NATIONAL COMPREHENSIVE CANCER CONTROL PROGRAM SURVEY

SURVEY INTRODUCTION

The Centers for Disease Control and Prevention (CDC) is conducting an evaluation of the National Comprehensive Cancer Control Program, (NCCCP). The purpose of this evaluation is to understand the extent to which comprehensive cancer control (CCC) programs are implementing the six NCCCP Priorities, to evaluate existing evaluation capacity building tools, and to revise tools as needed to support the implementation of NCCCP Priorities.

This survey is a component of the NCCCP evaluation. It is designed to provide CDC with a better understanding of grantees' efforts to implement the NCCCP Priorities and related technical assistance needs. The survey also gathers information about the usefulness of the Comprehensive Cancer Control Branch (CCCB) Program Evaluation Toolkit for developing and implementing CCC evaluation plans.

Thank you for participating in this survey. Please click "next" to review the informed consent statement and then proceed through the survey questions.

CONSENT

RTI International is conducting this web-based survey on behalf of CDC as part of the National Comprehensive Cancer Control Program evaluation. The purpose of this survey is to gather information about grantees' efforts to implement the NCCCP Priorities and related technical assistance needs. The survey also gathers information about the usefulness of the CCCB Program Evaluation Toolkit.

You are being asked to participate in this survey because you are a Program Director of a National Comprehensive Cancer Control Program. We encourage you to consult with other program staff as needed to provide accurate responses. All survey responses will be considered those of CCC programs, not of individual respondents.

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 <u>not</u> impact your program negatively; your program will <u>not</u> be penalized in any way.

Your feedback is extremely important. Your responses to all questions will be kept in a secure manner. We anticipate that it will take approximately 30 minutes to complete this survey.

It is not necessary to complete the survey all at one time. Responses are saved automatically. So, if you need to return to the survey at a later time to complete it or to modify responses, simply exit the survey by closing your browser window. Then, use the survey link provided to you by e-mail to return to the survey any time before the survey closes on [Date] to view, change, or add responses. <u>NOTE</u>: once you click the "done" button on the submission page, your responses will be considered final, and you will not be able to modify them.

If you have any questions about this survey or the NCCCP evaluation, please contact Dr. LaShawn Curtis, RTI Task Lead, at 770-407-4913 or lcurtis@rti.org.

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

I. PROGRAM DESCRIPTION
In this brief section, you will be asked to provide your state/tribe/territory and to indicate service on other chronic disease program partnerships.

1. Please select your state/tribe/territory.
    [drop down list]

2. On which state chronic disease coalitions/partnerships do the CCC Program Director, or other CCC staff, serve? Select all that apply.
    - Cancer
    - Tobacco
    - Physical activity/nutrition/obesity
    - Cardiovascular health
    - Diabetes
    - Asthma
    - Arthritis
    - Oral health
    - Coordinated chronic disease
    - Don't know
    - Choose not to answer
    - Other- please describe: [text field]

II. NCCCP PRIORITIES

In 2009 and 2010, CDC developed six NCCCP Priorities to guide the work of NCCCP grantees:

(1) Emphasize primary prevention of cancer;
(2) Support early detection and treatment activities;
(3) Address public health needs of cancer survivors;
(4) Implement policies, systems, and environmental changes to guide sustainable cancer control;
(5) Promote health equity as it relates to cancer control; and
(6) Demonstrate outcomes through evaluation.

In the summer of 2010, the six NCCCP Priorities were shared with the CCC Program Directors, and they were asked to integrate and emphasize the NCCCP Priorities in their updated cancer plans. The six NCCCP Priorities were also incorporated in the new five-year coordinated cooperative agreement, Cancer Prevention and Control Programs for State, Territorial and Tribal Organizations (CDC-RFA-DP12-1205).

This section of the survey has two main components: A) questions about your program's efforts to implement and evaluate-the NCCCP Priorities, and B) Technical assistance related to implementing and evaluating the NCCCP Priorities.

