Colorectal Cancer Control Program
Funded by the Centers for Disease Control and Prevention

**Colorectal Cancer Control Program
(CRCCP) Annual Grantee Survey**

0% 〔_____〕 100%

Form Approved
OMB No. 0920-1074
Expiration Date: 06/30/2019

WELCOME

Colorectal Cancer Control Program (CRCCP) Annual Grantee Survey

The Centers for Disease Control and Prevention (CDC), Division of Cancer Prevention and Control (DCPC) is assessing how DP15-1502 grantees implement the Colorectal Cancer Control Program (CRCCP). This survey asks about your program implementation during program year 2 (PY2), the time period **July 1, 2016 through June 30, 2017**.

The aims of this data collection are to better understand how you are implementing your CRCCP program and to collect information about your training and technical assistance needs; therefore, your feedback is extremely important.

We expect that grantees will make changes in the types of activities implemented over the course of the 5-year program period, but you should respond based upon what happened in your program in year 2 only. We do not expect that any program will be doing all of the activities asked about in this data collection.

If you have any questions about the survey content while completing it, please contact Stephanie Melillo at 770.488.4294 or bcu6@cdc.gov. If you have technical issues in completing the survey, please contact Information Management Services, Inc. at support@crccp.org.

It should take approximately 24 minutes to complete the survey in one sitting.

Thank you for your participation.

Click here to download a PDF copy of this survey.

INSTRUCTIONS AND DEFINITIONS

WHO SHOULD COMPLETE THIS DATA COLLECTION?

The person responsible for the day-to-day management of the program and/or with the most program knowledge should complete this data collection.

WHAT TIME PERIOD IS BEING ASSESSED?

We are collecting information about the implementation of your DP15-1502 CRCCP, program year 2 (PY2). Unless instructed otherwise, *all responses should reflect implementation of your CRCCP in PY2 ONLY, July 1, 2016 – June 30, 2017.*

WHAT DO WE MEAN BY 'YOU AND YOUR CRCCP STAFF'?

'You and your CRCCP staff' include those people within your organization (e.g., State health department, tribal program, university) that work to carry out the mission of your CRCCP program.

WHAT DO WE MEAN BY 'YOUR CRCCP'?

The term 'Your CRCCP' refers to all those involved in the implementation of your CRCCP program/program activities, including you, your contractors, and your partners, regardless of the source of program funds.

WHAT DO WE MEAN BY 'HEALTH SYSTEM'?

For purposes of this survey, when we use the term 'health system', we mean entities delivering clinical care to a defined patient population including, but not limited to FQHCs/CHCs, other publicly funded entities providing primary care, academic health care centers, health plan clinic networks, other health care networks, and hospitals. Health systems often include multiple primary care clinic sites. Insurers/health care plans, Medicaid, and Medicare may also be considered health systems given they have an applicant-defined patient population and reimburse for clinical services rendered.

Instructions and Definitions, continued

WHAT ARE PROCESS AND OUTCOME EVALUATION?

Process evaluation involves collecting and analyzing information about *how* program activities were implemented. Examples of process evaluation metrics include:

- Percentage of patients due for screening that receive a client reminder
- Percentage of patients due for screening who receive a physician recommendation consistent with United States Preventive Services Task Force (USPSTF) recommendations
- Percentage of clients enrolled in patient navigation that receive appropriate assessment of barriers to CRC screening

Outcome evaluation examines whether expected outcomes were achieved. Examples of outcome evaluation metrics include:

- Clinic-level CRC screening rates
- CRC rescreening rate

WHAT ARE EVIDENCE-BASED INTERVENTIONS?

Provider Assessment and Feedback	Provider assessment and feedback interventions 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). Feedback may describe the performance of a group of providers or an individual provider, and may be compared with a goal or standard.
Provider Reminders	Reminders inform healthcare providers it is time for a client's cancer screening test or that the client is overdue for screening. The reminders can be provided in different ways, such as client charts or by e-mail.
Reducing Structural Barriers	Structural barriers are noneconomic burdens or obstacles that make it difficult for people to access cancer screening. Interventions designed to reduce these barriers may facilitate access to cancer screening services by reducing time or distance between service delivery settings and target populations, modifying hours of service to meet client needs, offering services in alternative or non-clinical settings or eliminating or simplifying administrative procedures and other obstacles.
Patient Reminders	Patient reminders are written (letter, postcard, e-mail) or telephonic messages (including automated messages) advising people that they are due for screening. Reminder messages may be tailored or untailored to specific individuals or audiences.

Instructions and Definitions, continued

WHAT ARE SUPPORTING ACTIVITIES?

Small Media	Small media include videos and printed materials such as letters, brochures, and newsletters. These materials can be used to inform and motivate people to be screened for cancer. They can provide information tailored to specific individuals or targeted to general audiences. For the purposes of this survey, please include any social media activities as "small media".
Patient Navigation	Patient navigation is a strategy aimed at reducing disparities by helping clients overcome barriers to healthcare. For purposes of the CRCCP, patient navigation is defined as individualized assistance offered to clients to help overcome healthcare system barriers and facilitate timely access to quality screening and follow-up as well as initiation of treatment services for persons diagnosed with cancer. Patient navigation includes assessment of client barriers, client education, resolution of barriers, and client tracking and follow-up. Patient navigators may be professional (e.g., nurse) or lay workers.
Community Health Workers (CHWs)	CHWs are non-clinical frontline public health workers who are trusted members and/or has an unusually close understanding of the community served. CHWs work in the community to provide education, support, and facilitate access to health care.
Professional development, provider education	Professional development/provider education are interventions directed at healthcare staff and providers to increase their knowledge as well as to change attitudes and practices in addressing cancer screening. Activities may include distribution or delivery of provider education materials, including screening guidelines and recommendations, and/or continuing medical education opportunities.
Quality Improvement or Quality Assurance (QI/QA)	QI/QA refers to the use of clinical data to support ongoing monitoring of the quality timeliness, and appropriateness of cancer screening services provided by the clinic or health system. QI/QA includes changing existing processes in response to clinical data to achieve measurable improvements in the efficiency, effectiveness, performance, accountability, outcomes and other indicators of quality services. Activities should link to the clinic's or health system's existing QI plan and infrastructure if applicable.
Workplace interventions	Workplace interventions can include worksite policies, wellness programs, and other activities that help employees reduce health risks and improve their quality of life. These interventions can be delivered at the worksite, at other locations, or through the employee health benefits plan.
Facilitated linkages to medical home	Facilitating linkages to a medical home involves assisting individuals to secure a primary care provider through activities such as identifying appropriate and convenient provider sites and assisting to enroll in insurance coverage.

