

Attachment 4b:
CRCCP Clinic-Level Data Dictionary

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*Item type: *=Required field; B=reported at Baseline and updated as needed; A=Reported Annually; COMP=Computed field*

2/26/2016

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**Colorectal Cancer Control Program (CRCCP)
Clinic-level Data Dictionary**

Item #	Item Type	CRCCP Data Item	Definition	Field Type	Response Options
<p>Sections 1-4 contain descriptive data reported at BASELINE assessment for each clinic where interventions are planned. Descriptive data in sections 2-4 may be updated over time as needed to complete missing information or to reflect a substantial change. New clinics may be added throughout the FOA period.</p> <p>Section 1: RECORD IDENTIFICATION FIELDS Section 2: PARTNER HEALTH SYSTEM CHARACTERISTICS Section 3: CLINIC CHARACTERISTICS Section 4: CLINIC PATIENT POPULATION CHARACTERISTICS</p>					
Section 1: RECORD IDENTIFICATION FIELDS					
1a	B*	Grantee code	Two-character Grantee Code (as assigned by CDC)	Dropdown	GP= Great Plains LU= LA state Univ WU= WV Univ UC= Univ of Chicago PR= Univ of PR US= Univ of SC UW= Univ of WI or State Postal code
1b	B*	Baseline Assessment Date	Date the clinic baseline data assessment was completed and represents the starting point for tracking clinic-level implementation activities and screening rates.	Date	MM/DD/YYYY
Section 2: PARTNER HEALTH SYSTEM CHARACTERISTICS					

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2a	B*	Health system name	Name of the partner health system under which the clinic (intervention site) operates.	Character	Free text 100 character limit
2b	B*	Health system ID	Unique three-digit identification code for the partner health system assigned by the grantee. Start with "001" and continue assigning numbers sequentially as health system partnerships are established.	Numeric	001-999
2c	B	Total # of primary care clinics in health system	The total number of primary health care clinics that operate under the partner health system, including those serving specific populations such as pediatric clinics. A clinic is defined as a location where primary care services are delivered. Clinics may also be referred to as "sites" or "practices".	Numeric	1-9999999
2d	B*	Health System Type	Type of health system partner	Dropdown	CHC/FQHC Academic health system Local health department Health Plan Clinic Network Hospital Other
2e	B*	Other health system type	Specify the "other organization type" of the health system partner	Character	Free text 100 character limit
2f	B*	Type of agreement in place with the health system	Type of formal agreement the grantee currently has in place with the partner health system.	Dropdown	MOU/MOA Contract Other None
2g	B	Date of MOU/MOA or Contract	Date the formal agreement was finalized between the grantee and partner health system.	Date	MM/DD/YYYY
2h	B	Health Center Controlled Network name	For Community Health Centers only, name of the Health Center Controlled Network with which they partner, if any.	Character	Free text 100 character limit
2i	B	Section2 Comments	Optional comments for Section2.	Character	Free text 200 character limit

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**Colorectal Cancer Control Program (CRCCP)
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Section 3: CLINIC CHARACTERISTICS					
3a	B*	Clinic name	Name of the primary care clinic/site. A clinic is defined as a location where primary care services are delivered. Clinics may also be referred to as "sites" or "practices".	Character	Free text 100 character limit
3b	B*	Clinic ID	Unique three-digit identification code for the clinic assigned by the grantee. Start with "001" and continue assigning codes sequentially as clinics are recruited.	Character	001-999
3c	B*	Clinic street address	Street address for the clinic. If the street address is more than two lines, use a comma for separation.	Character	Free text 100 character limit
3d	B*	Clinic city	City of the clinic.	Character	Free text 50 character limit
3e	B*	Clinic state	Two-letter state postal code for the clinic.	Dropdown	Various
3f	B*	Clinic zip	5-digit zip code for the clinic.	Numeric	00001-99999
3g	B*	Clinic type	Type of clinic.	Dropdown	CHC/FQHC CHC/FQHC look alike Hospital Other primary care facility
3h	B*	# of primary care providers at clinic	Total number of primary care providers who are delivering services at the clinic. Primary care providers include physicians (e.g., internists, family practice, ob/gyn), nurses, nurse practitioners, and physician assistants. Do not include specialty providers in this number. Report on individuals, not FTEs, which may include attending physicians, fellows and residents. Leave blank if unknown.	Numeric	1-9999
3i	B*	Name of primary EHR vendor at clinic	Name of the primary electronic health record vendor used by the clinic or health system.	Dropdown	Allscripts Cerner eClinicalWorks Epic

