

**MCH Training Program Evaluation**  
**PROJECT DIRECTOR INTERVIEW SCHEDULE**

**General**

- G1. Please describe the organizational unit within which your MCH training project sits in your university. Has this unit changed over time? If yes, how?
  
- G2. What do you consider the greatest strengths of your project? Why? Are there any aspects of your project that are becoming sources of strength?
  
- G3. Do you foresee any challenges to your ability to retain or build on your accomplishments in the future?
  
- G4. What do you consider to be the main weakness(es) of your project? Why? What steps do you think will need to be taken to address those weaknesses?
  
- G5. Are there unique features of your project that you feel should be shared with others?

**Resources**

*[Budgets will be requested from project directors prior to the site visit and will be reviewed by site visit team members.]*

We are interested in the resources that are available to you for your MCH training project and how you combine funds to meet your programmatic objectives. Our first set of questions deals with budget matters. Can you describe for us how the MCH funding fits in with the total MCH program budget? For example:

R1. What proportion of the total budget of the organizational unit within which your project sits (department, school, etc.; see answer to G1 above) is your MCH training grant?

R2. What other resources do you have at your disposal, such as in-kind resources from the university, other grants, clinical income, etc.?

R3. (Ask one of the following two questions:)

The MCH grant appears to be a relatively small part of the total budget. Has this always been the case? How has the funding for the MCH program changed over time?

OR

The MCH grant appears to represent a significant part of the total budget. Have there been any efforts to “institutionalize” the MCH Training Program or to secure funds from elsewhere? Do you foresee this changing in the future?

R4. Do you believe that you have been able to “leverage” other funds as a result of your MCH grant? Please explain. If yes, what evidence supports this? If no, why not? What are the sources of these funds?

R5. As the project director for an MCH training grant, you have some flexibility in allocating funds between supporting faculty and supporting trainees. What influences your decision regarding how to allocate these resources?

R6. How are trainees supported financially in your project (e.g., stipends, graduate assistantships, salaries, etc.)? Are practica or field placements paid?

## Activities

Now we'd like to discuss what you actually do with the funds, that is, what the activities are that the program supports. We have reviewed your most recent continuation application, so we have at least some understanding of your program. But there are many aspects of the program that probably cannot adequately be conveyed in that document. We want to discuss the educational program for the students, the continuing education you provide, and consultation/technical assistance.

### *Educational Program*

Let's begin with the educational program.

- A1. How has the MCH grant affected the educational program (e.g., "MCH courses," clinical training approaches, field experiences) within your department? For example, how many "MCH courses," seminars, or field experiences are offered? How would you define an "MCH course"? How has the number of MCH or interdisciplinary educational programs changed over time?
  
- A2. Has MCH or interdisciplinary content been integrated into courses, clinical experiences, etc. in other departments within the university? If yes, through what means and into which departments?

### *Continuing Education*

Now we'd like to turn to a discussion of continuing education (CE). There are varying interpretations of the term "CE." For purposes of this evaluation, we'd like to define it as follows: "A formal course or lecture for which continuing education units or other educational credits are available to participants."

- A4. Can you describe the MCH continuing education courses that your project offered last year? How many courses did you offer? What type(s) of courses were they? How many students attended? Who provided the continuing education—faculty, students?
  
- A5. What types of MCH-related professionals and groups have received CE as a result of the grant? Do you have any repeat "customers"?

- A6. How do you evaluate the success of your CE courses? What are the courses' strengths and weaknesses?
- A7. How do you determine what CE courses you will offer?
- A8. How do people learn about your CE courses?

*Consultation and Technical Assistance*

We'd like to discuss consultation and technical assistance now. Again, different people define these terms in different ways. For purposes of this evaluation, we'd like to define them as follows: "The provision of technical advice in a range of issues including program development, clinical services, program evaluation, and policy and guidelines formulation." For example, your project may have provided technical advice to state or local health, education, or social service agencies. Or, faculty may serve on advisory boards to formulate new guidelines at the state or national level.

