

Appendix G-1.

National Quitline Data Warehouse Quitline Services Questionnaire (on-line survey)

Upon receipt of OMB approval:

- The burden estimate will be updated from 7-10 minutes to 20 minutes (the revised estimate)
- The expiration date will be updated as specified in the Notice of Action

Windows Internet Explorer browser interface showing the address bar with the URL: <http://responsecenter.cdc.gov/submit/submit.asp?Project=QUITLINE&QID=10>. The browser title is "Title - Windows Internet Explorer". The menu bar includes File, Edit, View, Favorites, Tools, and Help. The status bar at the bottom shows "Done" and "Trusted sites | Protected Mode Off". The system tray on the right displays the date and time: 7:33 AM, 8/19/2012.

Form Approved
OMB No 0920-0855
Exp Date 08/31/2012

National Quitline Data Warehouse Quitline Services Questionnaire

Public reporting burden of this collection of information is estimated to average 7 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 (0920-0855)

This is the first page that appears when states and territories link to the NQDW Quitline Services Online Survey.

http://ophisurvey.cdc.gov/mlWeb/mlWeb.dll

File Edit View Favorites Tools Help

http://ophisurvey.cdc.gov/mlWeb/mlWeb.dll

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Please respond to the following questions about the services your quinine offered. All of the questions are on activities for Quarter 2, 2012 (April 1, 2012 - June 30, 2012). PLEASE NOTE: if you do not have data for certain categories, please enter ".999999" in those fields. In some case, the survey will not progress unless you enter something.

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Done Trusted sites | Protected Mode Off 100% 8:55 AM 8/17/2012

Sample of NQDW Quinine Services Online Survey question as seen by participants.

The above screen lists the specific dates for which data should be entered.



3. Did your quilline ask the following question on the NQDOW Intake Survey during Quarter 2, 2012 (April 1-2012-June 30, 2012)?

"In the past three months, did you hear about 1-800-QUIT-NOW from any advertisements with smokers telling personal stories and tips about living with health problems?"

- Yes
- No
- Unsure

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3a. If your quilline asked the following question on the NQDW Inlake Survey during Quarter 2, 2012 (April 1, 2012- June 30,2012) please provide the information requested in the table below (a-e). Please respond to each item with "-999999" if your quilline did not ask this question during Quarter 2, 2012.

Do not use commas in your entries (i.e., enter "1,000" as "1000").

"In the past three months, did you hear about 1-800-QUIT-NOW from any advertisements with smokers telling personal stories and tips about living with health problems?"

- a. Number of callers with a "yes" response
- b. Number of callers with a "no" response
- c. Number of callers with a "unsure" response
- d. Number of callers with a missing response
- e. Total number of callers who were asked the question above

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4. Does your quiltline have a sustainability plan?

- Yes
- No

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5. Please provide the days and hours of service of your quiline for the following categories of service (Days and hours of service):

**For example, "Monday - Friday, 8:30am - 5:00pm"

Counseling service available:

Live pick up of incoming calls (may or may not have counseling services available):

Voicemail / answering service pick up of calls:

6. Is your quiline closed on holidays?

- Yes
- No

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7.i. How many total direct calls came into the quitline during Quarter 2, 2012 (April 1, 2012 and June 30, 2012)?

Note: Direct calls are your quitline's total incoming calls, not referrals that generate an outbound call from the quitline. Please report on number of calls, not number of callers/unique individuals. This should include proxy callers, wrong numbers, prank calls, and other calls to the quitline that are not accounted for in these categories.

Do not use commas in your entries (i.e., enter "10,000" as "10000")

- a. Calls Answered live
- b. Calls Went to voice mail
- c. Calls Hung up or abandoned
- d. Other Calls (e.g., listening to taped messages, etc.)
- e. Total direct calls (E=A+B+C+D)

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8. Quilines use many types of promotions and referral networks to increase their reach to tobacco users. Please select all of the sources that generated referrals to your quiline in Quarter 2, 2012 (April 1, 2012 and June 30, 2012).

Note: Referrals are client referrals to the quiline from health professionals, other intermediaries or services (including Web sites) that trigger a proactive call to the client initiated by the quiline.

- Fax referral system
- Community organization networks
- Online advertising (paid)
- Web referrals (links from Web sites, not paid ads)
- Central call center ("triage") separate from the quiline
- Other. Please describe:

9.i. How many referrals did the quiline receive during Quarter 2, 2012 (April 1, 2012 and June 30, 2012)?

- A. Fax referrals
- B. Other referrals (e.g., web referrals, "click to call," online ads, etc.)
- C. Total referrals (C=A+B)

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10. How many TOBACCO USERS who called or were referred to the quitline received the services listed below during Quarter Quarter 2, 2012 (April 1, 2012 and June 30, 2012)?

Note: Report only on those who received service for the first time during this quarter. For the purposes of this question, we define "received" service as anyone who received quitline self-help materials and/or began at least one counseling call with the quitline and/or received medications through the quitline.