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					GE Centricity Greenway-Intergy Greenway-SuccessEHS NextGen Other None
3j	B	Other EHR, please specify	Name of the 'other' electronic health record vendor(s) used by the clinic or health system.	Character	Free text 100 character limit
3k	B*	Other HIT tools used for data analytics and reporting	Report if clinic is using other HIT tools (such as EHR overlays) to perform data analytics and reporting to monitor and improve screening.	Dropdown	Yes No Unknown
3l	B*	Does the clinic have access to free fecal testing kits?	Indicates whether the clinic is able to obtain free fecal testing kits (FOBT or FIT) that may be provided to low income patients. This includes kits that may be made available by the laboratory used by the clinic.	Dropdown	Yes No Unknown
3m	B*	Primary CRC screening test type used by providers at clinic	Indicates the type of CRC screening test used most often by clinic providers.	Dropdown	FOBT-guaiac FIT Colonoscopy referral Varies by provider Unknown
3n	B*	PCMH Certification	Indicates whether the clinic is currently recognized, certified or accredited as a Patient Centered Medical Home (PCMH). National recognition and accreditation programs include the: National Committee for Quality Assurance (NCQA) PCMH Recognition, Accreditation Association for Ambulatory Health Care (AAAHC) Medical Home On-site Certification, The Joint Commission (TJC) Designation For Your Primary Care Home, and URAC Patient-Centered Medical Home Accreditation.	Dropdown	Yes No Unknown
3o	B	Section3 Comments	Optional comments for Section3.	Character	Free text 200 character limit

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**Colorectal Cancer Control Program (CRCCP)
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Section 4: CLINIC PATIENT POPULATION CHARACTERISTICS (# of Patients, Gender, Insurance Status, Ethnicity)					
4a	B*	Total # of clinic patients, age 50-75	The total number of patients aged 50-75 who have had at least one medical visit to the clinic in the last complete calendar year (January-December). If unavailable, it is acceptable to report on a similar age range used by the clinic for measuring screening rates (e.g. 51-74 used by FQHCs/CHCs for UDS screening rate).	Numeric	1-9999999
4b	B	% of patients, age 50-75, men	The percent of the " Total # of clinic patients, 50-75 " who are men. Leave blank if unknown. It is acceptable to report the percent based on the total clinic population if unknown for those age 50-75.	Numeric	00-100
4c	B	% of patients, age 50-75, women	The percent of the " Total # of clinic patients, 50-75 " who are women. Leave blank if unknown. It is acceptable to report the percent based on the total clinic population if unknown for those age 50-75.	Numeric	00-100
4d	B	% of patients, age 50-75, uninsured	The percent of the " Total # of clinic patients, 50-75 " who do not have any form of public or private health insurance. Leave blank if unknown. It is acceptable to report the percent based on the total clinic population if unknown for those age 50-75.	Numeric	00-100
4e	B	% of patients, age 50-75, Hispanic	The percent of the " Total # of clinic patients, 50-75 " who are Hispanic or Latino (i.e., persons of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin, regardless of race). Leave blank if unknown. It is acceptable to report the percent based on the total clinic population if unknown for those age 50-75.	Numeric	00-100
4f	B	% of patients, age 50-75, Non-Hispanic	The percent of the " Total # of clinic patients, 50-75 " who are not Hispanic or Latino. Leave blank if unknown. It is acceptable to report the percent based on the total clinic population if unknown for those age 50-75.	Numeric	00-100
(Race)					

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Item #	Item Type	CRCCP Data Item	Definition	Field Type	Response Options
4g	B	% of patients, age 50-75, White	The percent of the " Total # of clinic patients, 50-75 " who are White/Caucasian (i.e., persons having origins in any of the original peoples of Europe, the Middle East, or North Africa.) Leave blank if unknown. It is acceptable to report the percent based on the total clinic population if unknown for those age 50-75.	Numeric	00-100
4h	B	% of patients, age 50-75, Black or African American	The percent of the " Total # of clinic patients, 50-75 " who are Black or African American (i.e., persons having origins in any of the black racial groups of Africa). Leave blank if unknown. It is acceptable to report the percent based on the total clinic population if unknown for those age 50-75.	Numeric	00-100
4i	B	% of patients, age 50-75, Asian	The percent of the " Total # of clinic patients, 50-75 " who are Asian (i.e., persons having origins in any of the original peoples of the Far East, Southeast Asia, or the Indian subcontinent including, for example, Cambodia, China, India, Japan, Korea, Malaysia, Pakistan, the Philippine Islands, Thailand, and Vietnam). Leave blank if unknown. It is acceptable to report the percent based on the total clinic population if unknown for those age 50-75.	Numeric	00-100
4j	B	% of patients, age 50-75, Native Hawaiian or other Pacific Islander	The percent of the " Total # of clinic patients, 50-75 " who are Native Hawaiian or other Pacific Islander (i.e., persons having origins in any of the original peoples of Hawaii, Guam, Samoa, or other Pacific Islands). Leave blank if unknown. It is acceptable to report the percent based on the total clinic population if unknown for those age 50-75.	Numeric	00-100
4k	B	% of patients, age 50-75, American Indian or Alaskan Native	The percent of the " Total # of clinic patients, 50-75 " who are American Indian or Alaskan Native (i.e., persons having origins in any of the original peoples of North and South America, including Central America, and who maintain tribal affiliation or community attachment). Leave blank if unknown. It is acceptable to report the percent based on the total clinic population if unknown for those age 50-75.	Numeric	00-100
4l	B	% of patients, age 50-75, More than one race	The percent of the " Total # of clinic patients, 50-75 " who are More than one race (i.e., persons having origins in two or more of the federally designated racial categories). Leave blank if unknown. It is acceptable to report the percent based on the total clinic population if unknown for those age 50-75.	Numeric	00-100

