**Attachment C: NCCCP Awardees Data Collection Instrument**

Form Approved

OMB No. 0920-0879

Expiration Date 01/31/2021

Thank you for participating in this assessment!

The Centers for Disease Control and Prevention’s (CDC) Division of Cancer Prevention and Control (DCPC) funds the National Comprehensive Cancer Control Program (NCCCP DP17-1701). Recipients have been tasked with implementing a program to support cancer coalition efforts that leverage resources to plan and implement evidence-based strategies. These strategies promote the primary prevention of cancer, support cancer early detection efforts, address the needs of survivors, and promote health equity. DCPC is interested in assessing NCCCP DP17-1701 recipients’ 1) program capacity; 2) partner contributions; 3) intervention implementation; and 4) program accomplishments. This assessment is being administered to program directors of NCCCP recipients. The findings from the assessment will be used to identify how CDC can make program improvements and assure a robust public health workforce.

Please respond to the questions according to your individual experience. We expect this assessment to take approximately 45 minutes to complete. Your responses to this assessment will be stored and maintained by ICF, without any identifying information. Individually identifiable responses will not be provided to CDC staff, and only aggregated information will be reported. Completion of this assessment is voluntary.

If you have any questions about this assessment, please contact Janice Vick at janice.vick@icf.com or 404-592-2296.

CDC estimates the average public reporting burden for this collection of information as **45** minutes per response, including the time for reviewing instructions, searching existing data/information sources, gathering and maintaining the data/information needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing burden to CDC/ATSDR Information Collection Review Office, 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30333; ATTN: PRA (0920-0879).

**Section 1: Participant characteristics**

The purpose of the questions in this section is to collect information on your jurisdiction, current role within the program, tenure in the role, and chronic disease experience.

1. Please select your state, tribal, territory, or local jurisdiction from the list below.
* Alabama Department of Health
* Alaska Department of Health

* Alaska Native Tribal Health Consortium
* American Indian Cancer Foundation
* American Samoa Department of Health
* Arizona Department of Health Services
* Arkansas Department of Health
* California Department of Public Health
* California Rural Indian Health Board Inc.
* Cherokee Nation Health Service Group
* Colorado Department of Public Health and Environment
* Commonwealth of The Northern Mariana Islands
* Connecticut Department of Public Health
* Delaware Department of Health and Social Services
* District of Columbia Department Of Health
* Federated States of Micronesia Department of Health, Education and Social Affairs
* Federated States of Micronesia Department of Health, Education and Social Affairs: Chuuk State
* Federated States of Micronesia Department of Health, Education and Social Affairs: Kosrae State
* Federated States of Micronesia Department of Health, Education and Social Affairs: Pohnpei State
* Federated States of Micronesia Department of Health, Education and Social Affairs: Yap State
* Florida Department of Health
* Fond Du Lac Reservation
* Georgia Department of Human Resources
* Guam Department of Public Health and Social Services
* Hawaii Department of Health
* Idaho Department of Health and Welfare
* Illinois Department of Public Health
* Indiana State Department of Health
* Inter-tribal Council of Michigan, Inc
* Iowa Department of Public Health
* Kansas Department of Health and Environment
* Louisiana State University Health Sciences Center
* Maine Department of Health
* Marshall Islands Ministry of Health
* Maryland Department of Health
* Massachusetts Department of Health-Middlesex County
* Michigan Department of Health and Human Services
* Minnesota Department of Health
* Mississippi Department of Health
* Montana Department of Public Health and Human Services
* Nebraska Department of Health and Human Services
* Nevada Department of Health and Human Services
* New Hampshire Department of Health and Human Services
* New Jersey Department of Health
* New Mexico Department of Health
* New York State Department of Health and Health Research, Inc.
* North Carolina Department of Health and Human Services
* North Dakota Department of Health
* Northwest Portland Area Indian Health Board
* Ohio Department of Health
* Oklahoma State Department of Health
* Oregon State Department of Human Services
* Pennsylvania Department of Health
* Republic of Palau Ministry of Health
* Rhode Island Department of Health
* South Carolina Department of Health and Environmental Control
* South Dakota Department of Health
* South Puget Intertribal Planning Agency
* State of Missouri Department of Health
* Tennessee Department of Health
* Texas Department of State Health Services
* University of Kentucky Research Foundation
* University of Puerto Rico Medical Sciences Campus
* Utah State Department of Health
* Vermont Department of Health
* Virginia Department of Health
* Washington State Department of Health
* West Virginia Department of Health and Human Services
* Wisconsin Department of Health and Family Services
* Wyoming Department of Health
1. How long have you been in your current role?
* Less than three years
* 3-5 Years
* 6-10 Years
* Over 10 Years
1. How long have you been working in chronic disease?
* Less than three years
* 3-5 Years
* 6-10 Years
* Over 10 Years