SECTION 1: RESPONDENT INFORMATION

1. With which CRCCP program are you affiliated?
Choose one of the following answers

Please choose... ▼

2. What is your current position with the CRCCP program?
Check any that apply

☐ Program director (the primary contact for the CRCCP cooperative agreement)

☐ Program manager/coordinator (the day-to-day manager for the CRCCP)

☐ Other: _____

3. How long have you worked with the CRCCP program in your state / tribe / territory / jurisdiction / organization? This may include time worked on the DP903/1414 CRCCP from 2009-2015.
Choose one of the following answers

○ < 1 year

○ 1-2 years

○ 3-5 years

○ 6+ years

SECTION 2: PROGRAM MANAGEMENT

1. During PY2, how challenging were the following management issues? If these issues are not applicable to your CRCCP, select 'N/A'.

Management Issues	N/A	Not a challenge	Minor challenge	Moderate challenge	Serious challenge
Reorganizing within your awardee organization	○	○	○	○	○
Dealing with staff turnover, furloughs, or hiring freezes	○	○	○	○	○
Having issues within your awardee organization that impede timely hiring of staff	○	○	○	○	○
Identifying and hiring staff with appropriate skills and/or experience	○	○	○	○	○
Losing Federal funds (other than CDC CRCCP funds)	○	○	○	○	○
Losing non-Federal funds (e.g., State funds)	○	○	○	○	○
Losing in-kind resources	○	○	○	○	○
Executing contracts/consultant agreements with partners other than health systems	○	○	○	○	○
Executing contracts/consultant agreements or formal MOAs/MOUs with partner health systems	○	○	○	○	○
Monitoring performance of sub-awardees	○	○	○	○	○
Receiving timely response from PGO on funding-related issues (within 2 weeks)	○	○	○	○	○
Receiving timely response from CDC on program-related issues (within 2 weeks)	○	○	○	○	○
Accessing needed technical assistance or support	○	○	○	○	○
Other management issue (please specify 1 issue)	○	○	○	○	○
Other management issue (please specify 1 issue)	○	○	○	○	○

1a. Other management issue (please specify 1 issue)

[   ]

Section 2, continued

1b. Other management issue (please specify 1 issue)

[text box]

2. During PY2, how challenging were the following programmatic issues? If these issues are not applicable to your CRCCP, select 'N/A'.

Programmatic Issues	N/A	Not a challenge	Minor challenge	Moderate challenge	Serious challenge
Establishing or expanding partnerships with health systems that are community health centers (CHCs), including federally qualified health centers (FQHCs)	○	○	○	○	○
Establishing or expanding partnerships with entities that provide direct health care other than CHCs/FQHCs (private clinics, hospitals, etc.)	○	○	○	○	○
Establishing or expanding partnerships with insurers/payors, including Medicaid, Medicare, and private payers	○	○	○	○	○
Establishing or expanding a partnership with your state primary care association (PCA)	○	○	○	○	○
Establishing or expanding a partnership with Health Center Control Network(s) (HCCN) or Regional Extension Center (REC)	○	○	○	○	○
Establishing or expanding a partnership with the state quality assurance organization (e.g. linked to Health Center QI program and BPHC Clinical Quality Incentives)	○	○	○	○	○
Maintaining previously established partnerships	○	○	○	○	○
Conducting assessment activities in health systems	○	○	○	○	○
Developing health system implementation plans	○	○	○	○	○
Reaching your priority population	○	○	○	○	○
Implementing EBIs in health systems/clinics	○	○	○	○	○
Implementing supporting activities in health systems/clinics	○	○	○	○	○
Improving electronic health record systems to get an accurate CRC screening rate	○	○	○	○	○
Ensuring access to adequate endoscopy services in your area (i.e., not enough endoscopy sites)	○	○	○	○	○
Ensuring access to follow-up colonoscopies (after a positive FOBT/FIT or sigmoidoscopy) for un-or under-insured persons	○	○	○	○	○
Other programmatic issue (please specify 1 issue)	○	○	○	○	○
Other programmatic issue (please specify 1 issue)	○	○	○	○	○

2a. Other programmatic issue (please specify 1 issue)

[text box]

Section 2, continued

2b. Other programmatic issue (please specify 1 issue)

3. During PY2, how challenging were the following evaluation issues? If these issues are not applicable to your CRCCP, select 'N/A'.

