### **ATTACHMENT 4A: CRCCP Clinic-Level Collection Instrument (Screenshots)**

### **Welcome Screen**



#### **CRCCP Clinic-level Data Reporting**

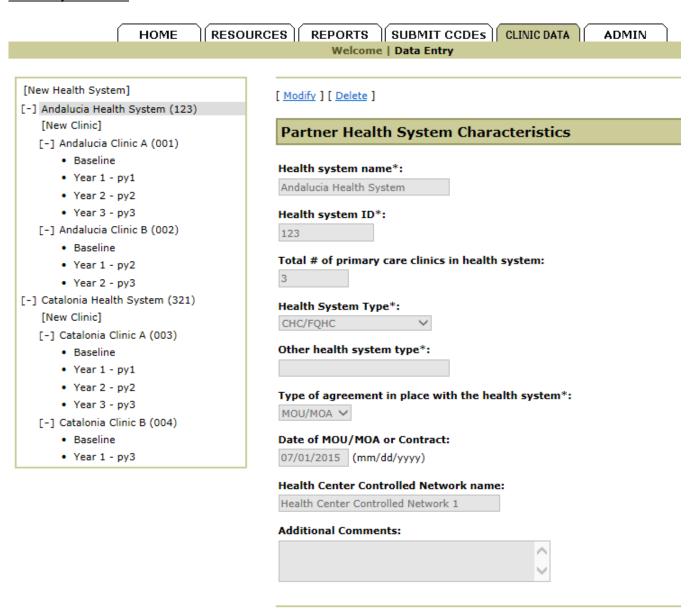
OMB No. 0920-1074 Expiration Date: ##/####

Thank you for using the crccp.org website to report data on your partner health systems and clinics. You will use the 'Data Entry' menu to provide baseline and annual information on each clinic, including characteristics of the health system and clinic population, CRC screening rates, and evidence-based interventions and supporting strategies used to increase CRC screening.

If you have any questions or problems with the site, please contact technical support at support@crccp.org.

Public reporting burden of this collection of information is estimated to average 30 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 (0920-1074).

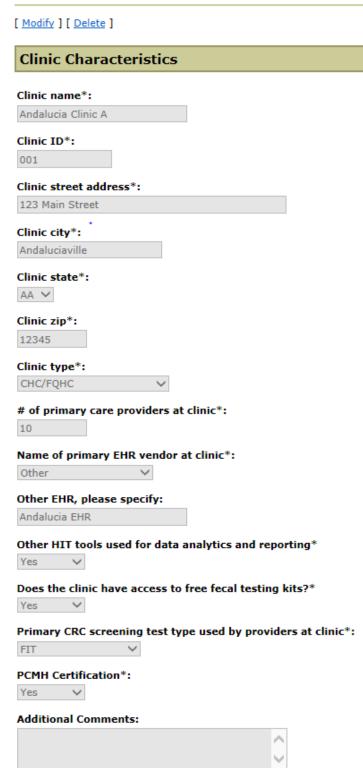
### **Health System Data**



[ Modify ] [ Delete ]

### **Clinic Data - Characteristics**

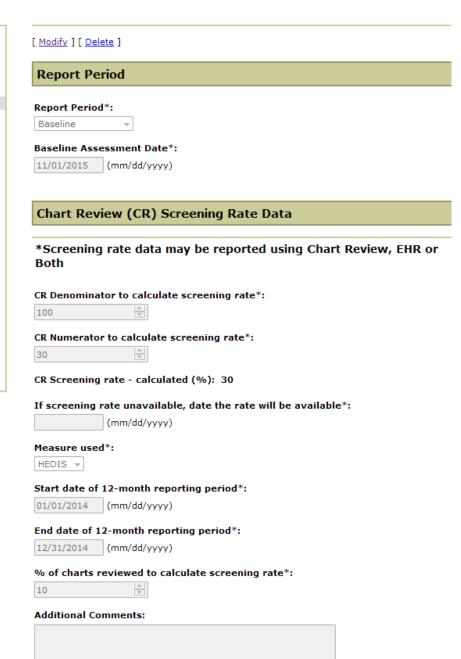




# **Clinic Patient Population Characteristics** # of Patients, Gender, Insurance, Status, Ethnicity Total # of clinic patients, age 50-75\*: % of patients, age 50-75, men: % of patients, age 50-75, women: % of patients, age 50-75, uninsured: % of patients, age 50-75, Hispanic: % of patients, age 50-75, Non-Hispanic: Race % of patients, age 50-75, White: % of patients, age 50-75, Black or African American: % of patients, age 50-75, Asian: % of patients, age 50-75, Native Hawaiian or other Pacific Islander: % of patients, age 50-75, American Indian or Alaskan Native: % of patients, age 50-75, More than one race: **Additional Comments:** [ Modify ] [ Delete ]