**Section 2: Program capacity**

The purpose of the questions in this section is to understand what factors have been important for your program’s capacity to implement CCC program priorities, activities, and strategies.

**CCC program priorities** fall under four priority areas:

1. Address Primary Prevention
2. Support Early Detection
3. Address Needs of Cancer Survivors
4. Reduce Cancer Disparities

**Activities** fall under these categories:

* Program Collaboration – collaboration with chronic disease prevention and risk factor public health programs.
* External Partnerships – collaboration with comprehensive cancer control coalition, coalition member organizations, or other external partners that have a vested interest in cancer prevention and control
* Cancer Data and Surveillance – use of cancer data and public health surveillance data to inform program action
* Implement the Evidence-based Interventions – implement evidenced based interventions that facilitate environmental change, health systems transformation, or community clinical linkages that aim to reduce cancer risk, promote screening, and support cancer survivors
* Program Monitoring and Evaluation – conduct program monitoring and evaluation to articulate outcomes and stimulate program improvement

**Strategies include:**

* Environmental Approaches for Sustainable Cancer Control – actions that reduce risk and facilitate health behaviors through the enhancement of social and physical environments
* Community-Clinical Linkages to Aid Patient Support – efforts that increase the availability and utility of preventive health services and health extender services

Health Systems Changes – interventions that increase efficiency and effectiveness of clinical care

4. Please indicate how important the following factors have been to your program’s capacity to implement CCC program priorities and activities.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Not important | Somewhat Important | Moderately Important | Very Important | Don’t Know/Not Sure |
| CDC funding |  |  |  |  |  |
| Receipt of technical assistance and training from the Comprehensive Cancer Control National Partnership |  |  |  |  |  |
| Relationships with National Networks to address health equity |  |  |  |  |  |
| Coordination, sharing of resources, joint intervention implementation with CCC partnership networks, consortium, coalitions, or other chronic disease partners |  |  |  |  |  |
| Coordination and communication with cancer control leadership team |  |  |  |  |  |
| Availability and capacity to use surveillance data or evidence base” |  |  |  |  |  |
| Staff knowledge and expertise to use and apply cancer prevention and control evidence base to direct CCC activities  |  |  |  |  |  |
| Internal evaluation or data monitoring capacity |  |  |  |  |  |

**Section 3: Program partners**

The purpose of the questions in this section is to understand the way your partners have contributed to the implementation of your program, and any barriers you have encountered in working with partners.

