Tested; TP=Testing in Progress; INA=Information Not Available; NA=Not Applicable

Q5: Was the method/tool originally developed for use in public health contexts/groups/settings?

Check YES if the author indicates the method/tool was originally developed for use in public health contexts/groups/settings. Provide any relevant details in the comments section.

Check NO if the author indicates the method/tool was originally developed for use in another field. If the answer to this question is NO, specify in the comments section which sector/field/group the resource was developed for; enter **Not Applicable** for questions 6 and 7; proceed to question 8.

Check **Information Not Available** if there is no clear indications of which field/group the resource was originally developed for; enter **Information Not Available** for questions 6 and 7; proceed to question 8.

Q6: Was the method/tool originally developed for use by a particular sub-group or sub-area of public health?

Check YES if the author indicates the method/tool was originally developed for use by a particular sub-group or sub-area of public health (e.g., public health nurses, nutritionists, hygienists, policy makers, program managers, epidemiologists); specify in the comments section which sub-group(s) or sub-area(s) was/were the original target user(s).

If the answer to this question is NO, enter **Not Applicable** as the response to question 7 and question 8.

Q7: If the resource was developed for a particular group/area within public health, is the method/tool generalizable/transferable to other public health contexts/groups/settings?

Check YES if:

- the author has explicitly stated the method/tool is generalizable/transferable to other public health contexts/groups/settings and has provided data/rationale to support this claim,
- the author claims the method/tool can be used in other public health contexts/settings/groups but does not provide supporting evidence/rationale, or
- the author does not comment on the generalizability/transferability of the method/tool for other public health contexts/settings/groups but its applicability seems reasonable in the reviewer's judgment

Provide in the comments section all relevant descriptive information (e.g., summary of evidence supporting claim, summary of author's rationale, summary of

reviewer's rationale). Include any identified limitations on the scope of application.

If the response to this question was **Not Applicable** proceed to question 8. Any other response to this question (i.e., YES, NO, Information Not Available), enter **Not Applicable** for question 8.

Generalizability / Transferability / External Validity: "the degree to which the study results hold true for a population beyond the subjects in the study or in other settings." (Rychetnick et al., 2004, p. 539); even though the method/tool was developed with a particular context, setting and/or group in mind, the resource can be used in and/or adapted for a variety of other contexts, settings, groups

Q8: If the resource was developed for use within a field/sector outside public health, is the method/tool generalizable/transferable to public health contexts/groups/settings?

Check YES if:

- the author has explicitly stated the method/tool is generalizable/transferable to public health and has provided data/rationale to support this claim,
- the author claims the method/tool can be used in public health contexts/settings/groups but does not provide supporting evidence/rationale, or
- the author does not comment on the generalizability/transferability of the method/tool for public health, but its applicability for use in public health contexts/settings/groups seems reasonable in the reviewer's judgment

Provide in the comments section all relevant descriptive information (e.g., summary of evidence supporting claim, summary of author's rationale, summary of reviewer's rationale). Include any identified limitations on the scope of application.

If the answer to this question is **NO** or **Information Not Available**, as per the Inclusion Tool (Section II: Question 3), re-assess whether this resource is appropriate for inclusion in the Registry (i.e., is this method/tool relevant to public health or could it be adapted to public health). If deemed not relevant/adaptable to public health then this resource should be discarded and its status in the Access database changed accordingly.

Generalizability / Transferability / External Validity: "the degree to which the study results hold true for a population beyond the subjects in the study or in other settings." (Rychetnick et al., 2004, p. 539); even though the method/tool was developed with a particular context, setting and/or group in mind, the resource can be used in and/or adapted for a variety of other contexts, settings, groups

SECTION III: RESOURCE DESCRIPTION AND DEVELOPMENT

Q1: Describe the purpose of the resource.

In the left hand column, check the box that best matches the stage of knowledge translation activity supported by the resource (i.e., is the resource used to plan for, conduct, or evaluate knowledge translation activities; see question 2 on the Inclusion Tool). In the right hand column, check the box that best matches the type of knowledge translation activity that is supported by the resource (i.e., is the resource used for knowledge synthesis, dissemination, exchange, or application; see question 2 on the Inclusion Tool). Provide in the comments section a narrative description of the purpose of the method/tool (e.g., What is it used for? What does it do? What does it produce?)

Q2: Describe the rationale/need for developing the method/tool.

Describe in the comments section:

- the motivation/rationale/impetus for developing the method/tool;
- what need/issue prompted the development of the method/tool;
- what factors influenced the originator(s)' thinking?

Q3: Does the method/tool draw from one or more theories, models, frameworks, sets of principles, philosophies?