Evaluation Issues	N/A	Not a challenge	Minor challenge	Moderate challenge	Serious challenge
Developing an evaluation plan for your program	○	○	○	○	○
Determining baseline CRC screening rates for partner health system clinics	○	○	○	○	○
Determining annual CRC screening rates for partner health system clinics	○	○	○	○	○
Collecting reliable data on CRC screening rates	○	○	○	○	○
Extracting data from electronic health record systems (EHRs) to measure CRC screening rates	○	○	○	○	○
Conducting medical chart reviews to assess CRC screening rates (or to validate an EHR rate)	○	○	○	○	○
Developing data collection instruments to evaluate your own program efforts	○	○	○	○	○
Conducting monitoring & evaluation of the implementation of EBIs and other program activities	○	○	○	○	○
Conducting evaluation of outcomes of EBIs and other program activities	○	○	○	○	○
Collecting data on patient navigation	○	○	○	○	○
Working with an internal evaluator(s)	○	○	○	○	○
Working with an external evaluator(s)	○	○	○	○	○
Other evaluation issue (please specify 1 issue)	○	○	○	○	○
Other evaluation issue (please specify 1 issue)	○	○	○	○	○

3a. Other evaluation issue (please specify 1 issue)

Section 2, continued

3b. Other evaluation issue (please specify 1 issue)

4. In PY2, did your CRCCP engage any of the following people to assist with your evaluation activities?
Check any that apply

- ☐ A CRCCP staff person with specialized training or expertise in evaluation
- ☐ A staff person with specialized training or expertise in evaluation who is within your awardee organization, but not a member of your CRCCP staff
- ☐ An evaluator from a university outside your awardee organization with specialized training or expertise in evaluation
- ☐ An evaluation consultant from outside your awardee organization with specialized training or expertise in evaluation
- ☐ Other staff (please specify): _____
- ☐ We did not engage anyone with special evaluation expertise in PY2

5. Please list the amount of Federal, State, Tribal, non-profit, university and other funding that supported your CRCCP program in PY2. Please pro-rate funding if needed to associate with PY2, July 1, 2016 – June 30, 2017. Do not include in-kind resources.

Enter "0" if your CRCCP program did not receive any funds in PY2 from the source indicated.

Federal (Do **not** include funds received from CDC through DP15-1502 CRCCP)	$ _____ .00
State	$ _____ .00
Tribal	$ _____ .00
Non-profit (e.g., American Cancer Society, LIVESTRONG)	$ _____ .00
University (e.g., other grant funds, internal university funds)	$ _____ .00
Other funding sources (please specify)	$ _____ .00

5a. Other funding sources (please specify)

Section 2, continued

6. During PY2, who provided support/technical assistance for CRCCP activities to your partner health systems and/or clinics?
Check any that apply

- ☐ CRCCP staff members
- ☐ HCCN or Regional Extension Center (REC)
- ☐ State Primary Care Association
- ☐ American Cancer Society
- ☐ Other partner(s) (Please name): _____

7. During PY2, how many of your participating health system clinics received **financial** support from your CRCCP ether directly from the awardee organization (i.e., grantee contracts with health system or clinic) or indirectly through a sub-awardee (i.e., your sub-awardee contracted with a health system or clinic)?
Choose one of the following answers

- ○ All
- ○ Most
- ○ Some
- ○ None

8. During PY2, did your CRCCP have a mechanism in place to help uninsured or underinsured patients in your participating health system clinics obtain colonoscopy either as an initial screening test or following an abnormal FOBT/FIT (e.g., donated colonoscopies, state funding used to support colonoscopies, excluding colonoscopies provided using CRCCP Component 2 funding)?

- ☐ Yes (Please describe) _____
- ☐ No

SECTION 3A: EBIS AND SUPPORTING ACTIVITIES

1. In PY2, did your CRCCP conduct any EBIs or supporting activities that you believe are especially 'promising' and that may be worthy of a rigorous outcome evaluation?
Choose one of the following answers

○ Yes

○ No

2. Please describe the EBI or supporting activity.

3. Are you conducting or planning to conduct an effectiveness evaluation of any of your CRCCP program activities in the next 1-2 years (e.g., an evaluation involving a rigorous design such as pre-post, quasi-experimental)?
Choose one of the following answers

○ Yes

○ No

4. Please describe the effectiveness evaluation.

SECTION 3B: HEALTH INFORMATION TECHNOLOGY (HEALTH IT)

1. During PY2, did your CRCCP provide technical assistance, training, health IT staff support, or other support to any of your health system/clinic partners to improve the use or quality of their electronic health record (EHR) data?
Choose one of the following answers

○ Yes

○ No

2. Did your CRCCP provide technical assistance, training, health IT staff support, or other support to any of your health system/clinic partners to improve the use or quality of their electronic health record (EHR) data prior to PY2?
Choose one of the following answers

○ Yes

○ No

3. During PY2, what specific challenges did your CRCCP program encounter in terms of delivering Health IT support?

4. Who typically provided the technical assistance, training, or support?
Check any that apply

☐ Our own awardee organization staff (e.g. Health IT specialist(s))

☐ An IT specialist employed by the health system

☐ An external Heath IT consultant(s) or contractor(s)

☐ A Health Center Controlled Network (HCCN) or Regional Extension Center (REC)

☐ Partner from an academic institution

☐ Other (please specify): _____

Section 3B, continued

5. During PY2, what types of activities were conducted?
Check any that apply

☐ Conducted a chart review to validate the EHR generated CRC screening rate

☐ Assessed the capacity or functioning of the EHR system

☐ Reviewed EHR system to identify problems in regard to how CRC endoscopy referrals and screening results are recorded

☐ Made changes within EHR to accurately record data related to things like the distribution of FOBT/FIT kits, return of FOBT/FIT kits, endoscopy referrals and screening results (FOBT/FIT, colonoscopy)

☐ Developed standard queries within EHR

☐ Revised health system/clinic workflow systems to improve data entry in the EHR

☐ Provided training to health system staff about how to document endoscopy referrals and screening results (FOBT/FIT, colonoscopy)