1. When thinking of partners who have contributed most to your program’s implementation of NCCCP priorities, how would you define their involvement with your program: [SELECT ONE FOR EACH PRIORITY]

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | Address Primary Prevention | Support Early Detection | Address needs of cancer survivors | Reduce cancer disparities |
| Exchanging information or resources for mutual benefit |  |  |  |  |
| Mutually beneficial, co-planning activities for a common purpose |  |  |  |  |
| Sharing resources for mutual benefit and a common purpose |  |  |  |  |
| Working together to enhance the capacity of another for mutual benefit and common purpose |  |  |  |  |

1. Please rate the importance of the following partner roles for your program’s implementation of activities that *address primary prevention*.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Not Important | Somewhat Important | Moderately Important | Very Important | Don’t Know/Not Sure |
| **Funder:** provides financial resources or identifies available resources |  |  |  |  |  |
| **Promoter:** garners support for activities that are supported by the coalition  |  |  |  |  |  |
| **Community organizer**: brings members of the community together to make decisions |  |  |  |  |  |
| **Technical Assistance Provider:** provides resources and expertise and builds capacity |  |  |  |  |  |
| **Facilitator:** helps collaborative or group work be more efficient |  |  |  |  |  |

1. Please rate the importance of the following partner roles for your program’s implementation of activities that *support early detection*.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Not Important | Somewhat Important | Moderately Important | Very Important | Don’t Know/Not Sure |
| **Funder:** provides financial resources or identifies available resources |  |  |  |  |  |
| **Promoter:** garners support for activities that are supported by the coalition  |  |  |  |  |  |
| **Community organizer**: brings members of the community together to make decisions |  |  |  |  |  |
| **Technical Assistance Provider:** provides resources and expertise and builds capacity |  |  |  |  |  |
| **Facilitator:** helps collaborative or group work be more efficient |  |  |  |  |  |

1. Please rate the importance of the following partner roles for your program’s implementation of activities that *address needs of cancer survivors*.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Not Important | Somewhat Important | Moderately Important | Very Important | Don’t Know/Not Sure |
| **Funder:** provides financial resources or identifies available resources |  |  |  |  |  |
| **Promoter:** garners support for activities that are supported by the coalition  |  |  |  |  |  |
| **Community organizer**: brings members of the community together to make decisions |  |  |  |  |  |
| **Technical Assistance Provider:** provides resources and expertise and builds capacity |  |  |  |  |  |
| **Facilitator:** helps collaborative or group work be more efficient |  |  |  |  |  |

1. Please rate the importance of the following partner roles for your program’s implementation of activities that *reduce cancer disparities*.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Not Important | Somewhat Important | Moderately Important | Very Important | Don’t Know/Not Sure |
| **Funder:** provides financial resources or identifies available resources |  |  |  |  |  |
| **Promoter:** garners support for activities that are supported by the coalition  |  |  |  |  |  |
| **Community organizer**: brings members of the community together to make decisions |  |  |  |  |  |
| **Technical Assistance Provider:** provides resources and expertise and builds capacity |  |  |  |  |  |
| **Facilitator:** helps collaborative or group work be more efficient |  |  |  |  |  |

1. Please rate the importance of the following potential facilitators to working with key partners on activities that *address primary prevention*.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Not Important | Somewhat Important | Moderately Important | Very Important | Don’t Know/Not Sure |
| Existing relationships with key partners |  |  |
| Ability to allocate resources to partners  |  |  |  |  |  |
| Similarities in organizational mission, goals, or values |  |  |  |  |  |
| Shared agreement in purpose and expectations |  |  |  |  |  |
| Sufficient time and capacity to work with partners |  |  |  |  |  |
| Program maturity or infrastructure |  |  |  |  |  |

1. Please rate the importance of the following potential facilitators to working with key partners on activities that *support early detection*.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Not Important | Somewhat Important | Moderately Important | Very Important | Don’t Know/Not Sure |
| Existing relationships with key partners |  |  |
| Ability to allocate resources to partners  |  |  |  |  |  |
| Similarities in organizational mission, goals, or values |  |  |  |  |  |
| Shared agreement in purpose and expectations |  |  |  |  |  |
| Sufficient time and capacity to work with partners |  |  |  |  |  |
| Program maturity or infrastructure |  |  |  |  |  |