### Clinic Data - Baseline





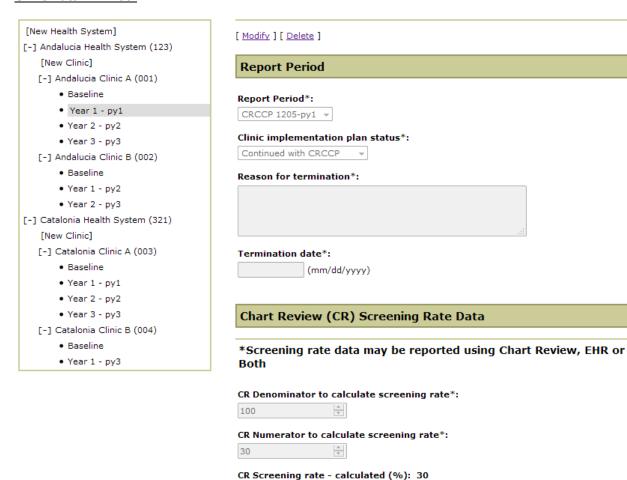
### Electronic Health Records (EHR) Screening Rate Data

\*Screening rate data may be reported using Chart Review, EHR or Both EHR Denominator to calculate screening rate\*: 1000 EHR Numerator to calculate screening rate\*: 300 EHR Screening rate - calculated (%): 30 If screening rate unavailable, date the rate will be available\*: (mm/dd/yyyy) Measure used\*: HEDIS ▼ Start date of 12-month reporting period\*: 01/01/2014 (mm/dd/yyyy) End date of 12-month reporting period\*: 12/31/2014 (mm/dd/yyyy) How confident are you in the accuracy of the EHR-calculated screening rate? Very confident EHR rate reporting source\*: Clinic EHR **Additional Comments:** 

## Priority Evidence-based Interventions (EBI) and Supportive Activities (SA)

Provider reminder system in place at baseline*:  No  Provider reminder system in place at baseline*:  No  Provider assessment and feedback in place at baseline*:  No  Reducing structural barriers in place at baseline*:  Yes  Supportive Activities  Small media in place at baseline*:  Yes  Professional development/provider education in place at baseline*:  No  Health information technology in place at baseline*:  Yes  If HIT activities in place, briefly describe HIT activities*:  Provider training on EHR, Develop CRC related reports  If community health workers in place at baseline*:  No  Vif community health workers (CHWs) in place, # of FTE CHWs*:  Patient navigation in place at baseline*:  Yes  Vif patient navigation in place, # of FTE patient navigators*:  1.50  Other CRC-related strategies currently in place (optionally report up to 3):  Quality improvement activities in clinic		
Provider reminder system in place at baseline*:  No Provider assessment and feedback in place at baseline*:  No Reducing structural barriers in place at baseline*:  Yes  Supportive Activities  Small media in place at baseline*:  Yes Professional development/provider education in place at baseline*:  No Provider training on technology in place at baseline*:  Yes  If HIT activities in place, briefly describe HIT activities*:  Provider training on EHR, Develop CRC related reports  Community health workers in place at baseline*:  Yes  Provider training on EHR, Develop CRC related reports  Community health workers in place at baseline*:  Yes  Provider training on place at baseline*:  Yes  Provider training on EHR, Develop CRC related reports  Community health workers in place at baseline*:  Yes  Provider training on place at baseline*:  Yes  Provider training on EHR, Develop CRC related reports  Community health workers in place at baseline*:  Yes  Provider training on EHR, Develop CRC related reports  Community health workers in place at baseline*:  Yes  Provider training on EHR, Develop CRC related reports  Community health workers in place at baseline*:  Yes  Provider training on EHR, Develop CRC related reports  Community health workers in place at baseline*:  Yes  Provider training on EHR, Develop CRC related reports  Yes  Provider training on EHR, Develop CRC related reports  Community health workers in place at baseline*:  Yes  Provider training on EHR, Develop CRC related reports  Yes  Provider training on EHR, Develop CRC related reports  Yes  Provider training on EHR, Develop CRC related reports  Yes  Provider training on EHR, Develop CRC related reports  Yes  Yes  Yes  Yes  Yes  Yes  Yes  Y	Priority EBIs	
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### Clinic Data - Annual