☐ Provided financial and/or technical support for an EHR overlay (e.g. Azara)

☐ Other (please specify): [_____]

---

6. During PY2, did your CRCCP support the modification of health system partners' health IT or EHRs to improve or implement any of the following?
Check any that apply

☐ Accurate measurement of CRC screening rate

☐ Provider assessment and feedback system

☐ Provider reminders

☐ Patient reminders

☐ Reducing structural barriers (non-PN)

☐ Patient navigation monitoring

☐ Professional development/Provider education

☐ Quality improvement

☐ Other (please specify): [_____]

---

7. Overall, how difficult was it to implement these health IT activities in PY2?
Choose one of the following answers

○ 1 - Not at all difficult
○ 2 - A little difficult
○ 3 - Somewhat difficult
○ 4 - Very difficult

SECTION 3C: NON-HEALTH SYSTEM PARTNERS

1. Did your organization partner with any of the following organizations to assist in implementing CRCCP program activities in PY2?
Check any that apply

- ☐ American Cancer Society
- ☐ State Primary Care Association
- ☐ State Quality Improvement Agency
- ☐ Medicare Quality Improvement Organization
- ☐ Health Center Controlled Network(s)
- ☐ Regional Extension Centers
- ☐ Non-profit community organization(s)
- ☐ Professional Associations
- ☐ Local or regional health departments
- ☐ Business Associations
- ☐ Private EHR vendor (e.g., EHR software vendor, data warehouse)
- ☐ University
- ☐ Accountable Care Organization
- ☐ Healthcare Collaborative
- ☐ Other (please specify): [   ]
- ☐ We did not partner with any of these organizations/groups

2. Did your organization provide CDC DP15 1502 funding to the American Cancer Society to assist in implementing CRCCP program activities in PY2?
Choose one of the following answers

- ○ Yes
- ○ No

3. During PY2, which of the following CRCCP program activities were implemented in partnership with the American Cancer Society?
Check any that apply

- ☐ Provider assessment and feedback
- ☐ Provider reminders
- ☐ Patient reminders
- ☐ Reducing structural barriers (not including patient navigation)
- ☐ Small media
- ☐ Patient navigation
- ☐ Professional development/Provider education
- ☐ Quality improvement activities
- ☐ Community health workers
- ☐ Workplace interventions
- ☐ Facilitating linkage to medical home
- ☐ Health information technology activities (e.g., improve use of EHRs)
- ☐ Other (please specify): [   ]

Section 3C, continued

4. Did your organization provide CDC DP15 1502 funding to **State Primary Care Associations** to assist in implementing CRCCP program activities in PY2?
Choose one of the following answers

○ Yes
○ No

5. During PY2, which of the following CRCCP program activities were implemented in partnership with **State Primary Care Associations**?
Check any that apply

☐ Provider assessment and feedback
☐ Provider reminders
☐ Patient reminders
☐ Reducing structural barriers (not including patient navigation)
☐ Small media
☐ Patient navigation
☐ Professional development/Provider education
☐ Quality improvement activities
☐ Community health workers
☐ Workplace interventions
☐ Facilitating linkage to medical home
☐ Health information technology activities (e.g., improve use of EHRs)
☐ Other (please specify): _____

6. Did your organization provide CDC DP15 1502 funding to **State Quality Improvement Agencies** to assist in implementing CRCCP program activities in PY2?
Choose one of the following answers

○ Yes
○ No

Section 3C, continued

7. During PY2, which of the following CRCCP program activities were implemented in partnership with **State Quality Improvement Agencies**?
Check any that apply

- ☐ Provider assessment and feedback
- ☐ Provider reminders
- ☐ Patient reminders
- ☐ Reducing structural barriers (not including patient navigation)
- ☐ Small media
- ☐ Patient navigation
- ☐ Professional development/Provider education
- ☐ Quality improvement activities
- ☐ Community health workers
- ☐ Workplace interventions
- ☐ Facilitating linkage to medical home
- ☐ Health information technology activities (e.g., improve use of EHRs)
- ☐ Other (please specify): [   ]

8. Did your organization provide CDC DP15 1502 funding to **Medicare Quality Improvement Organizations** to assist in implementing CRCCP program activities in PY2?
Choose one of the following answers

- ○ Yes
- ○ No

9. During PY2, which of the following CRCCP program activities were implemented in partnership with **Medicare Quality Improvement Organizations**?
Check any that apply

- ☐ Provider assessment and feedback
- ☐ Provider reminders
- ☐ Patient reminders
- ☐ Reducing structural barriers (not including patient navigation)
- ☐ Small media
- ☐ Patient navigation
- ☐ Professional development/Provider education
- ☐ Quality improvement activities
- ☐ Community health workers
- ☐ Workplace interventions
- ☐ Facilitating linkage to medical home
- ☐ Health information technology activities (e.g., improve use of EHRs)
- ☐ Other (please specify): [   ]

Section 3C, continued

10. Did your organization provide CDC DP15 1502 funding to **Health Center Controlled Networks** to assist in implementing CRCCP program activities in PY2?
Choose one of the following answers

○ Yes
○ No

11. During PY2, which of the following CRCCP program activities were implemented in partnership with **Health Center Controlled Networks**?
Check any that apply

☐ Provider assessment and feedback
☐ Provider reminders
☐ Patient reminders
☐ Reducing structural barriers (not including patient navigation)
☐ Small media
☐ Patient navigation
☐ Professional development/Provider education
☐ Quality improvement activities
☐ Community health workers
☐ Workplace interventions
☐ Facilitating linkage to medical home
☐ Health information technology activities (e.g., improve use of EHRs)
☐ Other (please specify): [   ]