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Item #	Item Type	CRCCP Data Item	Definition	Field Type	Response Options
4m	B	Section4 Comments	Optional comments for Section6.	Character	Free text 200 character limit
<p>Sections 5-9 contain longitudinal data reported at BASELINE and ANNUALLY (as indicated) through the end of the FOA for each participating clinic.</p> <p>Section 5: REPORT PERIOD</p> <p>Section 6: CHART REVIEW (CR) SCREENING RATE DATA</p> <p>Section 7: ELECTRONIC HEALTH RECORDS (EHR) SCREENING RATE DATA</p> <p>Section 8: POLICY DATA</p> <p>Section 9: PRIORITY EVIDENCE-BASED INTERVENTIONS (EBIs) and SUPPORTIVE ACTIVITIES (SAs)</p>					
Section 5: REPORT PERIOD					
5a	B*, A*	Report Period	<p>Reporting period represented in sections 5-9 where longitudinal data items are reported.</p> <p>Baseline data are reported once as new clinics are recruited to participate in CRCCP activities and prior to the start of CRCCP supported implementation activities. .</p> <p>Annual data are reported at the end of each program year (py)</p> <p>Note that the screening rate reported annually is a retrospective rate that uses the same 12-month period as the baseline screening rate.</p>	Dropdown	<p>Baseline</p> <p>CRCCP 1205-py1</p> <p>CRCCP 1205-py2</p> <p>CRCCP 1205-py3</p> <p>CRCCP 1205-py4</p> <p>CRCCP 1205-py5</p>
5b	A*	Clinic implementation plan status	<p>Indicates if CRCCP activities with this clinic continue or have been terminated for the duration of the FOA with no further implementation or screening rate monitoring activities planned or to report.</p> <p><u>Continued with CRCCP</u>: Partnership with clinic continued this program year with CRCCP</p>	Dropdown	<p>Continued with CRCCP</p> <p>Sustained without CRCCP</p> <p>Terminated</p>

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			<p>resources used to implement activities and monitor screening rates.</p> <p><u>Sustained without CRCCP</u>: Sustained partnership with clinic continued this program year where activities are institutionalized without CRCCP resources and screening rates are monitored and reported.</p> <p><u>Terminated</u>: Terminated partnership with clinic with no implementation or screening rate monitoring activities conducted this program year or planned through the end of the FOA.</p> <p><i>If not 'terminated', skip to 6a.</i></p>		
5c	A*	Reason for termination	Reason that implementation and screening rate monitoring activities have been terminated.	Character (skip)	Free text 200 character limit
5d	A*	Termination date	Date the clinic partnership was terminated. (Report '15' as default value for the day)	Date	MM/DD/YYYY
Section 6: CHART REVIEW (CR) SCREENING RATE DATA (*Screening rate data may be reported using Chart Review, EHR or Both)					
6a	B, A Comp	CR Screening rate (%)	This rate will be automatically computed by the data system using the numerator and denominator reported below.	Numeric	00-100
6b	B*, A*	CR Denominator to calculate screening rate	Denominator is dependent on the measure used (e.g., UDS, HEDIS). Please see Table1 in <i>CDC Guidance for Measuring Colorectal Cancer Screening Rates in Health System Clinics</i> .	Numeric	1-9999999
6c	B*, A*	CR Numerator to calculate screening rate	Numerator is dependent on the measure used (e.g., UDS, HEDIS). Please see Table1 in <i>CDC Guidance for Measuring Colorectal Cancer Screening Rates in Health System Clinics</i> .	Numeric	1-9999999
6d	B*, A*	If screening rate unavailable, date the rate will be available	If a screening rate cannot be obtained when completing the clinic baseline data worksheet, provide the approximate date that the screening rate will be available.	Date	MM/DD/YYYY
6e	B*, A*	Measure used	Indicates the measure that was used to calculate the numerator and denominator for the screening rate.	Dropdown	GPRA HEDIS