1. Please rate the importance of the following potential facilitators to working with key partners on activities that *address needs of cancer survivors*.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Not Important | Somewhat Important | Moderately Important | Very Important | Don’t Know/Not Sure |
| Existing relationships with key partners |  |  |
| Ability to allocate resources to partners  |  |  |  |  |  |
| Similarities in organizational mission, goals, or values |  |  |  |  |  |
| Shared agreement in purpose and expectations |  |  |  |  |  |
| Sufficient time and capacity to work with partners |  |  |  |  |  |
| Program maturity or infrastructure |  |  |  |  |  |

1. Please rate the importance of the following potential facilitators to working with key partners on activities that *reduce cancer disparities*.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Not Important | Somewhat Important | Moderately Important | Very Important | Don’t Know/Not Sure |
| Existing relationships with key partners |  |  |
| Ability to allocate resources to partners  |  |  |  |  |  |
| Similarities in organizational mission, goals, or values |  |  |  |  |  |
| Shared agreement in purpose and expectations |  |  |  |  |  |
| Sufficient time and capacity to work with partners |  |  |  |  |  |
| Program maturity or infrastructure |  |  |  |  |  |

1. Please rate the importance of the following potential barriers to working with key partners on activities that *address primary prevention*.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Not Important | Somewhat Important | Moderately Important | Very Important | Don’t Know/Not Sure |
| Access to and developing relationship with new partners |  |  |
| Maintaining existing partnerships |  |  |  |  |  |
| Limited resources to allocate to support partner activities  |  |  |  |  |  |
| Differences in organizational culture, mission or goals |  |  |  |  |  |
| Differences in understanding in purpose and expectations |  |  |  |  |  |
| Limited time or staff capacity |  |  |  |  |  |
| Program maturity or infrastructure |  |  |  |  |  |

1. Please rate the importance of the following potential barriers to working with key partners on activities that *support early detection*.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Not Important | Somewhat Important | Moderately Important | Very Important | Don’t Know/Not Sure |
| Access to and developing relationship with new partners |  |  |
| Maintaining existing partnerships |  |  |  |  |  |
| Limited resources to allocate to support partner activities  |  |  |  |  |  |
| Differences in organizational culture, mission or goals |  |  |  |  |  |
| Differences in understanding in purpose and expectations |  |  |  |  |  |
| Limited time or staff capacity |  |  |  |  |  |
| Program maturity or infrastructure |  |  |  |  |  |

1. Please rate the importance of the following potential barriers to working with key partners on activities that *address needs of cancer survivors*.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Not Important | Somewhat Important | Moderately Important | Very Important | Don’t Know/Not Sure |
| Access to and developing relationship with new partners |  |  |
| Maintaining existing partnerships |  |  |  |  |  |
| Limited resources to allocate to support partner activities  |  |  |  |  |  |
| Differences in organizational culture, mission or goals |  |  |  |  |  |
| Differences in understanding in purpose and expectations |  |  |  |  |  |
| Limited time or staff capacity |  |  |  |  |  |
| Program maturity or infrastructure |  |  |  |  |  |

1. Please rate the importance of the following potential barriers to working with key partners on activities that *reduce cancer disparities*.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Not Important | Somewhat Important | Moderately Important | Very Important | Don’t Know/Not Sure |
| Access to and developing relationship with new partners |  |  |
| Maintaining existing partnerships |  |  |  |  |  |
| Limited resources to allocate to support partner activities  |  |  |  |  |  |
| Differences in organizational culture, mission or goals |  |  |  |  |  |
| Differences in understanding in purpose and expectations |  |  |  |  |  |
| Limited time or staff capacity |  |  |  |  |  |
| Program maturity or infrastructure |  |  |  |  |  |