12. Did your organization provide CDC DP15 1502 funding to **Regional Extension Centers** to assist in implementing CRCCP program activities in PY2?
Choose one of the following answers

○ Yes
○ No

Section 3C, continued

13. During PY2, which of the following CRCCP program activities were implemented in partnership with **Regional Extension Centers**?
Check any that apply

☐ Provider assessment and feedback
☐ Provider reminders
☐ Patient reminders
☐ Reducing structural barriers (not including patient navigation)
☐ Small media
☐ Patient navigation
☐ Professional development/Provider education
☐ Quality improvement activities
☐ Community health workers
☐ Workplace interventions
☐ Facilitating linkage to medical home
☐ Health information technology activities (e.g., improve use of EHRs)
☐ Other (please specify): [   ]

14. Did your organization provide CDC DP15 1502 funding to **Non-profit Community Organizations** to assist in implementing CRCCP program activities in PY2?
Choose one of the following answers

○ Yes
○ No

15. During PY2, which of the following CRCCP program activities were implemented in partnership with **Non-profit Community Organizations**?
Check any that apply

☐ Provider assessment and feedback
☐ Provider reminders
☐ Patient reminders
☐ Reducing structural barriers (not including patient navigation)
☐ Small media
☐ Patient navigation
☐ Professional development/Provider education
☐ Quality improvement activities
☐ Community health workers
☐ Workplace interventions
☐ Facilitating linkage to medical home
☐ Health information technology activities (e.g., improve use of EHRs)
☐ Other (please specify): [   ]

Section 3C, continued

16. Did your organization provide CDC DP15 1502 funding to **Professional Associations** to assist in implementing CRCCP program activities in PY2?
Choose one of the following answers

○ Yes
○ No

17. During PY2, which of the following CRCCP program activities were implemented in partnership with **Professional Associations**?
Check any that apply

☐ Provider assessment and feedback
☐ Provider reminders
☐ Patient reminders
☐ Reducing structural barriers (not including patient navigation)
☐ Small media
☐ Patient navigation
☐ Professional development/Provider education
☐ Quality improvement activities
☐ Community health workers
☐ Workplace interventions
☐ Facilitating linkage to medical home
☐ Health information technology activities (e.g., improve use of EHRs)
☐ Other (please specify): _____

18. Did your organization provide CDC DP15 1502 funding to **Local or Regional Health Departments** to assist in implementing CRCCP program activities in PY2?
Choose one of the following answers

○ Yes
○ No

Section 3C, continued

19. During PY2, which of the following CRCCP program activities were implemented in partnership with **Local or Regional Health Departments**?
Check any that apply

- ☐ Provider assessment and feedback
- ☐ Provider reminders
- ☐ Patient reminders
- ☐ Reducing structural barriers (not including patient navigation)
- ☐ Small media
- ☐ Patient navigation
- ☐ Professional development/Provider education
- ☐ Quality improvement activities
- ☐ Community health workers
- ☐ Workplace interventions
- ☐ Facilitating linkage to medical home
- ☐ Health information technology activities (e.g., improve use of EHRs)
- ☐ Other (please specify): [   ]

20. Did your organization provide CDC DP15 1502 funding to **Business Associations** to assist in implementing CRCCP program activities in PY2?
Choose one of the following answers

- ○ Yes
- ○ No

21. During PY2, which of the following CRCCP program activities were implemented in partnership with **Business Associations**?
Check any that apply

- ☐ Provider assessment and feedback
- ☐ Provider reminders
- ☐ Patient reminders
- ☐ Reducing structural barriers (not including patient navigation)
- ☐ Small media
- ☐ Patient navigation
- ☐ Professional development/Provider education
- ☐ Quality improvement activities
- ☐ Community health workers
- ☐ Workplace interventions
- ☐ Facilitating linkage to medical home
- ☐ Health information technology activities (e.g., improve use of EHRs)
- ☐ Other (please specify): [   ]

Section 3C, continued

22. Did your organization provide CDC DP15 1502 funding to **Private EHR Vendors** to assist in implementing CRCCP program activities in PY2?
Choose one of the following answers

○ Yes
○ No

23. During PY2, which of the following CRCCP program activities were implemented in partnership with **Private EHR Vendors**?
Check any that apply

☐ Provider assessment and feedback
☐ Provider reminders
☐ Patient reminders
☐ Reducing structural barriers (not including patient navigation)
☐ Small media
☐ Patient navigation
☐ Professional development/Provider education
☐ Quality improvement activities
☐ Community health workers
☐ Workplace interventions
☐ Facilitating linkage to medical home
☐ Health information technology activities (e.g., improve use of EHRs)
☐ Other (please specify): [   ]

24. Did your organization provide CDC DP15 1502 funding to **Universities** to assist in implementing CRCCP program activities in PY2?
Choose one of the following answers

○ Yes
○ No

Section 3C, continued

25. During PY2, which of the following CRCCP program activities were implemented in partnership with **Universities**?
Check any that apply

- ☐ Provider assessment and feedback
- ☐ Provider reminders
- ☐ Patient reminders
- ☐ Reducing structural barriers (not including patient navigation)
- ☐ Small media
- ☐ Patient navigation
- ☐ Professional development/Provider education
- ☐ Quality improvement activities
- ☐ Community health workers
- ☐ Workplace interventions
- ☐ Facilitating linkage to medical home
- ☐ Health information technology activities (e.g., improve use of EHRs)
- ☐ Other (please specify): [   ]

26. Did your organization provide CDC DP15 1502 funding to **Accountable Care Organizations** to assist in implementing CRCCP program activities in PY2?
Choose one of the following answers

- ○ Yes
- ○ No

27. During PY2, which of the following CRCCP program activities were implemented in partnership with **Accountable Care Organizations**?
Check any that apply