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			If an existing measure (e.g. UDS, HEDIS, GPRA) was not used, the <i>CDC Guidance for Measuring Colorectal Cancer Screening Rates in Health System Clinics</i> provides information on calculating a NQF-endorsed measure. If this is used, "NQF" should be selected.		NQF UDS Other
6f	B*, A*	Start date of 12-month reporting period	The reporting period for the baseline screening rate should be the most recent 12-month reporting period available. The start date for this 12-month reporting period should not be more than 2 years prior to the anticipated start date of implementation. If using an existing measure (e.g. UDS, HEDIS, GPRA), use the required reporting period for that measure. See table 1 in CDC Guidance. The same 12-month measurement year should be used for all subsequent years of CRC screening rate data collection at this clinic.	Date	MM/DD/YYYY
6g	B*, A*	End date of 12-month reporting period	The reporting period for the baseline screening rate should be the most recent 12-month measurement period available. The same 12-month measurement year should be used for all subsequent years of CRC screening rate data collection at this clinic.	Date	MM/DD/YYYY
6h	B*, A*	% of charts reviewed to calculate screening rate	Indicates the percent of medical charts that were reviewed for adults, ages 51-74, who had at least one medical visit during the reporting year and who have not previously had colorectal cancer or had a total colectomy. A minimum of 10% or 100 charts should be reviewed. See CDC's guidance for instructions.	Numeric	00-100
6i	B	Section6 Comments	Optional comments	Character	Free text 200 character limit
Section 7: ELECTRONIC HEALTH RECORDS (EHR) SCREENING RATE DATA (* Screening rate data may be reported using Chart Review, EHR or Both)					
7a	Comp	EHR Screening rate (%)	THIS RATE WILL BE AUTOMATICALLY CALCULATED USING THE NUMERATOR AND DENOMINATOR REPORTED BELOW.	Numeric	00-100

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7b	B*,A*	EHR Denominator to calculate screening rate	Denominator is dependent on the measure used (e.g., UDS, HEDIS). Please see Table1 in <i>CDC Guidance for Measuring Colorectal Cancer Screening Rates in Health System Clinics</i> .	Numeric	1-9999999
7c	B*,A*	EHR Numerator to calculate screening rate	Numerator is dependent on the measure used (e.g., UDS, HEDIS). Please see Table1 in <i>CDC Guidance for Measuring Colorectal Cancer Screening Rates in Health System Clinics</i> .	Numeric	1-9999999
7d	B*,A*	If screening rate unavailable, date the rate will be available	If a screening rate cannot be obtained when completing the clinic baseline data worksheet, provide the approximate date that the screening rate will be available. (Report '15' as default value for the day)	Date	MM/DD/YYYY
7e	B*,A*	Measure used	Indicates the measure that was used to calculate the numerator and denominator for the screening rate. If an existing measure (e.g. UDS, HEDIS, GPRA) was not used, the <i>CDC Guidance for Measuring Colorectal Cancer Screening Rates in Health System Clinics</i> provides information on calculating a NQF-endorsed measure. If this is used, "NQF" should be selected.	Dropdown	GPRA HEDIS NQF UDS Other
7f	B*,A*	Start date of 12-month reporting period	The reporting period for the baseline screening rate should be the most recent 12-month reporting period available and consistent with the measure used (see <i>CDC Guidance for Measuring Colorectal Cancer Screening Rates in Health System Clinics</i>). The start date for this 12-month reporting period should not be more than 2 years prior to the anticipated start date of implementation. If using an existing measure (e.g. UDS, HEDIS, GPRA), use the required reporting period for that measure. See table 1 in CDC Guidance. The same 12-month measurement year should be used for all subsequent years of CRC screening rate data collection at this clinic.	Date	MM/DD/YYYY
7g	B*,A*	End date of 12-month reporting period	The reporting period for the baseline screening rate should be the most recent 12-month reporting period available. The same 12-month measurement year should be used for all subsequent years of CRC screening rate data collection at this clinic.	Date	MM/DD/YYYY
7h	B,A	How confident are you in the accuracy of the EHR-calculated screening rate?	Indicates the grantee's confidence in the accuracy of the EHR-calculated screening rate. Accuracy of EHR-calculated screening rates can vary depending on how data are documented and entered into the EHR. For additional information, see the National	Dropdown	Not confident Somewhat confident

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			Colorectal Cancer Roundtable's summary report, "Use of Electronic Medical Records to Facilitate Colorectal Cancer Screening in Community Health Centers" and "CDC Guidance for Measuring Colorectal Cancer Screening Rates in Health System Clinics."		Very confident
7i	B*, A*	EHR rate reporting source	Indicates the source of the denominator and numerator data reported for the EHR screening rate	Dropdown	HCCN data warehouse Clinic EHR Health system EHR EHR Vendor Other
7j	B	Section7 Comments	Optional comments for Section7.	Character	Free text 200 character limit

Section 8: POLICY DATA

8a	A*	Clinic CRC screening policy	<p>Does the clinic have a written CRC screening policy or protocol in use?</p> <p>A credible policy should include a defined set of guidelines and procedures in place at the clinic to support CRC screening, a team responsible for implementing the policy, and a quality assurance structure (e.g., professional screening guideline followed such as USPSTF, process to assess patient screening history/risk/preference/insurance, process for scheduling screening or referral, steps/procedures/roles to implement the office policy)</p>	Dropdown	Yes No Unknown
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Section 9: PRIORITY Evidence-based Interventions (EBI) and Supportive Activities (SA)

For each EBI and supportive activity, report (baseline) implementation status, and (annually) if CRCCP resources supported the activity, implementation stage, and implementation date.