**The next few questions ask about different types of partners. Please apply these definitions for those questions:**

* **External partners**: Individuals or organizations that make up the coalition. Examples include nongovernmental organizations, academia, and professional organizations.
* **Internal partners**: Programs and entities within the health department. Examples include DP17-1701 programs, chronic disease programs, immunization programs, other surveillance programs.
* **Nontraditional partners**: Organizations or individuals without a public health or other health-related mission. Examples include business owners, transportation agencies, or other governmental or nongovernmental organizations that are not typically part of the coalition.
1. Please list the specific names of any partners that meet the definition of “nontraditional partner”, as described above. [OPEN-ENDED]
2. Please rate the importance of **external partners** in the **program planning activities** listed below.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Not Important | Somewhat Important | Moderately Important | Very Important | Don’t Know/Not Sure |
| Conducting a needs or resource assessment |  |  |  |  |  |
| Creating a logic model |  |  |  |  |  |
| Outlining roles and responsibilities |  |  |  |  |  |
| Identifying resources (physical, funding, staffing, etc.) |  |  |  |  |  |
| Providing subject matter expertise or training |  |  |  |  |  |
| Selecting evidence-based interventions |  |  |  |  |  |
| Adapting evidence-based interventions to meet cultural needs |  |  |  |  |  |

1. Please rate the importance of **internal partners** in the **program planning activities** listed below.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Not Important | Somewhat Important | Moderately Important | Very Important | Don’t Know/Not Sure |
| Conducting a needs or resource assessment |  |  |  |  |  |
| Creating a logic model |  |  |  |  |  |
| Outlining roles and responsibilities |  |  |  |  |  |
| Identifying resources (physical, funding, staffing, etc.) |  |  |  |  |  |
| Providing subject matter expertise or training |  |  |  |  |  |
| Selecting evidence-based interventions |  |  |  |  |  |
| Adapting evidence-based interventions to meet cultural needs |  |  |  |  |  |

1. Please rate the importance of **nontraditional partners** in the **program planning activities** listed below.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Not Important | Somewhat Important | Moderately Important | Very Important | Don’t Know/Not Sure |
| Conducting a needs or resource assessment |  |  |  |  |  |
| Creating a logic model |  |  |  |  |  |
| Outlining roles and responsibilities |  |  |  |  |  |
| Identifying resources (physical, funding, staffing, etc.) |  |  |  |  |  |
| Providing subject matter expertise or training |  |  |  |  |  |
| Selecting evidence-based interventions |  |  |  |  |  |
| Adapting evidence-based interventions to meet cultural needs |  |  |  |  |  |

1. Please rate the importance of **external partners** in the **program implementation activities** listed below.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Not Important | Somewhat Important | Moderately Important | Very Important | Don’t Know/Not Sure |
| Support for monitoring fidelity to the intervention |  |  |  |
| Provision of physical resources (e.g., the setting for the intervention) |  |  |  |  |  |
| Provision of financial resources |  |  |  |  |  |
| Provision of human resources |  |  |  |  |  |
| Implementation of intervention component |  |  |  |  |  |

1. Please rate the importance of **internal partners** in the **program implementation activities** listed below.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Not Important | Somewhat Important | Moderately Important | Very Important | Don’t Know/Not Sure |
| Support for monitoring fidelity to the intervention |  |  |  |
| Provision of physical resources (e.g., the setting for the intervention) |  |  |  |  |  |
| Provision of financial resources |  |  |  |  |  |
| Provision of human resources |  |  |  |  |  |
| Implementation of intervention component |  |  |  |  |  |

1. Please rate the importance of **nontraditional partners** in the **program implementation activities** listed below.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Not Important | Somewhat Important | Moderately Important | Very Important | Don’t Know/Not Sure |
| Support for monitoring fidelity to the intervention |  |  |  |
| Provision of physical resources (e.g., the setting for the intervention) |  |  |  |  |  |
| Provision of financial resources |  |  |  |  |  |
| Provision of human resources |  |  |  |  |  |
| Implementation of intervention component |  |  |  |  |  |