- ☐ Provider assessment and feedback
- ☐ Provider reminders
- ☐ Patient reminders
- ☐ Reducing structural barriers (not including patient navigation)
- ☐ Small media
- ☐ Patient navigation
- ☐ Professional development/Provider education
- ☐ Quality improvement activities
- ☐ Community health workers
- ☐ Workplace interventions
- ☐ Facilitating linkage to medical home
- ☐ Health information technology activities (e.g., improve use of EHRs)
- ☐ Other (please specify): [   ]

Section 3C, continued

28. Did your organization provide CDC DP15 1502 funding to **Healthcare Collaboratives** to assist in implementing CRCCP program activities in PY2?
Choose one of the following answers

○ Yes
○ No

29. During PY2, which of the following CRCCP program activities were implemented in partnership with **Healthcare Collaboratives**?
Check any that apply

☐ Provider assessment and feedback
☐ Provider reminders
☐ Patient reminders
☐ Reducing structural barriers (not including patient navigation)
☐ Small media
☐ Patient navigation
☐ Professional development/Provider education
☐ Quality improvement activities
☐ Community health workers
☐ Workplace interventions
☐ Facilitating linkage to medical home
☐ Health information technology activities (e.g., improve use of EHRs)
☐ Other (please specify): _____

SECTION 3D: ENDOSCOPY PARTNERS

1. During PY2, did your CRCCP implement component 1 program activities at any facilities that conduct endoscopies or for the physicians/staff working in these facilities?
Choose one of the following answers

- ○ Yes
- ○ No

2. During PY2, in how many different endoscopy sites did your CRCCP implement program activities? *(enter 9999 if unknown)*
Each answer must be between 0 and 9999
Only an integer value may be entered in this field.

[   ] endoscopy sites

3. Approximately how many endoscopists (e.g., gastroenterologists) work in all endoscopy sites combined? *(enter 9999 if unknown)*
Each answer must be between 0 and 9999
Only an integer value may be entered in this field.

[   ] endoscopists

4. Approximately how many patients received colonoscopy for CRC screening in PY2 by all the endoscopy sites combined? *(enter 9999 if unknown)*
Each answer must be between 0 and 9999
Only an integer value may be entered in this field.

[   ] patients

5. During PY2, which of the following CRCCP program activities were implemented in endoscopy sites?
Check any that apply

- ☐ Provider assessment and feedback (e.g., endoscopy quality reports)
- ☐ Patient reminders
- ☐ Reducing structural barriers (not including patient navigation)
- ☐ Small media
- ☐ Patient navigation
- ☐ Professional development/Provider education
- ☐ Quality improvement
- ☐ Community health workers
- ☐ Health information technology activities
- ☐ Other (please specify): [   ]

Section 3D, continued

6. During PY2, who was responsible for providing implementation support for these activities?
Check any that apply

☐ CRCCP staff member(s)
☐ Endoscopy center staff
☐ An outside organization or consultant contracted by the CRCCP
☐ Other (please specify): _____

7. Were CMEs/CMUs provided to staff at these facilities (e.g. endoscopists, nurses)?
Choose one of the following answers

○ Yes
○ No
○ Don't know

8. Was CDC's on-line continuing education courses for providers, "Screening for Colorectal Cancer: Optimizing Quality" (http://www.cdc.gov/cancer/colorectal/quality/index.htm) used in these activities?
Choose one of the following answers

○ Yes
○ No

9. During PY2, how many endoscopists received CMEs/CMUs based on CRCCP activities? *(enter 9999 if unknown)*
Each answer must be between 0 and 9999
Only an integer value may be entered in this field.

[_____] endoscopists receiving CMEs/CMUs

10. Overall, how difficult was it to implement activities with endoscopy sites in PY2?
Choose one of the following answers

○ 1 - Not at all difficult
○ 2 - A little difficult
○ 3 - Somewhat difficult
○ 4 - Very difficult

SECTION 4: DATA USE

1. in the table below, for each data source that you and your CRCCP staff used (e.g., SEER, USCS), please check the box or boxes that reflect *how those data were used* (e.g., measure screening rates).

Data or Information Source	Did Not Use in PY2	Measure Screening Rates	Assessment, Planning, Monitoring, and Evaluation Activities
State or Regional Cancer Plan	☐	☐	☐
BRFSS	☐	☐	☐
State cancer registry, SEER data, or U.S. Cancer Statistics (USCS)	☐	☐	☐
State or local CRC screening registry	☐	☐	☐
Census data (including Small Area Health Insurance Estimates)	☐	☐	☐
HEDIS data (managed care plans)	☐	☐	☐
UDS data (HRSA's FQHCs)	☐	☐	☐
IHS GPRA data (Government Performance and Results Act)	☐	☐	☐
Medicaid data	☐	☐	☐
Medicare data	☐	☐	☐
Private insurer data (e.g., Kaiser, Blue Cross/Blue Shield)	☐	☐	☐
All payor claims database	☐	☐	☐
Patient records or aggregate/summary patient data (e.g., within clinics or health systems, RPMS for tribal programs)	☐	☐	☐
Your own primary data collection (e.g., pre-& post-tests, provider survey, patient satisfaction survey)	☐	☐	☐
National or state health survey data (e.g., HINTS, NHIS, American Community Survey)	☐	☐	☐
Other data or information source (please specify)	☐	☐	☐
Other data or information source (please specify)	☐	☐	☐

1a. Other data or information source (please specify 1 source)

[ ]

1b. Other data or information source (please specify 1 source)

[ ]

SECTION 5: TRAINING AND TECHNICAL ASSISTANCE

1. Using a scale of high, medium, and low, please rate **your current desire for training (not limited to PY2)** among you and your CRCCP staff in the areas listed below.