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EBI Implementation Stages are described as follows:					
NOTE: Assessment activities, such as assessment conducted to develop a CRCCP Health Systems Implementation Plan would not be considered relevant to this question. In these questions, we're inquiring about the stage of development for an EBI that was identified during that earlier assessment/implementation planning process.					
<ol style="list-style-type: none"> 1. <u>N/A</u> - EBI not implemented or planned 2. <u>Planned</u> - Implementation activities are planned and development has not started. 3. <u>Development</u> - This stage involves development activities related to implementing a CRCCP program activity. Development activities might include creating a specific logic model for the activity, detailing specific implementation activities, developing implementation materials (ie, draft letters, feedback reports), creating implementation protocols/standard operating procedures, determining roles/responsibilities for staff, identifying appropriate staff or partners to implement the activity and/or support implementation, developing partnerships, garnering resources or purchasing needed materials (e.g., small media), establishing monitoring systems and evaluation strategies, etc. 4. <u>Initial Implementation</u> - This stage involves early implementation of the program activities whereby individuals begin to put the activity into practice. This stage may involve training staff, making changes to the health IT system, testing implementation systems (e.g., provider reminders), early implementation of the activities (e.g., patients begin receiving reminders, first provider assessment and feedback report produced, first group of patients receive navigation), receipt of early feedback about EBI use for refinement. Adaptations to how activities are implemented may be made during this time as real life experience is gained. 5. <u>Full Implementation</u> - This stage occurs when the activity is integrated into the service, organization, and system settings. The processes and procedures to provide the activity are now in place. For example, staffing or staff assignments are complete, caseloads are full, and services are being more skillfully provided by staff. The focus is on maintaining and improving the activity through excellent monitoring and purposeful improvement. Program monitoring and evaluation should be well instituted at this stage. 6. <u>Sustained without CRCCP resources</u> - This stage occurs when full implementation has been achieved and the activity continues without CRCCP resources. At this stage a supporting infrastructure is established within the organization, including any financial support needed to maintain the activity. The activity has become an institutionalized component of the health system operations. This stage may involve development and implementation of quality improvement plans, including regular review of process and outcome measures and using those data to improve the activity. 					
EBI (Patient reminder system)					
System in place to remind patients when they are due for screening. Patient reminders are written (letter, postcard, email) or telephone messages (including automated messages)					
9a1	B*	Patient reminder system	Indicates whether a patient reminder system is in place and operational (in use) in this	Dropdown	Yes

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		in place at baseline	clinic before your CRCCP begins implementation, regardless of the quality, reach, or current level of functionality. Any activities that were implemented as a part of a previous CRCCP funding cycle (DP09-903 and DP14-1414) should be considered as operational prior to CRCCP DP15-1502 implementation.		No Unknown
9a2	A*	Were CRCCP resources used toward this EBI/supporting activity during this PY? (y/n)	Indicates if CRCCP grantee resources (e.g. funds, staff time, materials, contracts, etc.) were used this during year to contribute to developing or implementing this activity	Dropdown	Yes No Unknown
9a3	A*	Implementation stage	Implementation stage of this EBI/activity at the end of the PY <i>If not "full" or "sustained" implementation, skip to 9b1</i>	Dropdown	N/A Planned Development Initial Implementation Full Implementation Sustained without CRCCP resources
9a4	A*	Date fully implemented	Date the activity was fully implemented at the clinic (report '15' as default value for the day)	Date	MM/DD/YYYY
EBI (Provider Reminder System)					
System in place to inform providers that a patient is due (or overdue) for screening. The reminders can be provided in different ways, such as in patient charts or by e-mail.					
9b1	B*	Provider reminder system in place at baseline	Indicates whether a provider reminder system is in place and operational in this clinic before your CRCCP begins implementation, regardless of the quality, reach, or current level of functionality. Any activities that were implemented as a part of a previous CRCCP funding cycle (DP09-903 and DP14-1414) should be considered as "in place" prior to CRCCP DP15-1502 implementation.	Dropdown	Yes No Unknown