If YES, identify the theoretical underpinnings of the method/tool in the comments section, specifying whether the author specifically states the theory (model, etc.) or if the author does not make this explicit, but the reviewer is clearly able to recognize a theoretical connection.

Check NO if the author specifically states that the method/tool is a-theoretical and/or was not derived from any model, principles, etc.

Check Information Not Available if the author does not make any mention of theoretical underpinnings (and none is clearly recognizable by the reviewer).

Q4: Describe the questions, sections, elements and/or activities included/involved in the resource.

Describe in the comments section the content of the method/tool. If appropriate (e.g., if the resource is a survey instrument), describe the method/tool's structure/format and contents (e.g., main sections, topics covered, types and number of questions, etc). Alternatively, (e.g., if the resource outlines an event or process), describe the components of the process or types of activities that participants would engage in. There may be overlap between this question and Question 3 in Section IV.

Q5: Identify and describe the individual(s), group(s) and/or organization(s) responsible for developing the method/tool.

Specify in the comments section, the names of the individual(s)/group(s) who is/are responsible for developing the method/tool. Include all available relevant background detail (e.g., their institutional affiliation(s), faculty(ies), department(s), discipline(s), etc.).

Q6: Describe the processes or steps that were used/taken to develop the method/tool.

Describe in the comments section the processes/procedures that the originators used to develop the method/tool. Indicate if there is/are previous version(s) of this resource. Provide any other relevant details, including, if possible, the timeframe for development (e.g., how many years it took).

Q7: In what year was the method/tool first released, made available for use, or put into practice?

Identify in the comments section the year that the method/tool was first released, made available for use, or put into practice.

SECTION IV: IMPLEMENTATION

Q1: Identify and describe who would be involved in the delivery and/or administration of the method/tool.

Identify in the comments section which individual(s) (stakeholder(s), position(s), role(s), etc.) would be involved in delivering, facilitating, administering, managing, or overseeing implementation of the method/tool.

Q2: Identify and describe who would be involved as participants or respondents of the method/tool.

Identify in the comments section which types of individuals or groups (stakeholders, positions, roles, etc.) would be involved as participants or respondents of the method/tool. (Examples include, but would not be limited to: policy makers, policy analysts, medical officers of health, administrators, program managers, front-line or community-based practitioners, volunteers, researchers, nurses, nutritionists, health promotion professionals, epidemiologists). If information is available, note any expectations or requirements regarding minimum or maximum participation/respondent rates.

Q3: Describe the steps/process for using/implementing the method/tool.

Provide in the comments section a description of the steps/process involved in using/implementing the method/tool. List the steps/events and their recommended sequence. Describe the activities or experiences of participants/respondents. (Supplementary materials such as tool dictionaries, manuals and/or implementation guides may be good sources for these details.) There may be some overlap between this question and Question 4 in Section III.

Q4: How much time is needed for each individual to participate in or complete the method/tool?

Check the best option. If the time is reported as half a day select 2 to 4 hours, if the time is reported as one day select 4 to 8 hours. If more than one day is required select more than 8 hours. If time is not reported or cannot be reasonably estimated select **Information Not Available**.

Q5: How much time is needed for the overall implementation of the method/tool?

Specify in the comments section the time needed to use/implement the method/tool from start to finish. List any expectations or guidelines suggesting how much time is needed or will elapse from the point of initiating or distributing the method/tool to the point of completing the analysis and/or distribution/discussion of the results/outcomes. If no information is provided that specifically identifies or supports an estimate of the overall time required, note in the comments section: "Information Not Available."

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

Q1: Is there a monetary cost for accessing the method/tool?

If YES, provide in the comments section provide any relevant details including where possible any details (e.g., total cost and/or the cost per unit, CDN, US dollars or other currency).

Q2: Are other resources needed to use or implement the method/tool (tangible resources)?

If YES, provide in the comments section the tangible resources needed for use/implementation (e.g., personnel, space, computers, software packages, telephones, other equipment, etc.). If information is available, specify: which personnel are needed, how many, and for what purpose; what kind of space (e.g., size, amenities, features, etc.); how many computers and with what hardware/software; etc.

Q3: Are special expertise and/or training needed to implement the method/tool and/or analyze resulting data (skills)?

If YES, provide in the comments section as much detail as possible about the levels and types of expertise and training needed for implementation and/or analysis. Some examples of “specialties” may include: data analysis skills; psychometric knowledge; statistical knowledge; statistical software knowledge; Word, Excel and/or PowerPoint skills; knowledge of specific aspects of knowledge translation; critical appraisal skills; knowledge of the setting and/or group involved and/or knowledge of their policies/programs; facilitation skills, etc.

SECTION VI: OTHER ACCESS CONSIDERATIONS

Q1: Which language(s) is the resource available in?