1. Please rate the importance of **external partners** in the **program evaluation activities** listed below.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Not Important | Somewhat Important | Moderately Important | Very Important | Don’t Know/Not Sure |
| Evaluation planning: developing evaluation questions |  |  |  |
| Evaluation planning: planning for data collection |  |  |  |  |  |
| Evaluation planning: data analysis plan |  |  |  |  |  |
| Data collection |  |  |  |  |  |
| Data management |  |  |  |  |  |
| Data analysis |  |  |  |  |  |
| Evaluation reporting |  |  |  |  |  |

1. Please rate the importance of **internal partners** in the **program evaluation activities** listed below.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Not Important | Somewhat Important | Moderately Important | Very Important | Don’t Know/Not Sure |
| Evaluation planning: developing evaluation questions |  |  |  |
| Evaluation planning: planning for data collection |  |  |  |  |  |
| Evaluation planning: data analysis plan |  |  |  |  |  |
| Data collection |  |  |  |  |  |
| Data management |  |  |  |  |  |
| Data analysis |  |  |  |  |  |
| Evaluation reporting |  |  |  |  |  |

1. Please rate the importance of **nontraditional partners** in the **program evaluation activities** listed below.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Not Important | Somewhat Important | Moderately Important | Very Important | Don’t Know/Not Sure |
| Evaluation planning: developing evaluation questions |  |  |  |
| Evaluation planning: planning for data collection |  |  |  |  |  |
| Evaluation planning: data analysis plan |  |  |  |  |  |
| Data collection |  |  |  |  |  |
| Data management |  |  |  |  |  |
| Data analysis |  |  |  |  |  |
| Evaluation reporting |  |  |  |  |  |

**Section 4: Intervention implementation**

The purpose of the questions in this section is to understand your approach to identifying evidence-based interventions, your perceptions related to implementation, and implementation facilitators and barriers.

1. How would you rate the following characteristics for their importance in your approach to selecting EBIs to *address primary prevention*?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Not Important | Somewhat Important | Moderately Important | Very Important | Don’t Know/Not Sure |
| Easy to implement |  |  |  |
| Available for free or low cost |  |  |  |  |  |
| Easy to evaluate |  |  |  |  |  |
| Consistent with our organization’s mission |  |  |  |  |  |
| Technical assistance is available |  |  |  |  |  |
| Innovative |  |  |  |  |  |
| We have used it before |  |  |  |  |  |
| People in community requested it |  |  |  |  |  |
| Selected by partners |  |  |  |  |  |
| Easily adaptable |  |  |  |  |  |
| Scientific evidence saying it works |  |  |  |  |  |

1. How would you rate the following characteristics for their importance in your approach to selecting EBIs to *support early detection*?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Not Important | Somewhat Important | Moderately Important | Very Important | Don’t Know/Not Sure |
| Easy to implement |  |  |  |
| Available for free or low cost |  |  |  |  |  |
| Easy to evaluate |  |  |  |  |  |
| Consistent with our organization’s mission |  |  |  |  |  |
| Technical assistance is available |  |  |  |  |  |
| Innovative |  |  |  |  |  |
| We have used it before |  |  |  |  |  |
| People in community requested it |  |  |  |  |  |
| Selected by partners |  |  |  |  |  |
| Easily adaptable |  |  |  |  |  |
| Scientific evidence saying it works |  |  |  |  |  |

1. How would you rate the following characteristics for their importance in your approach to selecting EBIs to *address needs of cancer survivors*?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Not Important | Somewhat Important | Moderately Important | Very Important | Don’t Know/Not Sure |
| Easy to implement |  |  |  |
| Available for free or low cost |  |  |  |  |  |
| Easy to evaluate |  |  |  |  |  |
| Consistent with our organization’s mission |  |  |  |  |  |
| Technical assistance is available |  |  |  |  |  |
| Innovative |  |  |  |  |  |
| We have used it before |  |  |  |  |  |
| People in community requested it |  |  |  |  |  |
| Selected by partners |  |  |  |  |  |
| Easily adaptable |  |  |  |  |  |
| Scientific evidence saying it works |  |  |  |  |  |

1. How would you rate the following characteristics for their importance in your approach to selecting EBIs to *reduce cancer disparities*?