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9b2	A*	Were CRCCP resources used toward this EBI/supporting activity during this PY? (y/n)	Indicates if CRCCP grantee resources (e.g. funds, staff time, materials, contracts, etc.) were used this during year to contribute to developing or implementing this activity	Dropdown	Yes No Unknown
9b3	A*	Implementation stage	Implementation stage of this EBI/activity at the end of the PY <i>If not "full" or "sustained" implementation, skip to 9c1</i>	Dropdown	N/A Planned Development Initial Implementation Full Implementation Sustained without CRCCP resources
9b4	A*	Date fully implemented	Date the activity was fully implemented at the clinic (report '15' as default value for the day)	Date	MM/DD/YYYY
EBI (Provider assessment and feedback)					
System in place to both evaluate provider performance in delivering or offering screening to clients (assessment) and present providers with information about their performance in providing screening services (feedback).					
9c1	B*	Provider assessment and feedback in place at baseline	Indicates whether provider assessment and feedback are in place and operational in this clinic before your CRCCP begins implementation, regardless of the quality, reach, or current level of functionality. Any activities that were implemented as a part of a previous CRCCP funding cycle (DP09-903 and DP14-1414) should be considered as "in place" prior to CRCCP DP15-1502 implementation.	Dropdown	Yes No Unknown
9c2	A*	Were CRCCP resources used toward this EBI/supporting activity during this PY? (y/n)	Indicates if CRCCP grantee resources (e.g. funds, staff time, materials, contracts, etc.) were used this during year to contribute to developing or implementing this activity	Dropdown	Yes No Unknown
9c3	A*	Implementation stage	Implementation stage of this EBI/activity at the end of the PY <i>If not "full" or "sustained" implementation, skip to 9d1</i>	Dropdown	N/A Planned Development Initial Implementation Full Implementation

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Item #	Item Type	CRCCP Data Item	Definition	Field Type	Response Options
					Sustained without CRCCP resources
9c4	A*	Date fully implemented	Date the activity was fully implemented at the clinic (report '15' as default value for the day)	Date	MM/DD/YYYY
EBI (Reducing structural barriers)					
Clinic has assessed structural barriers to CRC screening and has addressed these barriers through one or more interventions. Structural barriers are non-economic burdens or obstacles that make it difficult for people to access cancer screening. Do not include patient navigation or community health workers as "reducing structural barriers."					
9d1	B*	Reducing structural barriers in place at baseline	Indicates whether reducing structural barriers are in place and operational in this clinic before your CRCCP begins implementation, regardless of the quality, reach, or current level of functionality. Any activities that were implemented as a part of a previous CRCCP funding cycle (DP09-903 and DP14-1414) should be considered as "in place" prior to CRCCP DP15-1502 implementation.	Dropdown	Yes No Unknown
9d2	A*	Were CRCCP resources used toward this EBI/supporting activity during this PY? (y/n)	Indicates if CRCCP grantee resources (e.g. funds, staff time, materials, contracts, etc.) were used this during year to contribute to developing or implementing this activity	Dropdown	Yes No Unknown
9d3	A*	Implementation stage	Implementation stage of this EBI/activity at the end of the PY <i>If not "full" or "sustained" implementation, skip to 9e1</i>	Dropdown	N/A Planned Development Initial Implementation Full Implementation Sustained without CRCCP resources
9d4	A*	Date fully implemented	Date the activity was fully implemented at the clinic (report '15' as default value for the day)	Date	MM/DD/YYYY

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**Colorectal Cancer Control Program (CRCCP)
Clinic-level Data Dictionary**

Item #	Item Type	CRCCP Data Item	Definition	Field Type	Response Options
SUPPORTIVE ACTIVITIES (SA)					
SA (Small Media) Indicates whether small media are distributed to clinic patients. Small media are materials used to inform and motivate people to be screened for cancer, including videos and printed materials (e.g., letters, brochures, and newsletters).					
9e1	B*	Small media in place at baseline	Indicates whether small media activities are in place and operational in this clinic before your CRCCP begins implementation, regardless of the quality, reach, or current level of functionality. Any activities that were implemented as a part of a previous CRCCP funding cycle (DP09-903 and DP14-1414) should be considered as "in place" prior to CRCCP DP15-1502 implementation.	Dropdown	Yes No Unknown
9e2	A*	Were CRCCP resources used toward this EBI/supporting activity during this PY? (y/n)	Indicates if CRCCP grantee resources (e.g. funds, staff time, materials, contracts, etc.) were used this during year to contribute to developing or implementing this activity	Dropdown	Yes No Unknown
9e3	A*	Implementation stage	Implementation stage of this EBI/activity at the end of the PY <i>If not "full" or "sustained" implementation, skip to 9f1</i>	Dropdown	N/A Planned Development Initial Implementation Full Implementation Sustained without CRCCP resources
9e4	A*	Date fully implemented	Date the activity was fully implemented at the clinic (report '15' as default value for the day)	Date	MM/DD/YYYY
SA (Professional development/Provider education) Indicates whether activities are in place to provide professional development/provider education to health care providers in this clinic. Activities may include distribution of provider education materials, including screening guidelines and recommendations, and/or continuing medical education opportunities (CMEs).					
9f1	B*	Professional development/	Indicates whether professional development/provider education activities are in place and	Dropdown	Yes

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**Colorectal Cancer Control Program (CRCCP)
Clinic-level Data Dictionary**

