ATTACHMENT 7: NBCCEDP Clinic-Level Data Instrument (Screenshots)

Prepared with "dummy" data

Welcome Screen

NBCCEDP
Resources

Currently logged on as: t1admin
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Help?

Clinic Baseline and Annual Reporting System (CBARS)

OMB No. 0920-1046
Expiration Date: ##/##/####

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

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

Public reporting burden of this collection of information is estimated to average 45 minutes per response, including the time for reviewing instructions, searching existing data sources, gathering and maintaining the data needed, and completing and reviewing the collection of information. An agency may not conduct or sponsor, and a person is not required to respond to a collection of information unless it displays a currently valid OMB control number. Send comments regarding this burden estimate or any other aspect of this collection of information, including suggestions for reducing this burden to CDC/ATSDR Reports Clearance Officer; 1600 Clifton Road NE, MS D-74, Atlanta, Georgia 30329; ATTN: PRA (0920-1046).

Health System Data

Clinic Data for Test Program 1

Collapse All

-- New Health System --

[-] Andalucia Health System (123)   ->

    -- New Clinic --

    [-] Andalucia Clinic A (001)

        Breast

- Baseline
- Year 1 - NBCCEDP 1701-py1
- Year 2 - NBCCEDP 1701-py2
- Year 3 - NBCCEDP 1701-py3
- -- New Year --

        Cervical

- Baseline
- Year 1 - NBCCEDP 1701-py2
- Year 2 - NBCCEDP 1701-py3
- -- New Year --

    [-] Andalucia Clinic B (002)

        Breast

- Baseline
- Year 1 - NBCCEDP 1701-py3
- -- New Year --

        Cervical

- -- Baseline --

[-] Catalonia Health System (321)

    -- New Clinic --

    [-] Catalonia Clinic A (001)

        Breast

- Baseline
- Year 1 - NBCCEDP 1701-py2
- Year 2 - NBCCEDP 1701-py3
- -- New Year --

        Cervical

- Baseline
- -- New Year --

> **Andalucia Health System**

[Modify] [Delete] [New Clinic]

Partner Health System Characteristics

Health system name:

Andalucia Health System

Health system ID:

123

Total # of primary care clinics in health system (optional):

3

Health system type:

CHC/FQHC

Other health system type:

Type of agreement in place with the health system:

MOU/MOA

Date of formal agreement (optional):

07/01/2017

Health Center Controlled Network name (optional):

Health Center Controlled Network 1

Comments (optional):

[Modify] [Delete] [New Clinic]

Clinic Data - Characteristics

Clinic Data for Test Program 1

Collapse All [🔍]

-- New Health System --

[-] Andalucia Health System (123)

    -- New Clinic --

    [-] Andalucia Clinic A (001)   ->

        Breast

          • Baseline

          • Year 1 - NBCCEDP 1701-py1

          • Year 2 - NBCCEDP 1701-py2

          • Year 3 - NBCCEDP 1701-py3

          • -- New Year --

        Cervical

          • Baseline

          • Year 1 - NBCCEDP 1701-py2

          • Year 2 - NBCCEDP 1701-py3

          • -- New Year --

    [-] Andalucia Clinic B (002)

        Breast

          • Baseline

          • Year 1 - NBCCEDP 1701-py3

          • -- New Year --

        Cervical

          • -- Baseline --

[-] Catalonia Health System (321)

    -- New Clinic --

    [-] Catalonia Clinic A (001)

        Breast

          • Baseline

          • Year 1 - NBCCEDP 1701-py2

          • Year 2 - NBCCEDP 1701-py3

          • -- New Year --

        Cervical

          • Baseline

          • -- New Year --

> **Andalucia Health System** > Andalucia Clinic A

[Modify] [Delete] [New Year]

Clinic Characteristics

Clinic name:

Andalucia Clinic A

Clinic ID:

1

Clinic street address:

123 Main Streen

Clinic city:

Andaluciaville

Clinic state:

Clinic zip:

12345

Clinic type:

CHC/FQHC

# of primary care providers at clinic:

10

Name of primary EHR vendor at clinic:

Other

Other EHR, please specify (optional):

Andalucia EHR

Other HIT tools used for data analytics and reporting:

Yes

PCMH Recognition:

Yes

Newly opened clinic:

No (1 or more years)

Comments (optional):

Clinic Patient Population Characteristics for Breast Cancer Screening

of Patients, Gender, Insurance Status, Ethnicity, Race

Total # of clinic patients, age 50-74, women:

1000

% of clinic patients, age 50-74, women (optional):