Area of Training/Technical Assistance	High	Medium	Low
Management Activities			
Program planning	○	○	○
Creating health system implementation plans	○	○	○
Logic model development & use	○	○	○
Managing/Monitoring the performance of your partners/sub-awardees	○	○	○
Program Monitoring and Evaluation			
Evaluation planning	○	○	○
Data collection, management, & analysis	○	○	○
Collecting clinic baseline data, including baseline CRC screening rates	○	○	○
Collecting clinic annual data, including annual CRC screening rates	○	○	○
Evaluating implementation of EBIs and supporting activities	○	○	○
Priority Evidence-based Interventions			
Provider assessment & feedback	○	○	○
Provider reminders	○	○	○
Patient reminders	○	○	○
Reducing structural barriers	○	○	○
Supporting Program Activities			
Small media	○	○	○
Patient navigation/case management	○	○	○
Professional development/Provider education	○	○	○
Community health worker strategies	○	○	○
Workplace interventions	○	○	○
Quality Improvement/Quality Assurance (QI/QA) Activities			
Clinical guidelines for CRC screening	○	○	○
Clinical guidelines for CRC surveillance	○	○	○
Other QI/QA activities	○	○	○
Other			
Improving EHRs	○	○	○
Improving clinic/health system workflow processes	○	○	○
Partnership development & maintenance	○	○	○
Partnering with FQHCs/CHCs	○	○	○
Partnering with Primary Care Associations	○	○	○
Partnering with HCCNs	○	○	○
Partnering with endoscopy sites	○	○	○
Partnering with State QI organizations	○	○	○

Section 5, continued

2. Please list any other technical assistance or training needs.

```
┌──────────────────────────────────────────────────────────────┐
│                                                                │
│                                                                │
│                                                                │
└──────────────────────────────────────────────────────────────┘
```

3. How useful have you found the following technical assistance resources?

Technical Assistance Resource	N/A - Did Not Use	Not Useful	Somewhat Useful	Very Useful
CDC CRCCP DP15-1502 Program Manual	○	○	○	○
CDC Guidance for Measuring Colorectal Cancer Screening Rates in Health System Clinics	○	○	○	○
CDC Webinars	○	○	○	○
CRCCP Evaluation Network	○	○	○	○
Printed CDC guide: An Action Guide for Working with Health Systems	○	○	○	○
Printed CDC guide: An Action Guide for Engaging Employers and Professional Medical Organizations	○	○	○	○
NCCRT Manual: Steps for Increasing Colorectal Cancer Screening Rates: A Manual for Community Health Centers	○	○	○	○
CDC/NCCRT: Screening for Colorectal Cancer: Optimizing Quality – a continuing education course for health care providers	○	○	○	○
On-going TA provided by CDC Program Consultants	○	○	○	○
Evaluation TA from CDC or CDC partners	○	○	○	○
Grantee survey reports	○	○	○	○
Other resource (please specify)	○	○	○	○
Other resource (please specify)	○	○	○	○

3a. Other resource (please specify 1 resource)

```
┌──────────────────────────────────────────────────────────────┐
│                                                                │
│                                                                │
│                                                                │
└──────────────────────────────────────────────────────────────┘
```

Section 5, continued

3b. Other resource (please specify 1 resource)

4. How useful were CCDE data review/reports?
Choose one of the following answers

- ○ N/A - Did Not Use
- ○ Not Useful
- ○ Somewhat Useful
- ○ Very Useful

SECTION 6A: CLIENT ELIGIBILITY CRITERIA FOR SCREENING

1. During PY2, what Federal Poverty Level (FPL) was used to determine eligibility for clients receiving CRCCP-funded clinical services?
Choose one of the following answers
Only numbers may be entered in 'Other % FPL (please specify):' accompanying text field.

- ☐ 250% FPL
- ☐ 200% FPL
- ☐ Other % FPL (please specify): [   ]

2. During PY2, did your CRCCP require clients to provide any of the following types of documentation as proof of financial eligibility?
Check any that apply

- ☐ Pay stubs
- ☐ Tax forms (W-2)
- ☐ Proof of self-employment income
- ☐ Proof of eligibility for other social services (e.g. WIC, TANF, Unemployment)
- ☐ Signed affidavit
- ☐ Other (please specify): [   ]
- ☐ Our CRCCP did not require proof of financial eligibility

3. During PY2, were **under**-insured clients eligible to receive clinical services through your CRCCP? (i.e., under-insured are clients who are insured but cannot afford their insurance co-pay or deductible or whose insurance plan does not cover cancer screening)
Choose one of the following answers

- ○ Yes
- ○ No

4. During PY2, did your program apply any additional eligibility criteria, specifically for **under**-insured clients, to receive CRCCP-funded clinical services?
Choose one of the following answers

- ☐ Yes (please describe): [   ]
- ☐ No

Section 6A, continued

5. During PY2, among **under**-insured clients, what costs were reimbursed by your CRCCP program?
Check any that apply

- ☐ Co-pays
- ☐ Deductibles
- ☐ All clinical costs
- ☐ Other (please specify): [_____]

6. During PY2, did your CRCCP program track the insurance status of clients?
Choose one of the following answers

- ○ Yes - in a data collection system
- ○ Yes - manually or paper form only
- ○ No

7. During PY2, what percentage of clients receiving clinical services through your CRCCP program were **under**-insured? *(enter 999 if unknown)*
Each answer must be between 0 and 999
Only an integer value may be entered in this field.