Item #	Item Type	CRCCP Data Item	Definition	Field Type	Response Options
		provider education in place at baseline	operational in this clinic before your CRCCP begins implementation, regardless of the quality, reach, or current level of functionality. Any activities that were implemented as a part of a previous CRCCP funding cycle (DP09-903 and DP14-1414) should be considered as "in place" prior to CRCCP DP15-1502 implementation.		No Unknown
9f2	A*	Were CRCCP resources used toward this EBI/supporting activity during this PY? (y/n)	Indicates if CRCCP grantee resources (e.g. funds, staff time, materials, contracts, etc.) were used this during year to contribute to developing or implementing this activity	Dropdown	Yes No Unknown
9f3	A*	Implementation stage	Implementation stage of this EBI/activity at the end of the PY <i>If not "full" or "sustained" implementation, skip to 9g1</i>	Dropdown	N/A Planned Development Initial Implementation Full Implementation Sustained without CRCCP resources
9f4	A*	Date fully implemented	Date the activity was fully implemented at the clinic (report '15' as default value for the day)	Date	MM/DD/YYYY
			SA (Health information technology) Indicates whether activities are in place to improve the use of health information technology (HIT) (e.g., electronic medical records) for CRC screening in the clinic. Activities may include standardization of data fields used to document a patient's CRC screening, linkage of data to endoscopy reports, etc.		
9g1	B*	Health information technology in place at baseline	Indicates whether health information technology activities are in place and operational in this clinic before your CRCCP begins implementation, regardless of the quality, reach, or current level of functionality. Any activities that were implemented as a part of a previous CRCCP funding cycle (DP09-903 and DP14-1414) should be considered as "in place" prior to CRCCP DP15-1502 implementation.	Dropdown	Yes No Unknown
9g2	A*	Were CRCCP resources used toward this EBI/supporting activity	Indicates if CRCCP grantee resources (e.g. funds, staff time, materials, contracts, etc.) were used this during year to contribute to developing or implementing this activity	Dropdown	Yes No

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**Colorectal Cancer Control Program (CRCCP)
Clinic-level Data Dictionary**

Item #	Item Type	CRCCP Data Item	Definition	Field Type	Response Options
		during this PY? (y/n)			Unknown
9g3	A*	Implementation stage	Implementation stage of this EBI/activity at the end of the PY <i>If not "full" or "sustained" implementation, skip to 9h1</i>	Dropdown	N/A Planned Development Initial Implementation Full Implementation Sustained without CRCCP resources
9g4	A*	Date fully implemented	Date the activity was fully implemented at the clinic(report '15' as default value for the day)	Date	MM/DD/YYYY
9g5	B*A*	If HIT activities in place, briefly describe HIT activities	Describes the types of activities that are in place to improve the quality and use of HIT for CRC screening in the clinic.	Character	Free text 256 character limit
<p>SA (Community health workers) Indicates whether community health workers (CHWs) are in place at or employed by the clinic. CHWs are lay health educators with a deep understanding of the community and are often from the community being served. CHWs work in community settings, in collaboration with a health promotion program, clinic, or hospital, to educate people about cancer screening, promote cancer screening, and provide peer support to people referred to cancer screening.</p>					
9h1	B*	Community health workers in place at baseline	Indicates whether community health workers are in place and operational in this clinic before your CRCCP begins implementation, regardless of the quality, reach, or current level of functionality. Any activities that were implemented as a part of a previous CRCCP funding cycle (DPO9-903 and DP14-1414) should be considered as "in place" prior to CRCCP DP15-1502 implementation.	Dropdown	Yes No Unknown
9h2	A*	Were CRCCP resources used toward this EBI/supporting activity during this PY? (y/n)	Indicates if CRCCP grantee resources (e.g. funds, staff time, materials, contracts, etc.) were used this during year to contribute to developing or implementing this activity	Dropdown	Yes No Unknown
9h3	A*	Implementation stage	Implementation stage of this EBI/activity at the end of the PY	Dropdown	N/A Planned Development

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Colorectal Cancer Control Program (CRCCP) Clinic-level Data Dictionary					
Item #	Item Type	CRCCP Data Item	Definition	Field Type	Response Options
			<i>If not "full" or "sustained" implementation, skip to 9i1</i>		Initial Implementation Full Implementation Sustained without CRCCP resources
9h4	A*	Date fully implemented	Date the activity was fully implemented at the clinic(report '15' as default value for the day)	Date	MM/DD/YYYY
9h5	B*A*	If community health workers (CHWs) in place, # of FTE CHWs	The number of CHW full time equivalents (FTEs) employed at or by the clinic. For this number, please provide the total sum of whole and partial FTEs to the nearest tenths decimal place.	Numeric	00.0-999.0
SA (Patient navigation)					
Indicates whether patient navigators (PNs) are in place at or employed by the clinic. PNs typically assist clients in overcoming individual barriers to cancer screening. Patient navigation includes assessment of client barriers, client education and support, resolution of client barriers, client tracking and follow-up. Patient navigation should involve multiple contacts with a client..					
9i1	B*	Patient navigation in place at baseline	Indicates whether patient navigators are in place and operational in this clinic before your CRCCP begins implementation, regardless of the quality, reach, or current level of functionality. Any activities that were implemented as a part of a previous CRCCP funding cycle (DP09-903 and DP14-1414) should be considered as "in place" prior to CRCCP DP15-1502 implementation.	Dropdown	Yes No Unknown
9i2	A*	Were CRCCP resources used toward this EBI/supporting activity during this PY? (y/n)	Indicates if CRCCP grantee resources (e.g. funds, staff time, materials, contracts, etc.) were used this during year to contribute to developing or implementing this activity	Dropdown	Yes No Unknown
9i3	A*	Implementation stage	Implementation stage of this EBI/activity at the end of the PY <i>If not "full" or "sustained" implementation, skip to 9j</i>	Dropdown	N/A Planned Development Initial Implementation Full Implementation Sustained without CRCCP resources