50

% of patients, age 50-74, uninsured, women (optional):

10

% of patients, age 50-74, Hispanic, women (optional):

25

Race

% of patients, age 50-74, White, women (optional):

10

% of patients, age 50-74, Black or African American, women (optional):

10

% of patients, age 50-74, Asian, women (optional):

10

% of patients, age 50-74, Native Hawaiian or other Pacific Islander, women (optional):

5

% of patients, age 50-74, American Indian or Alaskan Native, women (optional):

5

% of patients, age 50-74, More than one race, women (optional):

10

Comments (optional):

Clinic Data – Characteristics, continued

Clinic Patient Population Characteristics for Cervical Cancer Screening

of Patients, Gender, Insurance Status, Ethnicity, Race

Total # of clinic patients, age 21-64, women:

| 1000 |

% of clinic patients, age 21-64, women (optional):

| 50 |

% of patients, age 21-64, uninsured, women (optional):

| 10 |

% of patients, age 21-64, Hispanic, women (optional):

| 25 |

Race

% of patients, age 21-64, White, women (optional):

| 10 |

% of patients, age 21-64, Black or African American, women (optional):

| 10 |

% of patients, age 21-64, Asian, women (optional):

| 10 |

% of patients, age 21-64, Native Hawaiian or other Pacific Islander, women (optional):

| 5 |

% of patients, age 21-64, American Indian or Alaskan Native, women (optional):

| 5 |

% of patients, age 21-64, More than one race, women (optional):

| 10 |

Comments (optional):

[Modify] [Delete] [New Year]

Clinic Data – Baseline Breast

Clinic Data for Test Program 1

Collapse All   [🔍]

-- New Health System --

[−] Andalucia Health System (123)

     -- New Clinic --

     [−] Andalucia Clinic A (001)

         Breast

           • Baseline   ->

           • Year 1 - NBCCEDP 1701-py1

           • Year 2 - NBCCEDP 1701-py2

           • Year 3 - NBCCEDP 1701-py3

           • -- New Year --

         Cervical

           • Baseline

           • Year 1 - NBCCEDP 1701-py2

           • Year 2 - NBCCEDP 1701-py3

           • -- New Year --

     [−] Andalucia Clinic B (002)

         Breast

           • Baseline

           • Year 1 - NBCCEDP 1701-py3

           • -- New Year --

         Cervical

           • -- Baseline --

[−] Catalonia Health System (321)

     -- New Clinic --

     [−] Catalonia Clinic A (001)

         Breast

           • Baseline

           • Year 1 - NBCCEDP 1701-py2

           • Year 2 - NBCCEDP 1701-py3

           • -- New Year --

         Cervical

           • Baseline

           • -- New Year --

> **Andalucia Health System** > **Andalucia Clinic A** > Baseline

[Modify] [Delete] [New Year]

Report Period

Baseline Assessment Date:

01/01/2017

Chart Review (CR) Screening Rate Data for Breast Cancer

*Screening rate data may be reported using Chart Review, EHR or Both

CR Denominator to calculate screening rate:

100

CR Numerator to calculate screening rate:

30

CR Screening rate - calculated (%): 30.00

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

Measure used:

HEDIS ▾

Start date of 12-month reporting period:

01/01/2017

End date of 12-month reporting period:

12/31/2017

% of charts reviewed to calculate screening rate: 10.00

Sampling method:

Yes ▾

Comments (optional):

Clinic Data – Baseline Breast, continued

Electronic Health Records (EHR) Screening Rate Data for Breast Cancer

*Screening rate data may be reported using Chart Review, EHR or Both**

EHR Denominator to calculate screening rate:

1000

EHR Numerator to calculate screening rate:

300

EHR Screening rate - calculated (%): 30.00

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

Measure used:

HEDIS

Start date of 12-month reporting period:

01/01/2017

End date of 12-month reporting period:

12/31/2017

EHR rate reporting source:

HCCN data warehouse

How confident are you in the accuracy of the EHR-calculated screening rate?:

Very confident

Screening rate problem:

No

Specify screening rate problem:

Comments (optional):

Clinic Data – Baseline Breast, continued

Monitoring and Quality Improvement for Breast Cancer Screening

Clinic screening policy:
Yes

Clinic champion:
Yes

BCCEDP clinical services:
Yes

Evidence-based Interventions (EBIs)

Patient reminder system in place at baseline:
No

Provider reminder system in place at baseline:
No

Provider assessment and feedback in place at baseline:
No

Reducing structural barriers in place at baseline:
Yes

Small media in place at baseline:
Yes

Patient education in place at baseline:
No

Reducing out of pocket costs in place at baseline:
No

Professional Development and Provider Education

Professional development/provider education in place at baseline:
Yes

Clinic Data – Baseline Breast, continued

Community Outreach, Education, and Support

Community outreach activities in place at baseline:

No ▾

If community health workers (CHWs) used, # of FTE CHWs:

[   ]

Other community-clinical linkage (CCL) activities:

[   ]

Patient Navigation for Screening, Diagnostics, and/or Treatment Initiation

Patient navigation in place at baseline:

Yes ▾

If patient navigation in place, # of FTEs delivering patient navigation:

1.5

Other Breast Cancer-related Strategies

HIT activities in place at baseline (optional):

Provided training on EHR, Develop B and C related reports

Other breast cancer-related strategies in place at baseline (optional):

Quality improvement activities in clinic

[Modify] [Delete] [New Year]

Clinic Data – Annual Breast

Clinic Data for Test Program 1

Collapse All	🔍

-- New Health System --

[-] Andalucia Health System (123)

    -- New Clinic --

    [-] Andalucia Clinic A (001)

        Breast

          • Baseline

          • Year 1 - NBCCEDP 1701-py1   ->

          • Year 2 - NBCCEDP 1701-py2

          • Year 3 - NBCCEDP 1701-py3

          • -- New Year --

        Cervical

          • Baseline

          • Year 1 - NBCCEDP 1701-py2

          • Year 2 - NBCCEDP 1701-py3

          • -- New Year --

    [-] Andalucia Clinic B (002)

        Breast

          • Baseline

          • Year 1 - NBCCEDP 1701-py3

          • -- New Year --

        Cervical

          • -- Baseline --

[-] Catalonia Health System (321)

    -- New Clinic --

    [-] Catalonia Clinic A (001)

        Breast

          • Baseline

          • Year 1 - NBCCEDP 1701-py2

          • Year 2 - NBCCEDP 1701-py3

          • -- New Year --

        Cervical

          • Baseline

          • -- New Year --

> **Andalucia Health System** > **Andalucia Clinic A** > Year 1 (PY1)

[Modify] [Delete]

Report Period

Report period:

NBCCEDP 1701-py1 ▾

Implementation status:

Started ▾

Implementation start date:

Breast cancer activity partnership status:

Not terminated ▾

Reason for termination:

Termination date:

Clinic Patient Population Characteristics for Breast Cancer Screening

Total # of clinic patients, age 50-74, women:

1000 ▲▼

Clinic Data – Annual Breast, continued

Chart Review (CR) Screening Rate Data for Breast Cancer

*Screening rate data may be reported using Chart Review, EHR or Both

CR Denominator to calculate screening rate:

`100`

CR Numerator to calculate screening rate:

`30`

CR Screening rate - calculated (%): 30.00

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

Measure used:

`HEDIS`

Start date of 12-month reporting period:

`01/01/2018`

End date of 12-month reporting period:

`12/31/2018`

% of charts reviewed to calculate screening rate: 10.00

Sampling method:

`Yes`

Comments (optional):

<u>Clinic Data – Annual Breast, continued</u>

Electronic Health Records (EHR) Screening Rate Data for Breast Cancer

***Screening rate data may be reported using Chart Review, EHR or Both**

EHR Denominator to calculate screening rate:

1000

EHR Numerator to calculate screening rate :

300

EHR Screening rate - calculated (%): 30.00

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

Measure used:

HEDIS ▾

Start date of 12-month reporting period:

01/01/2018

End date of 12-month reporting period:

12/31/2018

EHR rate reporting source:

Clinic EHR ▾

How confident are you in the accuracy of the EHR-calculated screening rate?:

Very confident ▾

Screening rate problem:

No ▾

Specify screening rate problem:

Screening rate target:

20

Comments (optional):

Clinic Data – Annual Breast, continued

Monitoring and Quality Improvement for Breast Cancer Screening

Clinic screening policy:
No

Frequency of monitoring breast cancer screening rate:
Quarterly

Frequency of implementation support to clinic:
Monthly

Validated cancer screening rate:
No

Clinic champion:
Yes

BCCEDP clinical services:
Yes

Comments (optional):

Evidence-based Interventions (EBIs)

Patient Reminder System:

Were NBCCEDP resources used toward a patient reminder system during this PY?:
No

Patient reminder system in place at PY end:
No

Patient reminder system modality:

Patient reminder dosage:

Patient reminder system planning activities:
No

Patient reminder system sustainability:

Clinic Data – Annual Breast, continued

Provider Reminder System:

Were NBCCEDP resources used toward a provider reminder system during this PY?:

Yes ▾

Provider reminder system in place at PY end:

No ▾

Provider reminder system modality:

▾

Provider reminder system dosage:

▾

Provider reminder system planning activities:

Yes ▾

Provider reminder system sustainability:

▾

Provider Assessment and Feedback:

Were NBCCEDP resources used toward provider assessment and feedback during this PY?:

No ▾

Provider assessment and feedback in place at PY end:

No ▾

Provider assessment and feedback frequency:

▾

Provider assessment and feedback planning activities:

No ▾

Provider assessment and feedback sustainability:

▾

Reducing Structural Barriers:

Were NBCCEDP resources used toward reducing structural barriers during this PY?:

Yes ▾

Reducing structural barriers in place at PY end:

Yes ▾

Reducing structural barriers modality:

No ▾

Reducing structural barriers dosage:

▾

Reducing structural barriers planning activities:

▾

Reducing structural barriers sustainability:

Yes, with NBCCEDP resources ▾

Clinic Data – Annual Breast, continued

Small Media:

Were NBCCEDP resources used toward small media during this PY?:

Yes

Small media in place at PY end:

Yes

Small media modality:

Yes

Small media dosage:

2

Small media planning activities:

Small media sustainability:

Yes, without NBCCEDP resources

Patient Education for Clinic Patients:

Were NBCCEDP resources used toward patient education during this PY?:

No

Patient education in place at PY end:

No

Patient education dosage:

Patient education planning activities:

No

Patient education sustainability:

Reducing Out of Pocket Costs:

Were NBCCEDP resources used toward reducing out of pocket costs during this PY?:

No

Reducing out of pocket costs in place at PY end:

No

Reducing out of pocket costs modality:

Reducing out of pocket costs dosage:

Reducing out of pocket costs planning activities:

No

Reducing out of pocket costs sustainability:

Clinic Data – Annual Breast, continued

Professional Development and Provider Education

Were NBCCEDP resources used toward professional development/provider education activities during this PY?:

No ▼

Professional development/provider education in place at PY end:

No ▼

Professional development/provider education dosage:

▼

Community Outreach, Education, and Support

Were NBCCEDP resources used toward community outreach activities during this PY?:

No ▼

Community outreach activities in place at PY end:

No ▼

Community outreach activities dosage:

▼

Community outreach planning activities:

No ▼

Community outreach sustainability:

▼

If community health workers (CHWs) used, # of FTE CHWs:

▲▼

Other community-clinical linkage (CCL) activities:

Clinic Data – Annual Breast, continued

Patient Navigation for Screening, Diagnostics, and/or Treatment Initiation

Were NBCCEDP resources used toward patient navigation during this PY?:

Yes

Patient navigation in place at PY end:

Yes

Patient navigation dosage:

2 to 3 hours

Patient navigation planning activities:

Patient navigation sustainability:

Yes, without NBCCEDP resources

If patient navigation in place, # of FTEs delivering patient navigation:

1.5

If patient navigation in place, # of clients navigated (optional):

Clinic Data – Annual Breast, continued

Other Breast Cancer-related Strategies

Other Breast Cancer Activity 1:

Other breast cancer Activity 1 (optional):

Quality improvement activities in clinic

Were NBCCEDP resources used towards Activity1 during this PY? (optional):

Yes ▾

Other Breast Cancer Activity 2:

Other breast cancer Activity 2 (optional):

Were NBCCEDP resources used towards Activity2 during this PY? (optional):

▾

Other Breast Cancer Activity 3:

Other breast cancer Activity 3 (optional):

Were NBCCEDP resources used towards Activity3 during this PY? (optional):

▾

[Modify] [Delete]

Clinic Data – Baseline Cervical

Clinic Data for Test Program 1

Collapse All	🔍

-- New Health System --

[-] Andalucia Health System (123)

   -- New Clinic --

   [-] Andalucia Clinic A (001)

     Breast

      • Baseline

      • Year 1 - NBCCEDP 1701-py1

      • Year 2 - NBCCEDP 1701-py2

      • Year 3 - NBCCEDP 1701-py3

      • -- New Year --

     Cervical

      • Baseline   ->

      • Year 1 - NBCCEDP 1701-py2

      • Year 2 - NBCCEDP 1701-py3

      • -- New Year --

   [-] Andalucia Clinic B (002)

     Breast

      • Baseline

      • Year 1 - NBCCEDP 1701-py3

      • -- New Year --

     Cervical

      • -- Baseline --

[-] Catalonia Health System (321)