If screening rate unavailable, date the rate will be available\*:

(mm/dd/yyyy)

Start date of 12-month reporting period\*:

End date of 12-month reporting period\*:

% of charts reviewed to calculate screening rate\*:

01/01/2015 (mm/dd/yyyy)

12/31/2015 (mm/dd/yyyy)

Measure used\*:

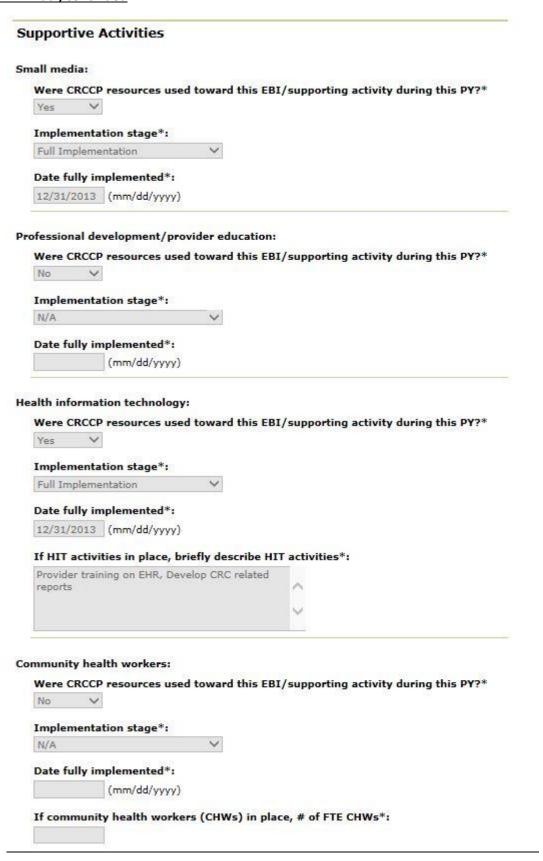
### Electronic Health Records (EHR) Screening Rate Data

\*Screening rate data may be reported using Chart Review, EHR or EHR Denominator to calculate screening rate\*: EHR Numerator to calculate screening rate\*: EHR Screening rate - calculated (%): 30 If screening rate unavailable, date the rate will be available\*: (mm/dd/yyyy) Measure used\*: HEDIS ▼ Start date of 12-month reporting period\*: 01/01/2015 (mm/dd/yyyy) End date of 12-month reporting period\*: 12/31/2015 (mm/dd/yyyy) How confident are you in the accuracy of the EHR-calculated screening rate? Very confident EHR rate reporting source\*: Clinic EHR **Policy Data** Clinic CRC screening policy\*:

### Priority Evidence-based Interventions (EBI) and Supportive Activities (SA) **Priority EBIs** Patient reminder system: Were CRCCP resources used toward this EBI/supporting activity during this PY?\* Implementation stage\*: N/A Date fully implemented\*: (mm/dd/yyyy) Provider reminder system: Were CRCCP resources used toward this EBI/supporting activity during this PY?\* Implementation stage\*: Development Date fully implemented\*: (mm/dd/yyyy) Provider assessment and feedback: Were CRCCP resources used toward this EBI/supporting activity during this PY?\* Implementation stage\*: N/A Date fully implemented\*: (mm/dd/yyyy) Reducing structural barriers: Were CRCCP resources used toward this EBI/supporting activity during this PY?\* Implementation stage\*:

Full Implementation

Date fully implemented\*: 12/31/2013 (mm/dd/yyyy)



### Clinic Data - Annual, continued

## Patient navigation: Were CRCCP resources used toward this EBI/supporting activity during this PY?\* Yes Implementation stage\*: Full Implementation Date fully implemented\*: 12/31/2013 (mm/dd/yyyy) If patient navigation in place, # of FTE patient navigators\*: 1.5 If patient navigation in place, # of clients navigated: Other CRC Activity 1: Description of other CRC Activity 1: Quality improvement activities in clinic Were CRCCP resources used toward this EBI/supporting activity during this PY? Yes Implementation stage:

Full Implementation

12/31/2013

Date fully implemented:

(mm/dd/yyyy)

### Clinic Data - Annual, continued

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Were CRCCP resources used toward	this EBI/supporting activity during this PY?
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Implementation stage:	
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