NOTE: As illustrated in the example responses for questions about your program's efforts to implement the priorities, it is understood that interventions are often implemented in collaboration

with other chronic disease programs, state agencies and coalition partners. Please report on CCC-led and collaborative interventions.

A.   **Description of Efforts to Implement and Evaluate the NCCCP Priorities**

Priority 1: Emphasize Primary Prevention of Cancer

3.   Is your program implementing an evidence-based policy, systems, or environmental change (PSE) intervention to <u>increase tobacco free living</u>?
   - Don't know
   - Choose not to answer
   - No
   - Yes

   ➢   **Skip Pattern: If response to Q3 is no, don't know, or choose not to answer, skip to Q8.**

4.   In a few sentences, please describe your intervention to <u>increase tobacco free living</u>.

   _____

   Sample response:

   In partnership with the state tobacco prevention and control program, our CCC coalition's tobacco free living subcommittee is educating decision makers in colleges and universities throughout the state about the public health significance of comprehensive tobacco free campus policies. To date, members for our CCC subcommittee and the state tobacco prevention and control program have assisted two colleges serving a total of 45,000 students with adopting comprehensive tobacco free campus policies.
   _____

   [text field]

5.   Does this intervention address health disparities?
   - Don't know
   - Choose not to answer
   - No
   - Yes- please describe (you may enter "don't know" or "choose not to answer"): [text field]

6.   Has this intervention been evaluated?
   - Don't know
   - Choose not to answer
   - No, but there are plans to evaluate.
   - No, and there are currently no plans to evaluate this effort.
   - Yes- please briefly describe the evaluation methods and any results; including process, PSE change, economic or health outcomes (you may enter "don't know" or "choose not to answer"): [text field]

7. Is your program implementing another evidence-based policy, systems, or environmental change (PSE) intervention to <u>increase tobacco free living</u>?
   - Don't know
   - Choose not to answer
   - No
   - Yes

   ➢ **Skip Pattern: If response to Q7 is yes, repeat questions 4-7 (a total of three interventions can be reported under each focus area).**

8. Is your program implementing an evidence-based policy, systems, or environmental change (PSE) intervention to <u>improve nutrition & physical activity and reduce obesity in worksites</u>?
   - Don't know
   - Choose not to answer
   - No
   - Yes

   ➢ **Skip Pattern: If response to Q8 is no, don't know, or choose not to answer, skip to Q13.**

9. In a few sentences, please describe your intervention to <u>improve nutrition & physical activity and reduce obesity in worksites</u>.

   Sample response:
   Our state's coordinated chronic disease prevention and control program is implementing a learning collaborative with 20 worksites in the SW region of the state. CCC staff and two business leaders from our coalition have worked with the coordinated chronic disease collaborative developers to ensure that cancer prevention and screening are included as examples of worksite wellness benefits. The 20 businesses participating in the collaborative employ approximately 100,000 adults. As part of the year-long collaborative, businesses will report changes to worksite wellness policies and services.

   [text field]

10. Does this intervention address health disparities?
    - Don't know
    - Choose not to answer
    - No
    - Yes- please describe (you may enter "don't know" or "choose not to answer"): [text field]

11. Has this intervention been evaluated?
    - Don't know
    - Choose not to answer
    - No, but there are plans to evaluate.
    - No, and there are currently no plans to evaluate this effort.
    - Yes- please briefly describe the evaluation methods and any results; including process, PSE change, economic or health outcomes (you may enter "don't know" or "choose not to answer"): [text field]

12. Is your program implementing another evidence-based policy, systems, or environmental change (PSE) intervention to improve nutrition & physical activity and reduce obesity in worksites?
    - Don't know
    - Choose not to answer
    - No
    - Yes

    ➢ **Skip Pattern: If response to Q12 is yes, repeat questions 9-12 (a total of three interventions can be reported under each focus area).**

13. Is your program implementing an evidence-based policy, systems, or environmental change (PSE) intervention to improve nutrition & physical activity and reduce obesity in schools?
    - Don't know
    - Choose not to answer
    - No
    - Yes

    ➢ **Skip Pattern: If response to Q13 is no, don't know, or choose not to answer, skip to Q17.**

14. In a few sentences, please describe your intervention to improve nutrition & physical activity and reduce obesity in schools.