Item type: *=Required field; B=reported at Baseline and updated as needed; A=Reported Annually; COMP=Computed field

Colorectal Cancer Control Program (CRCCP) Clinic-level Data Dictionary					
Item #	Item Type	CRCCP Data Item	Definition	Field Type	Response Options
9i4	A*	Date fully implemented	Date the activity was fully implemented at the clinic (report '15' as default value for the day)	Date	MM/DD/YYYY
9i5	B*,A*	If patient navigation in place, # of FTE patient navigators	The number of full time equivalents (FTEs) conducting patient navigation in this clinic. For this number, please provide the total sum of whole and partial FTEs to the nearest tenths decimal place.	Numeric	00.0-999.0
9i6	A	If patient navigation in place, # of clients navigated	Report the number of clients receiving navigation services during this program year.	Numeric	Unknown (99999) 1-99998
Other CRC-related strategies (optionally report up to 3) (e.g. Clinic workflow assessment and data driven optimization, Other data driven quality improvement strategies, 5 rights of clinical decision support (5 R's), etc.)					
9j	B	Other CRC-related strategies currently in place	Any other activities or strategies that are in place to increase CRC screening in this clinic.	Character	Free text 256 character limit
Other CRC Activity 1					
9j1	A	Other CRC Activity 1	Description of other CDC activity or strategy (1)	Character	Free text 256 character limit
9j2	A	Were CRCCP resources used toward this EBI/supporting activity during this PY? (y/n)	Indicates if CRCCP grantee resources (e.g. funds, staff time, materials, contracts, etc.) were used this during year to contribute to developing or implementing this activity	Dropdown	Yes No Unknown
9j3	A	Implementation stage	Implementation stage of this EBI/activity at the end of the PY <i>If not "full" or "sustained" implementation, skip to 9k1</i>	Dropdown	N/A Development Initial Implementation Full Implementation Sustained without CRCCP resources
9j4	A	Date fully implemented	Date the activity was fully implemented at the clinic (report '15' as default value for the day)	Date	MM/DD/YYYY

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**Colorectal Cancer Control Program (CRCCP)
Clinic-level Data Dictionary**

Item #	Item Type	CRCCP Data Item	Definition	Field Type	Response Options
Other CRC Activity 2					
9k1	A	Other CRC Activity 2	Description of other CDC activity or strategy (2)	Character	Free text 256 character limit
9k2	A	Were CRCCP resources used toward this EBI/supporting activity during this PY? (y/n)	Indicates if CRCCP grantee resources (e.g. funds, staff time, materials, contracts, etc.) were used this during year to contribute to developing or implementing this activity	Dropdown	Yes No Unknown
9k3	A	Implementation stage	Implementation stage of this EBI/activity at the end of the PY <i>If not "full" or "sustained" implementation, skip to 9l1</i>	Dropdown	N/A Development Initial Implementation Full Implementation Sustained without CRCCP resources
9k4	A	Date fully implemented	Date the activity was fully implemented at the clinic(report '15' as default value for the day)	Date	MM/DD/YYYY
Other CRC Activity 3					
9l1	A	Other CRC Activity 3	Description of other CDC activity or strategy (3)	Character	Free text 256 character limit
9l2	A	Were CRCCP resources used toward this EBI/supporting activity during this PY? (y/n)	Indicates if CRCCP grantee resources (e.g. funds, staff time, materials, contracts, etc.) were used this during year to contribute to developing or implementing this activity	Dropdown	Yes No Unknown
9l3	A	Implementation stage	Implementation stage of this EBI/activity at the end of the PY <i>If not "full" or "sustained" implementation, skip to 9m</i>	Dropdown	N/A Development Initial Implementation Full Implementation Sustained without CRCCP resources

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**Colorectal Cancer Control Program (CRCCP)
Clinic-level Data Dictionary**

Item #	Item Type	CRCCP Data Item	Definition	Field Type	Response Options
9l4	A	Date fully implemented	Date the activity was fully implemented at the clinic (report '15' as default value for the day)	Date	MM/DD/YYYY
9m	B	Section9 Comments	Optional comments for Section9.	Character	Free text 200 character limit

Item type: *=Required field; B=reported at Baseline and updated as needed; A=Reported Annually; COMP=Computed field