- A9. Can you describe what you consider to be the most significant consultation and/or technical assistance activity of your MCH training project last year? (What was the activity? To whom was it provided? Was there a clear outcome? Did it lead to any changes in policy or practice? Who provided it? How is it related to the MCH grant—i.e., did the grant fund it? Require it?)
- A10. What would you say are the strengths and weaknesses of your efforts in technical assistance/consultation?
- A11. Can you identify any policy changes in children's services or systems that you can attribute to consultative activities of this program? Describe.
- A12. Can you tell us a little about the recipients of consultation and technical assistance: in particular, what types of organizations receive it? What is your

relationship with your state Title V program? Do you see your role as providing assistance to this program?

### **Impact on Trainees**

Now we'd like to talk a bit more about the trainees of the project and how you perceive the impact of the project on them.

I1. (Ask one of the following two questions.)

What do you see as the most significant impact of your training project on trainees? (Ask about knowledge, attitudes or values, application of skills on the job.)

OR

For interdisciplinary (LEND, LEAH, PPC) projects:

Within your project, you support a range of trainees and fellows, some long term and some intermediate or short term. What do you see at the most significant impact of the training project on your long-term trainees/fellows? (Ask about knowledge, attitudes or values, application of skills on the job.)  
How about on trainees/fellows with a shorter experience with your project?

I2. Please describe the types of knowledge, attitudes, and skills that you expect trainees to attain from your project (e.g., analytic skills, clinical skills, interdisciplinary focus).

I3. Do you measure student learning of knowledge, attitudes, or skills? If yes, what methods do you use? Do you use competencies to assess trainee skills?

I4. What type of job changes do graduates of the project typically make? For example, do their positions differ following training?

- I5. Can you identify ways that values important to MCH, such as family-centered care, cultural competence, and interdisciplinary services, are integrated into the work of former trainees?
- I6. Do faculty continue to mentor students after they leave the project? If yes, what is the significance of such continued mentoring?
- I7. How has your project responded to the requirement to train for leadership? How do you measure your success in training for leadership (e.g., have students increased their skills on topics useful for leaders such as public speaking, proposal development, research, etc.)?
- I8. Do you believe that graduates of your project ultimately become leaders in their fields and/or communities? If so, how do they demonstrate such leadership? When does leadership begin to occur?
- I9. What sort of information do you track regarding graduates once they have completed their training?

### **Other Group Impact**

We'd like to turn now to a discussion of other groups who may have benefited from the MCH Training Program.

- O1. First, we'd like to know if you believe that faculty have benefited from the project, and if so, how? For example, have training grant dollars supported faculty development, has the project influenced the type of research conducted or publications produced?
- O2. Do you believe that your training project has helped to improve the system of health care for children in any way? This might include new service delivery models, standards of care, legislation, etc. Please explain.

- O3. Do you believe that other groups, such as professional associations, have been affected by the MCH Training Program in (*insert priority, e.g., adolescent health*)? Please explain.

### **University Impact**

We'd like to discuss the role of your MCH training project within (*name of university*).

- U1. What do you believe would happen if the MCH funding disappeared?
- U2. Next, we'd like to know if you think that the university as a whole has benefited from the grant, and if so, how? {Probe: through new collaborative relationships.}
- U3. To what extent do you believe that your training project is fully integrated into the university through shared courses, positions of leadership within the university, etc.?
- U4. Is there internal and/or external demand for this program? What evidence do you have of this demand?

### **Portfolio Issues**

One of our tasks as we evaluate the MCH Training Program is to provide recommendations to the Maternal and Child Health Bureau (MCHB) regarding their entire investment in MCH training. For the next set of questions, we'd like to turn to a broader view of the MCH Training Program and its future.

- P1. The entire health care system and methods for funding for graduate education have changed dramatically in recent years. Which of these changes, in your

view, might affect how MCHB should prioritize funding for its training projects?

- P2. Do you believe that all of the goals of the MCH Training Program (leadership training, consultation, continuing education) can be effectively met by every training grant? If not, why not? Are there any priority-specific barriers?
  
- P3. Are there other (e.g., better, cheaper) ways to address some of the goals of the MCH Training Program? Are there other models that might work better, such as funding only one center at a higher level, or funding multiple schools at lower levels?
  
- P4. Assuming a static budget for the MCH Training Program, what do you think is the best way to allocate resources between faculty and student support in order to accomplish the program mission?
  
- P5. What suggestions would you make to MCHB for recruiting and retaining racially and ethnically diverse faculty and students?
  
- P6. What process would you recommend for MCHB to continuously assess and evaluate its portfolio? How could we know when specific priorities have met their missions?