Check as many languages as apply. In the pilot phase, all resources should be available in English. If the “Other” category is checked, specify which other

language(s) the resource is available in.

Q2: Which medium/media format(s) is/are used to access the method/tool?

Check as many media as apply. If the "Other" category is checked, specify which other medium/media can be used to access the method/tool. Provide in the comments section any relevant details (e.g., if "on-line/web-based" identify the website address; if "periodical" specify the name of the journal/magazine, relevant citation information, and note if publication is in restricted circulation or an open access document).

Q3: How can the primary resource document for the method/tool be posted, linked, or referenced on the Registry website?

Check the appropriate box(es) to indicate whether the method/tool can be posted as a PDF hosted on the Registry website, and/or if NCCMT can link to another website where the resource can be accessed, and/or if the citation information can be provided. Reviewers should determine if the resource is available in the public domain or if permission is needed from the developers/authors/publishers to allow NCCMT to post the resource on the Registry website. If permissions are needed, ensure requisite and completed forms are inserted in the hard copy file for this resource (see project binder for section on information/permissions/copyright procedures and communication templates). Provide, in the comments section, relevant details (e.g., location and name of PDF file, website address for link, citation information) for each additional resource.

Q4: Are there any restrictions or conditions on accessing or using the method/tool?

If YES, describe in the comments section the restrictions. Restrictions or conditions might include: ensuring credit is given to originators for use; customization of the original method/tool; copyright restrictions; licensing conditions; specifications regarding who may administer, deliver, participate, and/or analyze data; and follow up requirements or commitments.

Q5: Are there any additional resource materials available for the method/tool?

If YES, for each resource material, specify in the comments section

- title/name of the additional materials
- web-link address, PDF name/location, and/or citation information

- type of material (e.g., instruction manual, evaluation form, journal article, planning materials, promotional materials, pre-survey/event communication messages, analysis manual, guidelines for reporting results, “how-to” manuals)
- format(s) for accessing material [i.e., paper copy, CD or DV, on-line or web-based, periodical, other (specify)]
- if there is a cost to access (if so, include any details e.g., total cost, cost per unit, CDN or US dollars)
- what language(s) the material is available in [i.e., English, French, other (specify)]

If the supplementary material(s) is/are already entered into the Reference Manager database, provide the ID number for each source (specify which database: Registry Search and Screening Database or the main NCCMT Reference Manager database).

If **NO**, proceed to questions 6 and 7 and select the **Not Applicable** option for both.

Q6: How can the additional resource materials be posted, linked, or referenced on the Registry website?

Check the appropriate box(es) to indicate whether the resource material can be posted as a PDF hosted on the Registry website, and/or if NCCMT can link to another website where the resource can be accessed, and/or if the citation information can be provided. If more than one additional resource is available the reviewer should specify the response option(s) that apply to each companion resource identified.

Reviewers should determine if the additional resource material is available in the public domain or if permission is needed from the developers/authors/publishers to allow NCCMT to post the resource on the Registry website. If permissions are needed, ensure requisite and completed forms are inserted in the hard copy file for this resource (see project binder for information/permissions/copyright procedures and communication templates). Provide, in the comments section, relevant details (e.g., location and name of PDF file, website address for link, citation information) for each additional resource.

Q7: Are there any restrictions or conditions on accessing or using the additional resource materials?

If **YES**, describe in the comments section the restrictions/conditions. If restrictions/conditions are specific to certain materials and not others, specify the circumstances for each material separately. See Question 4 above for examples of restrictions/conditions.

SECTION VII: OTHER CONSIDERATIONS/DETAILS

Q1: Are there any other points of interest or relevance that should be noted and/or reported about this resource?

If YES, provide in the comments section relevant details that cannot be captured in any other section of this tool.

SECTION VIII: RESOURCE CONTACT INFORMATION

Q1: 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.

Provide in the comments section 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. (see question 3 below)

Q2: Is the contact person/source able and willing to provide training, support and/or other method/tool related services to users?

If YES, identify in the comments section

- the name of the individual(s)/position(s)/organization(s) if different from the contact person/source (and if different, need contact information)
- which types of support they are willing/able to provide to users (e.g., training, coaching, data analysis, technical assistance; on-site, telephone, email)
- any other relevant details about these services (e.g., cost for securing services)

Q3: Has the contact person/source agreed to have their name and contact information posted on the NCCMT Registry website?

If YES, include in the comments section include details regarding correspondence with the individual/organization (e.g., name of NCCMT staff, date of

conversation/correspondence). In the hard copy file for this resource, include copies of any written correspondence (emails, letters, faxes, etc.).

Check when complete:

- Information entered into Access database [If a reviewer completes a hard copy of the Measurement and Descriptive Information Tool, place a check mark in the box when the information has been transferred over to the Access Database.]