

## Introduction

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### **National Heart Disease and Stroke Prevention Program Survey: *Assessing State Programs' Community-Clinical Linkages and Related Technical Assistance Needs***

We would like to thank you for agreeing to complete this survey about community-clinical linkages. Community-clinical linkages help ensure that adults with, or at high risk for, chronic diseases and conditions have access to community resources and support to manage their conditions, avert or delay progression of disease, delay or avoid complications, improve their quality of life and reduce the need for health care. This survey particularly focuses on community-clinical linkages designed to impact the ABCS (Aspirin for people at high risk, Blood pressure control, Cholesterol control, and Smoking cessation).

The primary purpose of this survey is to learn more about state programs' community-clinical linkage efforts and to determine how the Division for Heart Disease and Stroke Prevention (DHDSP) at the Centers for Disease Control and Prevention (CDC) can best support state programs' work in this area. This survey is a component of a 5-year evaluation of the National Heart Disease and Stroke Prevention (NHDSP) Program, which is designed to help identify the NHDSP Program's contribution toward efforts to prevent heart disease and stroke in the United States.

Please note that this survey is different—in purpose and content—from the web-based survey being administered to assess adoption and use of the Institute of Medicine (IOM) report "A Population-Based Policy and Systems Change Approach to Prevent and Control Hypertension."

Please review the informed consent statement and respond to the questions that follow.

Public reporting burden of this collection of information is estimated to average 25 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer, 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-0864).

## Informed Consent Statement

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RTI International is conducting this web-based survey as part of the evaluation of CDC's National Heart Disease and Stroke Prevention Program. The purpose of this survey is to assess state programs' community-clinical linkages and to determine how DHDSP can best support state programs' work in this area.

You are being asked to participate in this survey because you are a program manager in a state (or District of Columbia) heart disease and stroke prevention program. We encourage you to consult with other program staff, such as evaluators, as needed to provide accurate responses. Participation in the survey is voluntary. You may choose to end the survey at any time for any reason, or may choose not to answer any question without penalty. Your responses to survey questions will not impact your program negatively; your program will not be penalized in any way.

You will be asked to identify your state program at the end of the survey and to indicate whether CDC or RTI can follow-up with you to request clarification on your survey responses or additional information about your community-clinical linkage strategies.

The survey should take 25 minutes to complete, and participation in the survey poses few, if any, risks to you. If you have any questions about this survey or the NHDSP evaluation, please contact Dr. LaShawn Curtis, RTI Task Lead, at 770-407-4913 or [lcurtis@rti.org](mailto:lcurtis@rti.org).

**By clicking "next", you give your consent to participate in this survey.**

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## Community-Clinical Linkage Strategies

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Strategy 1 of 5

**\*1. How is your program working, or partnering with others, on linking community pharmacists with health care systems to support risk factor management and/or medication adherence among adults with, or at high risk for, heart disease? Select all that apply:**

- Choose not to answer this question.
- Not working in this area.
- Actively promoting this strategy among partners.
- Collaborating with partners to implement this strategy.
- Sponsoring or conducting an evaluation of this strategy.
- Working in this area in other ways. Please describe below in 150 characters or less:

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## Description of Community Clinical Linkage Implementation & Evaluation

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2. In a few sentences, please briefly describe your program's work in linking community pharmacists with health care systems. For example, who is the target audience for this effort? What are the intended outcomes of this work? What specific contributions has your program made to support this community-clinical linkage initiative? We have provided a sample response as a guide below.

*Sample response: Our program trained key staff at 10 rural health centers in the state on making and tracking clinical referrals to community resources for self management of heart disease. We have provided the health centers with a list of community resources for self-management. Approximately 2150 patients with cardiovascular disease are served across the 10 centers we are working with. This initiative is intended to improve blood pressure control and cholesterol among adult patients with cardiovascular disease served at rural health centers.*

3. Please provide the following reach information about health care sites you may be working with on this community-clinical linkage strategy. Estimates are acceptable if exact numbers are unknown—you may also enter "0" or "unknown" as applicable.

Type of health care sites our program is working with on this community-clinical linkage strategy (e.g. rural health centers):

Number of these health care sites in the state:

Number of these health care sites our program is working with on this community-clinical linkage strategy:

4. Please provide the following reach information about community organizations you may be working with on this community-clinical linkage strategy. Estimates are acceptable if exact numbers are unknown—you may also enter "0" or "unknown" as applicable.

Type of community organizations our program is working with on this community-clinical linkage strategy (e.g. YMCAs):

Number of these community organizations in the state:

## TA Needs Related to Implementing & Evaluating Community-Clinical Linkage Strategies

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12. How useful have the following CDC tools and trainings been in your program's efforts to implement community-clinical linkage strategies? Please select one response per row:

	Not useful	Somewhat useful	Useful	Very useful	We have not used this tool/participated in this training	N/A (not working on community-clinical linkages)
A. Community health worker policy brief	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
B. ABCS strategies guidance document	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
C. Trainings at DHDSP grantee sessions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
D. Other tool/training	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Please describe the "Other tool/training" in 50 characters or less:

## Contact Information

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18. Please select your state:

19. We would like to contact some state representatives to follow-up on responses regarding community-clinical linkage efforts and/or technical assistance needs. If you are willing to be contacted for further discussion, please provide your contact information below:

Name:

Email address:

Telephone:

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## Survey Submission

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Thank you for your participation!

If you have any questions about this survey or the NHDSP evaluation, please contact Dr. LaShawn Curtis, RTI Task Lead, at 770-407-4913 or [lcurtis@rti.org](mailto:lcurtis@rti.org).

**Please submit your responses by clicking "done". You may return to the survey any time before the survey closes on [date to be entered following OMB approval] to view or change your responses.**

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