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | Not Important | Somewhat Important | Moderately Important | Very Important | Don’t Know/Not Sure |
| Easy to implement |  |  |  |
| Available for free or low cost |  |  |  |  |  |
| Easy to evaluate |  |  |  |  |  |
| Consistent with our organization’s mission |  |  |  |  |  |
| Technical assistance is available |  |  |  |  |  |
| Innovative |  |  |  |  |  |
| We have used it before |  |  |  |  |  |
| People in community requested it |  |  |  |  |  |
| Selected by partners |  |  |  |  |  |
| Easily adaptable |  |  |  |  |  |
| Scientific evidence saying it works |  |  |  |  |  |

1. In which priority area have you had the most success in implementing EBIs? [SELECT ONE]
* Address primary prevention
* Support early detection
* Address needs of cancer survivors
* Reduce cancer disparities

In 1-2 sentences, please describe the nature of this success. It could be a process you used or an especially successful intervention in terms of an outcome achieved.

1. In which priority area have you had the biggest challenge in implementing EBIs? [SELECT ONE]
* Address primary prevention
* Support early detection
* Address needs of cancer survivors
* Reduce cancer disparities

In 1-2 sentences, please describe the nature of this challenge and what lessons you learned from this experience (i.e., what would you do differently if you had the chance to do it again)?

1. The table below lists common EBIs in each priority area. Please indicate whether you implemented each EBI, and the most appropriate scale of each EBI, from the options provided.

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **EBI**  | **Did you implement this EBI?** | **Large-scale:** Multi-recipient or recipient jurisdiction-wide | **Medium-scale:** Across several counties (or equivalent) | **Small-scale:** Within a municipality (or equivalent) | **Small-scale:** Within a health system |
| **Primary Prevention:** Community-based interventions implemented in combination to increase community demand for vaccines |  |  |  |  |  |
| **Primary Prevention:** Health care system-based interventions implemented in combination to increase appropriate vaccination |  |  |  |  |  |
| **Early detection:** Patient navigation to facilitate timely access to screening |  |  |  |  |  |
| **Early detection:** Small media to increase community demand for cancer screening services |  |  |  |  |  |
| **Cancer survivorship:** Educate health care providers about cancer survivorship issues from diagnosis through long-term treatment effects and end-of-life care |  |  |  |  |  |
| **Cancer survivorship:** Develop and disseminate public education programs that empower survivors to make informed decisions |  |  |  |  |  |
| **Health Equity:** Enhancing methods to identify and describe health disparities |  |  |  |  |  |
| **Health Equity:** Use of linguistically and culturally appropriate health education materials to promote health equity |  |  |  |  |  |

**Section 5: Program Accomplishments**

The purpose of the questions in this section is to learn about program implementation accomplishments.

1. Please indicate the most notable policy change your program has made via program activities to support the following [SELECT ONE]:
* Increased policies that support healthy lifestyle behaviors
* Increased policies that support high-quality cancer screening
* None of the above

[if indicated above]

* What accomplishment are you most proud of related to increasing policies that support healthy lifestyle behaviors? Please describe, and, where possible, include numerical data to illustrate these accomplishments. [OPEN ENDED]
* What accomplishment are you most proud of related to increasing policies that support high-quality cancer screening? Please describe, and, where possible, include numerical data to illustrate these accomplishments. [OPEN ENDED]
1. Please indicate the most notable community change your program has made via program activities to support the following [SELECT ONE]:
* New or enhanced school programs and policies to support cancer prevention activities
* New or enhanced worksite programs and policies to support cancer prevention activities
* New or enhanced child care programs and policies to support cancer prevention activities
* New or enhanced adult programs and policies to support cancer prevention activities
* Increased evidence-based lifestyle and wellness survivorship programs
* None of the above

[if indicated above]

