

WISEWOMAN Year 4 Evaluation Survey: Part I

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Informed Consent

Form Approved
OMB No. XXXX-XXXX
Expiration date: X/XX/20XX

Informed Consent Statement

ICF International (ICF) is conducting this survey as part of the evaluation of the CDC's WISEWOMAN program. The purpose of this survey is to:

- Conduct an assessment of all 21 programs to explore program characteristics that may be associated with specific program activities related to WISEWOMAN goals
- Provide CDC with findings and recommendations about potential relationships between program characteristics and specific activities related to WISEWOMAN goals

Participation in the survey is voluntary; you may choose to end the survey at any time for any reason with no penalty and may choose not to answer any questions at any time for any reason.

Your participation in the survey poses few, if any risks to you and you may choose not to participate in the survey for any reason. ICF evaluation staff will know which program has provided responses. This will allow us to follow up with programs should any responses require clarification. This also will allow us to link data from this survey to Part II of this year's Web survey, data collected from prior evaluation surveys, program documents, and MDEs. All responses provided to CDC will be in aggregate—across all programs—and without linking specific responses to the programs that provide them.

Your answers will help CDC assess how well WISEWOMAN is able to meet its objectives, and your responses will help CDC work with program staff to improve the program in the most sustainable manner moving forward.

If you have any questions about this survey, or evaluation, please contact Mr. Lawrence Scholl, ICF Senior Project Manager, at Phone: (404) 433-0735, E-mail: lscholl@icfi.com.

By clicking "Next" you give your informed consent to proceed with the survey. If you do not give your consent, please click "Exit this survey" at the top-right corner of your screen.

Public reporting burden of this collection of information is estimated to average 35 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).

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WISEWOMAN Year 4 Evaluation Survey: Part I

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Introduction



We would like to thank you for agreeing to complete this survey about the WISEWOMAN program. This survey, Part I, will focus on frequency and types of training at screening sites; frequency and types of training of LSI providers; and specific characteristics of LSI providers and LSI delivery. Part II of the survey will be sent to you in approximately 1 month and will focus on strategies to address the needs of priority populations; program administration and quality assurance; and rescreen and referral practices.

For this evaluation year, we will incorporate responses to this survey with data from prior evaluation surveys, program documents, and MDEs. This survey seeks to gather both recent and comprehensive information for certain aspects of your program above and beyond what information your program already shares with CDC.

Responses provided to this survey are considered those of individual WISEWOMAN programs—not those of individuals—and all responses provided will be maintained securely by ICF International, CDC's contractor for this evaluation.

Additionally, summary findings from the evaluation will be provided to programs by the end of the calendar year.

We would like to thank you for agreeing to complete this initial survey, and ask that you respond to the questions that follow.

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- Section B: Frequency and Types of Training of LSI Providers (Questions 26-48)
- Section C: Characteristics of LSI Providers and LSI Delivery (Questions 49-53)
- Closing Section

IMPORTANT. PLEASE READ: (Your answers to questions will NOT be saved until you click the "Next" button at the bottom of any given page. If you would like to close out the survey and resume later, please click the "Next" button on the bottom of the page you are working on before closing the survey)

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Section A. Frequency and Types of Training of Screening Sites

UNLESS OTHERWISE INDICATED, THESE QUESTIONS RELATE TO YOUR CURRENT PROGRAM ACTIVITIES. PLEASE ANSWER ALL QUESTIONS ABOUT YOUR CURRENT ACTIVITIES, PERFORMED DURING THE PERIOD OF THE CURRENT FUNDING OPPORTUNITY ANNOUNCEMENT (DP08-804, JUNE 30, 2008-PRESENT).

The CDC WISEWOMAN Program is interested in learning about the various training activities conducted by funded programs to train staff providing WISEWOMAN services in your program's **screening sites**. The WISEWOMAN Program acknowledges that your funded program may operate differently than others. Responses to these questions will not impact your funded program negatively, and programs will not be penalized in any way.

1. Considering the screening sites that provide WISEWOMAN services for your program, please estimate the percentage of women screened at the following types of screening sites that have been contracted with your program during program years 1-4. If none, enter "0."

- a. Local public health agencies
- b. Federally qualified health centers
- c. Community health clinics
- d. Free clinics
- e. OB-GYN private provider practices
- f. Hospitals
- g. Tribal health clinics or medical centers
- h. Family planning clinics

2. On average, how often do you provide training to your program staff that provide WISEWOMAN services in your program's screening sites?

- a. Weekly
- b. Monthly
- c. Every two months
- d. Quarterly
- e. Two to three times per year
- f. Annually
- Other (please specify)

3. On average, how many times per year do you provide training focused on the provision of clinical screening services to your WISEWOMAN screening sites?

- a. 0 times
- b. 1 time
- c. 2 times
- d. 3 times
- e. 4 times
- f. More than 4 times
- Other (please specify)

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Section A. Frequency and Types of Training of Screening Sites (Continued)

[Redacted]

4. How does your funded program typically conduct training focused on the provision of clinical screening services for your WISEWOMAN screening sites? (Select all that apply)

- a. Telephone or conference call
- b. In person at provider site
- c. In person at State or Tribal Health Department
- d. Webcast or other Internet-based format
- Other (please specify)

[Text input box for other training methods]

5. What method(s) do you use to assess training participation for trainings focused on the provision of clinical screening services? (select all that apply)

- a. Post-training evaluation questionnaires administered to training participants—NOT satisfaction surveys
- b. Training participant satisfaction surveys
- c. Training participant attendance sheets
- d. Questionnaires administered to WISEWOMAN participants—NOT satisfaction surveys
- e. WISEWOMAN participant satisfaction surveys
- f. Chart reviews
- g. Site visits to clinics
- h. None
- Other (please specify)

[Text input box for other assessment methods]

Clicking either of these buttons below will ensure your answers are saved.