[_____] %

SECTION 6B: PATIENT NAVIGATION (PN) FOR CLIENTS RECEIVING CRCCP SCREENING SERVICES

1. During PY2, how did your CRCCP program support PN activities for clients whose screening was paid by the CRCCP?
Check any that apply

- ☐ Grantee staff served as PNs
- ☐ Funding through a contract for FTE support for PNs
- ☐ Reimbursement to providers/clinics for PN services on a per-patient basis
- ☐ In-kind support for PNs from a community partner/program
- ☐ Other (please specify)
- ☐ Did not implement Patient Navigation activities

1a. Other ways of supporting PN activities for clients whose screenings were paid for by the CRCCP.

[text box]

2. During PY2, what activities were delivered by PNs to clients receiving screening services paid for by your CRCCP?
Check any that apply

- ☐ Conducted clinic in-reach to recruit men and women for CRC screening
- ☐ Conducted client outreach to recruit men and women for CRC screening
- ☐ Assessed client barriers to CRC screening
- ☐ Educated clients about CRC screening test procedures
- ☐ Educated clients about bowel preparation procedures for endoscopy
- ☐ Provided peer support to clients
- ☐ Addressed clients' socio-cultural barriers/issues
- ☐ Sent FOBT/FIT kits to clients due for CRC screening
- ☐ Made reminder calls/emails to clients to return FOBT/FIT kits
- ☐ Assisted clients in securing financial payment for CRC screening/diagnostics (e.g., helped enroll in Medicaid or other insurance, secured free colonoscopy)
- ☐ Assisted clients in scheduling appointments for endoscopy
- ☐ Arranged/provided transportation services
- ☐ Arranged/provided translation (language) services
- ☐ Facilitated child care or elder care services
- ☐ Made reminder calls/emails for endoscopy appointments
- ☐ Tracked/followed-up clients to ensure screening was completed and patient received results
- ☐ Tracked/followed-up to ensure the primary care provider received endoscopy results
- ☐ Made recommendations to clinics/health systems on procedural or other changes that supported client adherence to screening
- ☐ Explained screening/diagnostic test results
- ☐ Assisted clients diagnosed with cancer to get into cancer treatment
- ☐ Identified clients in need of rescreening
- ☐ Other (please specify): [text box]

Section 6B, continued

3. During PY2, did your CRCCP program evaluate the PN activities available to CRCCP clients?
Check any that apply

☐ Yes, we conducted a **process evaluation** of these PN activities (e.g., number of men and women who were formally assessed by patient navigators)

☐ Yes, we conducted an **outcome evaluation** of these PN activities, (e.g., percent of men and women served by patient navigators who completed screening)

☐ No, but we developed a plan to evaluate these PN activities in the future

☐ No, we did not evaluate or plan for an evaluation of these PN activities in PY2

4. During PY2, what type of data did PNs serving your CRCCP clients collect and report to your CRCCP?
Check any that apply

☐ Number of clients navigated

☐ FOBT/FIT return rate

☐ Colonoscopy completion rate

☐ CRC screening completion rate

☐ Number of screenings with cancer detected

☐ Number of screenings with adenomas detected

☐ Other (please specify): _____

☐ Did not collect and monitor any of these data

SECTION 6C: CRCCP CLINIC SERVICE REIMBURSEMENT MODEL AND DATA USE

1. During PY2, which payment reimbursement model best describes how your CRCCP program paid for screening and diagnostic clinical services?
Check any that apply

☐ Our organization provides clinical services directly

☐ Fee for service *(Provider bills and is reimbursed for services/procedures performed; may be managed internally by the grantee or externally by contractor, third party payer, etc.)*

☐ Capitated payment *(A uniform reimbursement rate per person served is established for a specified group of screening and/or diagnostic services.)*

☐ Bundled payment *(Reimbursement model where rates are established according to tiered case outcomes and are reimbursed retrospectively)*

☐ Employed/Contracted Service Provider *(Grantee uses CRCCP funds to employ or contract with service providers for screening and/or diagnostic services; uses other vendor for cytology, radiology, etc.)*

☐ Other payment model (please specify): [   ]

SECTION 6D: CRCCP PROVIDER SITES

1. In the table below, please enter the number of individual **primary care sites** that delivered CRCCP screening services (including referring for colonoscopy) in PY2 according to the type of provider setting. Please provide the number of **sites or clinics**, not the number of contracts. Do **not** include specialty clinics (e.g., endoscopy centers, labs).

If no sites of this type participated, enter "0". If this type of site participated, but you do not know the number of sites, enter "9999".

Federally Qualified Health Centers or Community Health Centers	_____	sites
Indian Health Service or other tribal health organization sites or clinics	_____	sites
Individual or groups of primary care provider (PCP) sites or clinics, **not including FQHCs**	_____	sites
Health care systems, hospitals, or clinics associated with an insurer (e.g. VA, Kaiser)	_____	sites
Other (please specify)	_____	sites

1a. Other primary care sites or clinics (please specify)

[   ]

2. Please enter the number of endoscopy/gastrointestinal (GI) sites or clinics that delivered CRCCP screening services in PY2 (either initial colonoscopy or follow-up colonoscopy to abnormal FOBT/FIT).
Each answer must be between 0 and 9999
Only an integer value may be entered in this field.

_____ sites

3. Please describe any challenges faced when implementing Component 2.

[   ]

ATTENTION: You have reached the end of the question and answer portion of the survey. Clicking on "**Next**" will take you to the "**Review Answers & Submit**" section where you will be permitted to review your responses before finalizing them

Your responses will be analyzed to check for missing data and inconsistencies. If missing data or inconsistencies are found you will be asked to revisit the sections/questions identified and make changes before submitting your responses. You will not be able to submit your answers until all of the issues identified have been resolved and you have certified your answers.

Please be aware, however, that once you certify your answers and submit your survey you WILL NOT be allowed to edit these, nor any other, responses.