* What accomplishment are you most proud of related to developing new or enhancing school programs and policies to support cancer prevention activities? Please describe, and, where possible, include numerical data to illustrate these accomplishments. [OPEN ENDED]
* What accomplishment are you most proud of related to developing new or enhancing worksite programs and policies to support cancer prevention activities? Please describe, and, where possible, include numerical data to illustrate these accomplishments. [OPEN ENDED]
* What accomplishment are you most proud of related to developing new or enhancing child care programs and policies to support cancer prevention activities? Please describe, and, where possible, include numerical data to illustrate these accomplishments. [OPEN ENDED]
* What accomplishment are you most proud of related to developing new or enhancing adult programs and policies to support cancer prevention activities? Please describe, and, where possible, include numerical data to illustrate these accomplishments. [OPEN ENDED]
* What accomplishment are you most proud of related to increasing evidence-based lifestyle and wellness survivorship programs? Please describe, and, where possible, include numerical data to illustrate these accomplishments. [OPEN ENDED]
1. Please indicate the most notable health system changes your program has made via program activities to support the following [SELECT ONE]:
* Improved community linkages.
* Increased chronic disease self-management support among cancer survivors
* Improved systems to support quality screening.
* Increased health extender services
* None of the above

[if indicated above]

* What accomplishment are you most proud of related to Improving community linkages? Please describe, and, where possible, include numerical data to illustrate these accomplishments. [OPEN ENDED]
* What accomplishment are you most proud of related to Increasing chronic disease self-management support among cancer survivors? Please describe, and, where possible, include numerical data to illustrate these accomplishments. [OPEN ENDED]
* What accomplishment are you most proud of related to improving systems to support quality screening? Please describe, and, where possible, include numerical data to illustrate these accomplishments. [OPEN ENDED]
* What accomplishment are you most proud of related to increasing health extender services? Please describe, and, where possible, include numerical data to illustrate these accomplishments. [OPEN ENDED]
1. Please indicate the most notable intervention your program has implemented focused on decreasing disparities related to cancer risk reduction. Please specify the population for which you expect to see decreased disparities [SELECT ONE].
* Reduced tobacco use or exposure.
* Reduced alcohol use.
* Reduced UV exposure.
* Increased HPV vaccination rates.
* Improved physical activity rates.
* Improved diets.
* Increased early detection of cancer.
* Improved cancer care for survivors.
* None of the above

[if answer other than “none of the above”]:

Please describe the specific population for which you expect to see decreased disparities.

Specific population: [OPEN ENDED]

[if indicated above]

* What accomplishment are you most proud of related to reducing disparities in tobacco use or exposure? Please describe, and, where possible, include numerical data to illustrate these accomplishments. [OPEN ENDED]
* What accomplishment are you most proud of related to reducing disparities in alcohol use? Please describe, and, where possible, include numerical data to illustrate these accomplishments. [OPEN ENDED]
* What accomplishment are you most proud of related to reducing disparities in UV exposure? Please describe, and, where possible, include numerical data to illustrate these accomplishments. [OPEN ENDED]
* What accomplishment are you most proud of related to reducing disparities in HPV vaccination rates? Please describe, and, where possible, include numerical data to illustrate these accomplishments. [OPEN ENDED]
* What accomplishment are you most proud of related to reducing disparities in physical activity rates? Please describe, and, where possible, include numerical data to illustrate these accomplishments. [OPEN ENDED]
* What accomplishment are you most proud of related to reducing disparities in diet quality? Please describe, and, where possible, include numerical data to illustrate these accomplishments. [OPEN ENDED]
* What accomplishment are you most proud of related to reducing disparities in early detection of cancer? Please describe, and, where possible, include numerical data to illustrate these accomplishments. [OPEN ENDED]
* What accomplishment are you most proud of related to reducing disparities in cancer care for survivors? Please describe, and, where possible, include numerical data to illustrate these accomplishments. [OPEN ENDED]
1. Please describe any additional important accomplishments that make you proud and are important for us to know about.