- Do not use commas in your entries (i.e., enter "10,000" as "10000").
- a. Self-help materials only with no counseling
- b. Counseling provided (began at least one session) by phone defined as a caller-centered, person-tailored, in-depth, motivational interaction that occurs between cessation specialist/counselor/coach and caller
- c. Counseling provided (began at least one session) face-to-face, individual/group
- d. Counseling provided (began at least one session) by web
- e. Counseling provided (began at least one session) by OTHER mechanism
- f. Medications provided (NRT or other FDA-approved medications for tobacco cessation) through the quitline.
- g. TOTAL PROVIDED EITHER PHONE COUNSELING OR MEDICATIONS OR BOTH (Note: this will likely not total the sum of b and f because many of those who receive medications will also have received counseling. This is the number that will be used to calculate treatment reach using standard calculation.)

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11. Please list your quitline's population(s) with disproportionate burden of tobacco use and provide the number of tobacco users in the target population who called or were referred to the quitline who received the services listed below for the first time in Quarter 2, 2012 (April 1, 2012 and June 30, 2012). You can enter from one to five targeted populations.

Note: Report only on those who received services for the first time. For the purposes of this question, we define 'received' service as anyone who received quitline self-help materials and/or began at least one counseling call with the quitline and/or received medications through the quitline.

Advance to the next page to fill in this information.

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11.i.a. Population(s) with disproportionate burden of tobacco use.

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11.ii.a. Please provide the number of tobacco users in the target population who called or were referred to the quitline who received the services listed below for the first time in Quarter 2, 2012 (April 1, 2012 and June 30, 2012).

- a. Self-help materials only with no counseling
- b. Counseling provided (began at least one session) by phone defined as a caller-centered, person-tailored, in-depth, motivational interaction that occurs between cessation specialists/counselor/coach and caller
- c. Counseling provided (began at least one session) face-to-face, individual/group
- d. Counseling provided (began at least one session) by web
- e. Counseling provided (began at least one session) by OTHER mechanism
- f. Medications provided (NRT or other FDA-approved medications for tobacco cessation) through the quitline

g. TOTAL PROVIDED EITHER PHONE COUNSELING OR MEDICATIONS OR BOTH (Note: this will likely not total the sum of b and f because many of those who receive medications will also have received counseling. This is the number that will be used to calculate treatment reach using standard calculation.)

11.iii.a. Would you like to enter information about another population(s) with disproportionate burden of tobacco use?

- Yes
- No

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12. Does your quilline use a translation service (e.g., AT&T) when providing counseling?

- Yes
- No

13. Does your quilline use counselors who provide quilline services in languages other than English?

- Yes
- No

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15. Many quitlines have eligibility criteria for receiving services based on state of residence, age, insurance status, being a member of a special population or readiness to quit. Are there eligibility criteria for receiving proactive counseling through your quitline?
Note: Counseling here refers to a caller-centered, person-tailored, in-depth, motivational interaction that occurs between cessation specialist/counselor/coach and caller.

- Yes
- No, there are no restrictions on receiving counseling

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16. The eligibility criteria to receive proactive counseling include:

(Select all that apply)

- Resident of state
- Age: ____ years or older (i.e. for 18 years and older enter "18")
- No insurance
- Underinsured
- Medicaid
- Medicare
- Private insurance holders
- Length of time quit (please specify the eligibility criteria): _____
- Readiness to quit (please provide your quitline's definition of readiness to quit): _____
- Special population (please specify which populations): _____
- Other (please specify): _____

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17.i. Do you provide different levels of proactive counseling services for different groups (i.e., one proactive call for everyone but 3 calls for the Medicaid population)?

Note: Many quillines have different levels of criteria for different types of services which may be based in-part on budgetary pressures. This question is designed to address this issue. Please reply fully so we can understand the different types of eligibility for the different levels of service.

- Yes
- No

17.ii. EVERYONE NEEDS TO ANSWER THIS QUESTION.

Even those who answered "no" to the previous question: "Do you provide different levels of proactive counseling services for different groups (i.e., one proactive call for everyone but 3 calls for the Medicaid population). For those who answered "no", please enter the following information:
Number of sessions: "X", Eligibility criteria: "All callers"

Please specify number of sessions and eligibility criteria for as many groups as needed in the format "Number of session: _____ Eligibility Criteria: _____"

18. If your quilline addressed eligibility criteria for proactive counseling in other ways not reported in Question 16-17, please specify:

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Quilines address quitting medications in a variety of ways. Questions 19-53 pertain to how your quiline provided medications.

19. Did your quiline provide free quitting medications to clients?

- Yes
- No

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20. Did your quitline provide free nicotine patches to clients?

- Yes
- No

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21. What criteria made a caller eligible to receive free nicotine patches from the quitline? Select all that apply.

- Resident of state _____
- Age: ___ years or older (i.e. for 18 years and older enter "18") _____
- Uninsured _____
- Underinsured _____
- Medicaid _____
- Medicare _____
- Private insurance holder _____
- Enrollment in counseling _____
- Special population (please specify which populations): _____
- Medical conditions _____
- Readiness to quit _____
- Limited supply - orders filled on first come / first served basis _____
- Geographic area (please specify): _____
- Research study criteria _____
- Other criteria (please specify): _____

22. How many weeks of free nicotine patches per quit attempt did your quitline provide to clients?

Note: if your quitline provides varying amounts of free nicotine patches depending on eligibility criteria, please specify your eligibility criteria (i.e., "Number of weeks of nicotine patches per quit attempt: _____ Eligibility Criteria: _____").

23. Was there a limit to the number of times a caller could receive free nicotine patches in one year?

- Yes (please specify): _____
- No _____

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