    _____

    Sample response:

    As part of our Department of Health's coordinated chronic disease program efforts, our CCC program provides 2% of our funding and technical assistance related to cancer prevention to a school-based healthy eating program. The coordinated chronic disease program partners with local school boards in the Western region, which has the highest rates of childhood obesity in the state, and nutritionists of Wellness University to implement "Pack a Healthy Snack" in 50 middle schools. The program includes a health communication campaign and quarterly nutrition workshops with healthy food tastings to encourage students to bring fruits and vegetables to school instead of sweets and junk foods. The intervention has the potential to reach approximately 25,000 students across the 50 participating middle schools.

    _____

    [text field]

15. Does this intervention address health disparities?
    - Don't know
    - Choose not to answer
    - No
    - Yes- please describe (you may enter "don't know" or "choose not to answer"): [text field]

16. Has this intervention been evaluated?
    - Don't know
    - Choose not to answer
    - No, but there are plans to evaluate.
    - No, and there are currently no plans to evaluate this effort.
    - Yes- please briefly describe the evaluation methods and any results; including process, PSE change, economic or health outcomes (you may enter "don't know" or "choose not to answer"): [text field]

17. Is your program implementing another evidence-based policy, systems, or environmental change (PSE) intervention to improve nutrition & physical activity and reduce obesity in schools?
    - Don't know
    - Choose not to answer
    - No
    - Yes

    ➢ **Skip Pattern: If response to Q17 is yes, repeat questions 14-17 (a total of three interventions can be reported under each focus area).**

18. Is your program implementing an evidence-based policy, systems, or environmental change (PSE) intervention to improve nutrition & physical activity and reduce obesity in communities?
    - Don't know
    - Choose not to answer
    - No
    - Yes

    ➢ **Skip Pattern: If response to Q18 is no, don't know, or choose not to answer, skip to 23.**

19. In a few sentences, please describe your intervention to <u>improve nutrition & physical activity and reduce obesity</u> in communities.

_____

Sample response:

As an extension of our health department's Community Transformation Grant (CTG) programming, CCC staff members are promoting joint use agreements to increase opportunities for physical activity communities. Under this effort, CCC staff have served on CTG working groups and contributed to the development of joint use promotional and technical assistance materials. CCC staff promote and support the development of joint use agreements in 20 schools districts we previously partnered with to conduct sun safety campaigns. To date 50 of 260 schools in the district have established new or expanded joint use agreements that allow community members to access school grounds after hours to engage in physical activity.

[text field]

20. Does this intervention address health disparities?
   - Don't know
   - Choose not to answer
   - No
   - Yes- please describe (you may enter "don't know" or "choose not to answer"): [text field]

21. Has this intervention been evaluated?
   - Don't know
   - Choose not to answer
   - No, but there are plans to evaluate.
   - No, and there are currently no plans to evaluate this effort.
   - Yes- please briefly describe the evaluation methods and any results; including process, PSE change, economic or health outcomes (you may enter "don't know" or "choose not to answer"): [text field]

22. Is your program implementing another evidence-based policy, systems, or environmental change (PSE) intervention to <u>improve nutrition & physical activity and reduce obesity in communities</u>?
   - Don't know
   - Choose not to answer
   - No
   - Yes

   ➢ **Skip Pattern: If response to Q22 is yes, repeat questions 19-22 (a total of three interventions can be reported under each focus area).**

23. Is your program implementing an evidence-based policy, systems, or environmental change (PSE) intervention to <u>promote sun safety</u>?
    - Don't know
    - Choose not to answer
    - No
    - Yes
    ➢ **Skip Pattern: If response to Q23 is no, don't know, or choose not to answer, skip to Q28.**

24. In a few sentences, please describe your intervention to <u>promote sun safety</u>.

    _____

    Sample response:

    Our program made small awards to 10 of the 18 community aquatic centers throughout the state to provide POOL COOL sun safety education. POOL COOL will be taught by pool staff during swim breaks at participating aquatic centers. POOL COOL aquatic centers also post signage encouraging the use of sunglasses, sunscreen, and hats and remind patrons to re-apply sunscreen throughout the day over their public address systems. Six funded sites have increased the number of shade structures in the center. This initiative has the potential to reach over 300,000 residents across the 10 funded aquatic centers.
    _____

     [text field]

25. Does this intervention address health disparities?
    - Don't know
    - Choose not to answer
    - No
    - Yes- please describe (you may enter "don't know" or "choose not to answer"): [text field]

26. Has this intervention been evaluated?
    - Don't know
    - Choose not to answer
    - No, but there are plans to evaluate.
    - No, and there are currently no plans to evaluate this effort.
    - Yes- please briefly describe the evaluation methods and any results; including process, PSE change, economic or health outcomes (you may enter "don't know" or "choose not to answer"): [text field]

27. Is your program implementing another evidence-based policy, systems, or environmental change (PSE) intervention to <u>promote sun safety</u>?
    - Don't know
    - Choose not to answer
    - No
    - Yes

> **Skip Pattern: If response to Q27 is yes, repeat questions 24-27 (a total of three interventions can be reported under each focus area).**

28. Is your program implementing an evidence-based policy, systems, or environmental change (PSE) intervention to <u>increase vaccination for HPV and/or HBV</u>?
   - Don't know
   - Choose not to answer
   - No
   - Yes

> **Skip Pattern: If response to Q28 is no, don't know, or choose not to answer, skip to Q32.**

29. In a few sentences, please describe your intervention to <u>increase vaccination for HPV and/or HBV</u>.

   _____

   Sample response:

   Our CCC program has partnered with the Department of Health's immunization program to implement a social media campaign designed to raise awareness of the causes of HPV and the importance of vaccination. The campaign is targets girls and women ages 13- 25 As a complementary activity, we worked with local high schools in the largest county in the state to administer a curriculum that educates students about HPV and to provide HPV testing according to evidence-based guidelines. The school based intervention has the potential to reach approximately 25,000 students.

   _____

   [text field]

30. Does this intervention address health disparities?
   - Don't know
   - Choose not to answer
   - No
   - Yes- please describe (you may enter "don't know" or "choose not to answer"): [text field]

31. Has this intervention been evaluated?
   - Don't know
   - Choose not to answer
   - No, but there are plans to evaluate.
   - No, and there are currently no plans to evaluate this effort.
   - Yes- please briefly describe the evaluation methods and any results; including process, PSE change, economic or health outcomes (you may enter "don't know" or "choose not to answer"): [text field]

32. Is your program implementing another evidence-based policy, systems, or environmental change (PSE) intervention to <u>increase vaccination for HPV and/or HBV</u>?
   - Don't know
   - Choose not to answer
   - No
   - Yes

➢ **Skip Pattern: If response to Q32 is yes, repeat questions 29-32 (a total of three interventions can be reported under each focus area).**

33. Is your program implementing an evidence-based policy, systems, or environmental (PSE) change intervention to <u>reduce exposure to artificial UV light sources by children and adolescents</u>?
    - Don't know
    - Choose not to answer
    - No
    - Yes

➢ **Skip Pattern: If response to Q33 is no, don't know, or choose not to answer, skip to Q37.**

34. In a few sentences, please describe your intervention to <u>reduce exposure to artificial UV light sources by children and adolescents</u>.

    _____

    Sample response:

    Our state recently passed a ban on use of UV tanning beds by minors under 18. However, monitoring and enforcement is a challenge because tanning facilities are not currently regulated by a state office. In an effort to encourage compliance with the law, we are conducting an environmental scan to identify tanning salons and informing salons of the law and penalties for non-compliance. Our program coordinator also serves on the advisory committee responsible for establishing enforcement and monitoring procedures.