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Closing



These are all of the questions that we have for now. Thank you for taking the time to complete this survey today. We will send you the second survey, Part II, in approximately one month. Should you have any questions about this survey, future surveys, or the evaluation overall, please contact Mr. Lawrence Scholl, ICF International Senior Project Manager, at Phone: (404) 433-0735, E-mail: lscholl@icfi.com.

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Your answers will help CDC assess how well WISEWOMAN is able to meet its objectives, and your responses will help CDC work with program staff to improve the program in the most sustainable manner moving forward.

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WISEWOMAN Year 4 Evaluation Survey: Part II

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Introduction



We would like to thank you for agreeing to complete this survey about the WISEWOMAN program. This survey, Part II, will focus on strategies to address the needs of priority populations; program administration and quality assurance; and rescreen and referral practices.

For this evaluation year, we will incorporate responses to this survey with data from prior evaluation surveys, program documents, and MDEs. This survey seeks to gather both recent and comprehensive information for certain aspects of your program above and beyond what information your program already shares with CDC.

Responses provided to this survey are considered those of individual WISEWOMAN programs—not those of individuals—and all responses provided will be maintained securely by ICF International, CDC's contractor for this evaluation.

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- Section B: Program Administration and Quality Assurance (Questions 6-14)
- Section C: Rescreen and Referral Practices (Questions 15-20)
- Closing Section

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Section A. Strategies to Address Needs of Priority Populations

UNLESS OTHERWISE INDICATED, THESE QUESTIONS RELATE TO YOUR CURRENT PROGRAM ACTIVITIES. PLEASE ANSWER ALL QUESTIONS ABOUT YOUR CURRENT ACTIVITIES, PERFORMED DURING THE PERIOD OF THE CURRENT FUNDING OPPORTUNITY ANNOUNCEMENT (DP08-804, JUNE 30, 2008-PRESENT).

The CDC WISEWOMAN Program is interested in learning about how your program serves a culturally diverse population and strategies you use to address the needs of these populations. The WISEWOMAN Program acknowledges that your funded program may operate differently than others. Responses to these questions will not impact your funded program negatively, and programs will not be penalized in any way.

1. What kinds of strategies has your program used to identify or develop materials for the culturally-diverse WISEWOMAN population served by your program? (Select all that apply)

- a. Use recruitment materials culturally-tailored to specific priority populations
- b. Use materials culturally-tailored to specific priority populations for delivery of risk reduction counseling
- c. Use resources culturally-tailored to specific priority populations to provide information about cardiovascular health
- d. Create our own culturally-tailored materials for use in direct service delivery
- e. Work with partners (e.g., university partners, community partners) to develop or identify culturally tailored materials
- f. Use translated materials for delivery of risk reduction counseling
- g. Use translated materials to provide information about cardiovascular health
- h. Create translated materials for use in direct service delivery
- i. Work with partners (e.g., university partners, community partners) to develop or identify materials translated materials
- j. None
- Other (please specify)

2. What strategies has your program used to establish relationships within the community to address needs for WISEWOMAN priority population participants? (Select all that apply)

- a. Establish relationships with community leaders who work with specific priority populations
- b. Establish partnerships with community partners that target activities for specific priority populations
- c. Talk with community partners to consider how WISEWOMAN could better address the needs of women from specific priority populations
- d. Establish partnerships with community partners physically located in areas easily accessible for women from specific priority populations (e.g., YMCA located in or near a neighborhood where women from a specific priority population reside)
- e. Contract with screening sites located in rural areas
- f. Contract with screening sites located in impoverished areas
- g. Contract with screening sites that serve predominantly ethnic minorities
- h. Identify and contract with screening sites that employ bilingual providers and staff providing WISEWOMAN services.
- i. Talk with staff providing WISEWOMAN services in your program's screening sites to consider how WISEWOMAN could better address the needs of women from specific priority populations
- j. None
- Other (please specify)

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Section B. Program Administration and Quality Assurance

[Redacted]

The CDC WISEWOMAN Program is interested in learning about how your program contracts with screening sites and how you connect payment of services rendered to screening site performance. The WISEWOMAN Program acknowledges that your funded program may operate differently than others. Responses to these questions will not impact your funded program negatively, and programs will not be penalized in any way.

6. Do you require your WISEWOMAN screening sites to submit complete client data in order to receive reimbursement for WISEWOMAN services provided?

- a. Yes
- b. No
- Other (please explain)

[Text input box for "Other (please explain)"]

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Section B. Program Administration and Quality Assurance (Continued)

7. Does your program conduct a review—automated or by hand—of the data to identify inaccuracies before screening sites are reimbursed?

- a. Yes
- b. No

8. What is the average duration of your contractual agreements with your screening sites?

- a. Less than 1 year
- b. 1 year
- c. 2 years
- d. 3 years
- e. More than 3 years
- Other (please explain)

9. Over the past year, how many screening sites have you terminated contracts with?

- a. 0
- b. 1
- c. 2
- d. 3
- e. 4
- f. More than 4

Clicking either of these buttons below will ensure your answers are saved.

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