    [text field]

35. Does this intervention address health disparities?
    - Don't know
    - Choose not to answer
    - No
    - Yes- please describe (you may enter "don't know" or "choose not to answer"): [text field]

36. Has this intervention been evaluated?
    - Don't know
    - Choose not to answer
    - No, but there are plans to evaluate.
    - No, and there are currently no plans to evaluate this effort.
    - Yes- please briefly describe the evaluation methods and any results; including process, PSE change, economic or health outcomes (you may enter "don't know" or "choose not to answer"): [text field]

37. Is your program implementing another evidence-based policy, systems, or environmental (PSE) change intervention to <u>reduce exposure to artificial UV light sources by children and adolescents</u>?
    - Don't know
    - Choose not to answer
    - No
    - Yes

> ➢ **Skip Pattern: If response to Q37 is yes, repeat questions 34-37 (a total of three interventions can be reported under each focus area).**

Priority 2: Support Early Detection and Treatment Activities

38. Is your program implementing a Patient Centered Medical Home Initiative?
    - Don't know
    - Choose not to answer
    - No
    - Yes

> ➢ **Skip Pattern: If response to Q38 is no, don't know, or choose not to answer, skip to Q44.**

39. What are the cancer care aims of the PCMH initiative? Please select all that apply:
    - Increase the use of cancer screening
    - Support appropriate treatment
    - Provide survivorship supports
    - Coordinate end of life care
    - Other (please specify)

40. In a few sentences, please describe your Patient Centered Medical Home initiative.

_____

Sample response:

In an effort to address the burden of chronic diseases, including cancer, among persons with low income, our health department's coordinated chronic disease program partnered with the state primary care association to implement a Patient Centered Medical Home Collaborative (PSMC) in 2012. The purpose of the learning collaborative is to assist 10 Federally Qualified Health Centers (FQHCs) in selected communities with obtaining NCQA recognition as a PCMH. Participating FQHCs serve approximated 115,000 patients. The learning collaborative includes monthly distance learning sessions, coaching by expert consultants, and technical assistance for data reporting. Our CCC program is funding the development and delivery of the cancer module of the collaborative curriculum, and clinicians from our CCC coalition serve as instructors for some of the learning sessions.

_____

[text field]

41. Does this initiative address health disparities?
    - Don't know
    - Choose not to answer
    - No
    - Yes- please describe (you may enter "don't know" or "choose not to answer"): [text field]

42. Has this initiative been evaluated?
    - Don't know

- Choose not to answer
- No, but there are plans to evaluate.
- No, and there are currently no plans to evaluate this effort.
- Yes- please briefly describe the evaluation methods and any results; including process, PSE change, economic or health outcomes (you may enter "don't know" or "choose not to answer"): [text field]

43. Is your program implementing another Patient Centered Medical Home initiative?
- Don't know
- Choose not to answer
- No
- Yes

➢ **Skip Pattern: If response to Q43 is yes, repeat questions 39-43 (a total of three interventions can be reported under each focus area).**

44. Is your program implementing a patient navigation or community health worker initiative?
- Don't know
- Choose not to answer
- No
- Yes

➢ **Skip Pattern: If response to Q43 is no, don't know, or choose not to answer, skip to Q50.**

45. What are the aims of the patient navigation or community health worker initiative? Please select all that apply:

- Increase the use of cancer screening
- Support appropriate treatment
- Address financial barriers to screening and/or care
- Provide emotional support to cancer patients and/or caregivers
- Provide other supports (e.g., transportation, child care, elder care, language translation) to cancer patients
- Improve access to cancer clinical trials
- Increase participation in cancer clinical trials
- Other- please describe: [text field]

46. In a few sentences, please describe your patient navigation or community health worker intervention.

Sample response:

Our CCC program is working with our Breast and Cervical Early Detection (B&C) and Colorectal Cancer Control Programs to increase the number of trained community health workers (CHWs) in the state. This training intervention is designed to ensure that community health workers have knowledge, skills, tools and resources required to augment state-based screening activities. To date, 50 community health workers have completed the training program, and the B&C program is working with 35 of those trained CHWs.

[text field]

47. Does this intervention address health disparities?
    - Don't know
    - Choose not to answer
    - No
    - Yes- please describe (you may enter "don't know" or "choose not to answer"): [text field]

48. Has this intervention been evaluated?
    - Don't know
    - Choose not to answer
    - No, but there are plans to evaluate.
    - No, and there are currently no plans to evaluate this effort.
    - Yes- please briefly describe the evaluation methods and any results; including process, PSE change, economic or health outcomes (you may enter "don't know" or "choose not to answer"): [text field]

49. Is your program implementing another patient navigation or community health worker initiative?
    - Don't know
    - Choose not to answer
    - No
    - Yes

    ➢ **Skip Pattern: If response to Q49 is yes, repeat questions 45-49 (a total of three interventions can be reported under each focus area).**

Priority 3: Address Public Health Needs of Cancer Survivors

50. Is your program establishing community-clinical linkages to support cancer control self-management among cancer survivors? This may include:
    - developing evidence-based information on cancer survivorship;

- efforts to bridge public health and clinical communities to enhance awareness of post-cancer clinical care for survivors and to define an appropriate medical home for cancer survivors following treatment of their cancer;
- activities to enhance collaboration with federal and non-federal partners to implement cancer survivorship education and awareness activities;
- supporting the dissemination of resources developed by the National Cancer Survivorship Resource Center to cancer survivors.

- Don't know
- Choose not to answer
- No
- Yes

➢ **Skip Pattern: If response to Q50 is no, don't know, or choose not to answer, skip to Q55.**

51. In a few sentences, please describe your work in this area.

Sample response:

We partnered with our state affiliate of the American Society of Clinical Oncology (ASCO) to provide workshops on Survivorship Care Planning at the state ASCO annual meeting. The workshop included a panel session with members of our CCC coalition who have successfully used web-based tools, as well as tools developed by local oncology practices, to enhance survivorship care planning. As a result of the workshop, two medical centers have reported enhancements to their survivorship care planning practice. These systems changes have the potential to improve compliance with post-treatment screening and lifestyle change recommendations for approximately 1,500 adult cancer survivors in the coming year.

[text field]

52. Does this initiative address health disparities?
- Don't know
- Choose not to answer
- No
- Yes- please describe (you may enter "don't know" or "choose not to answer"): [text field]

53. Has this effort been evaluated?
- Don't know
- Choose not to answer
- No, but there are plans to evaluate.
- No, and there are currently no plans to evaluate this effort.

- Yes- please briefly describe the evaluation methods and any results; including process, PSE change, economic or health outcomes (you may enter "don't know" or "choose not to answer"): [text field]

54. Is your program establishing other community-clinical linkages to support cancer control self-management among cancer survivors?

- Don't know
- Choose not to answer
- No
- Yes

➢ **Skip Pattern: If response to Q54 is yes, repeat questions 51-54 (a total of three interventions can be reported under each focus area).**

B. **TA Related to Implementing and Evaluating the NCCCP Priorities**

55. What challenges have you experienced in your efforts to implement each of the NCCCP Priorities?

Priority 1: Emphasize Primary Prevention of Cancer	[text field]
Priority 2: Support Early Detection and Treatment Activities	[text field]
Priority 3: Address Public Health Needs of Cancer Survivors	[text field]
Priority 4: Implement Policy, Systems, and Environmental (PSE) Changes To Guide Sustainable Cancer Control	[text field]
Priority 5: Promote Health Equity as it Relates to Cancer Control	[text field]
Priority 6: Demonstrate Outcomes Through Evaluation	[text field]

56. How has CDC supported your program's efforts to implement the NCCCP Priorities? Please select all that apply.

NCCCP Priorities	In-person NCCCP training or presentation	Phone or web-based NCCCP training	NCCCP guidance documents	Individualized technical assistance	Referrals to other sources of support (e.g. , other CCC programs or national partners)	Information provided via CDC's NCCCP web site	Not applicable (my program is not working on this Priority)	Don't know/ Choose not to answer
Priority 1: Emphasize Primary Prevention of Cancer								
Priority 2: Support Early Detection and Treatment Activities								

Priority 3: Address Public Health Needs of Cancer Survivors								
Priority 4: Implement Policy, Systems, and Environmental (PSE) Changes To Guide Sustainable Cancer Control								
Priority 5: Promote Health Equity as it Relates to Cancer Control								
Priority 6: Demonstrate Outcomes Through Evaluation								

57. Please describe any additional ways CDC has supported your program's efforts to implement the NCCCP Priorities.
    [(you may enter "don't know" or "choose not to answer")text field]

58. What kind of technical assistance is needed to support your program's efforts to implement the NCCCP priorities?
    [(you may enter "don't know" or "choose not to answer")text field]

59. What additional resources are needed to support your program's efforts to implement the NCCCP Priorities?
    [(you may enter "don't know" or "choose not to answer")text field]

III. EVALUATION TOOLKIT
   This final survey section focuses on the CCCB Evaluation Toolkit. The Toolkit, which was released in June 2010, is a "how to" guide for planning and implementing evaluation activities in cancer prevention and control programs. We are interested in learning more about utility and usefulness of this capacity building tool.

60. Have you submitted the most recent version of your CCC program evaluation plan to CDC?
    • Don't know
    • Choose not to answer
    • No
    • Yes

61. What is the date of the most recent version of your CCC program evaluation plan?
    [date field(you may enter "don't know" or "choose not to answer")]

62. Are you aware of the CCCB Evaluation Toolkit?

- Don't know
- Choose not to answer
- No
- Yes

➢ **Skip Pattern: If response to Q62 is yes, skip to Q64.**
➢ **Skip Pattern: If response to Q62 is no, don't know, or choose not to answer, skip to Q63.**

63. Would you like to receive information about the CCCB Evaluation Toolkit from your CDC Project Officer?
- Don't know
- Choose not to answer
- No
- Yes

➢ **Skip Pattern: Go to submission page after Q63.**

64. How did you get a copy (hardcopy or electronic) of the CCCB Evaluation Toolkit?
- I am aware of the toolkit, but have not received a copy
- I requested and received a copy from CDC
- I received a copy from CDC without submitting a request
- I requested and received a copy from a colleague
- I received a copy from a colleague without submitting a request
- I came across the toolkit while browsing CCC-related websites
- Don't know
- Choose not to answer
- Other [text field]

65. How are you using the CCCB Evaluation Toolkit? Please check all that apply.
- I have not used the Toolkit and do not plan to use it.
- I have not yet used the Toolkit, but plan to use it.
- I have used it to develop or revise our program logic model.
- I have used it to develop our evaluation plan.
- I have used it to assess the quality of our evaluation plan.
- I have used it to update our evaluation plan.
- I have used it to communicate with key stakeholders about NCCCP evaluation expectations.
- Don't know
- Choose not to answer
- Other- please describe: [text field]

➢ **Skip Pattern: If response to Q65 I have not used the Toolkit and do not plan to use it OR I have not yet used the Toolkit, but plan to use it, go to submission page.**

66. How would you rate the CCCB Evaluation Toolkit on ease of use?
- Very user-friendly
- User-friendly

- Somewhat user-friendly
- Not user-friendly
- Don't know
- Choose not to answer

67. How would you rate the CCCB Evaluation Toolkit on usefulness for evaluation plan development?
    - Very useful
    - Useful
    - Somewhat useful
    - Not useful
    - Don't know
    - Choose not to answer

68. Which components of the Toolkit have been most useful for you?
    [3 text fields (you may enter "don't know" or "choose not to answer")]

69. Please describe how the Toolkit has benefited your program.
    [text field (you may enter "don't know" or "choose not to answer")]

Survey Submission

Thank you for your participation!

If you have any questions about this survey or the NCCCP evaluation, please contact Dr. LaShawn Curtis, RTI Task Lead, at 770-407-4913 or lcurtis@rti.org.

Please submit your responses by clicking "done." Clicking "done" indicates that your responses are final, and you will not be able to modify responses after submission.

Following survey submission, you will be routed to CDC's National Comprehensive Cancer Control Program website where you can access success stories, the CCC Branch Evaluation Toolkit, and other technical assistance resources.