   -- New Clinic --

   [-] Catalonia Clinic A (001)

     Breast

      • Baseline

      • Year 1 - NBCCEDP 1701-py2

      • Year 2 - NBCCEDP 1701-py3

      • -- New Year --

     Cervical

      • Baseline

      • -- New Year --

> **Andalucia Health System** > **Andalucia Clinic A** > Baseline

[Modify] [Delete] [New Year]

Report Period

Baseline Assessment Date:

01/01/2017

Chart Review (CR) Screening Rate Data for Cervical Cancer

*Screening rate data may be reported using Chart Review, EHR or Both

CR Denominator to calculate screening rate:

100

CR Numerator to calculate screening rate:

30

CR Screening rate - calculated (%): 30.00

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

Measure used:

HEDIS ▾

Start date of 12-month reporting period:

01/01/2017

End date of 12-month reporting period:

01/01/2017

% of charts reviewed to calculate screening rate: 10.00

Sampling method:

Yes ▾

Comments (optional):

Clinic Data – Baseline Cervical, continued

Electronic Health Records (EHR) Screening Rate Data for Cervical Cancer

*Screening rate data may be reported using Chart Review, EHR or Both

EHR Denominator to calculate screening rate:
1000

EHR Numerator to calculate screening rate:
300

EHR Screening rate - calculated (%): 30.00

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

Measure used:
HEDIS

Start date of 12-month reporting period:
01/01/2017

End date of 12-month reporting period:
12/31/2017

EHR rate reporting source:
Clinic EHR

How confident are you in the accuracy of the EHR-calculated screening rate?:
Very confident

Screening rate problem:
No

Specify screening rate problem:

Comments (optional):

Clinic Data – Baseline Cervical, continued

Monitoring and Quality Improvement for Cervical Cancer Screening

Clinic screening policy:
Yes

Clinic champion:
Yes

BCCEDP clinical services:
Yes

Evidence-based Interventions (EBIs)

Patient reminder system in place at baseline:
No

Provider reminder system in place at baseline:
No

Provider assessment and feedback in place at baseline:
No

Reducing structural barriers in place at baseline:
Yes

Small media in place at baseline:
Yes

Patient education in place at baseline:
No

Reducing out of pocket costs in place at baseline:
No

Professional Development and Provider Education

Professional development/provider education in place at baseline:
Yes

Clinic Data – Baseline Cervical, continued

Community Outreach, Education, and Support

Community outreach activities in place at baseline:

No ▾

If community health workers (CHWs) used, # of FTE CHWs:

[▴▾]

Other community-clinical linkage (CCL) activities:

[   ]

Patient Navigation for Screening, Diagnostics, and/or Treatment Initiation

Patient navigation in place at baseline:

Yes ▾

If patient navigation in place, # of FTEs delivering navigation:

1.5 ▴▾

Other Cervical Cancer-related Strategies

HIT activities in place at baseline (optional):

Provided training on EHR, Develop B and C related reports

Other cervical cancer-related strategies in place at baseline (optional):

Quality improvement activities in clinic

[Modify] [Delete] [New Year]

Clinic Data – Annual Cervical

Clinic Data for Test Program 1

Collapse All	🔍

-- New Health System --

[-] Andalucia Health System (123)

    -- New Clinic --

    [-] Andalucia Clinic A (001)

        Breast

- Baseline
- Year 1 - NBCCEDP 1701-py1
- Year 2 - NBCCEDP 1701-py2
- Year 3 - NBCCEDP 1701-py3
- -- New Year --

        Cervical

- Baseline
- Year 1 - NBCCEDP 1701-py2   ->
- Year 2 - NBCCEDP 1701-py3
- -- New Year --

    [-] Andalucia Clinic B (002)

        Breast

- Baseline
- Year 1 - NBCCEDP 1701-py3
- -- New Year --

        Cervical

- -- Baseline --

[-] Catalonia Health System (321)

    -- New Clinic --

    [-] Catalonia Clinic A (001)

        Breast

- Baseline
- Year 1 - NBCCEDP 1701-py2
- Year 2 - NBCCEDP 1701-py3
- -- New Year --

        Cervical

- Baseline
- -- New Year --

> **Andalucia Health System** > **Andalucia Clinic A** > **Year 1 (PY2)**

[Modify] [Delete]

Report Period

Report period:

NBCCEDP 1701-py2 ▾

Implementation status:

Started ▾

Implementation start date:

Cervical cancer activity partnership status:

Not terminated ▾

Reason for termination:

Termination date:

Clinic Patient Population Characteristics for Cervical Cancer Screening

Total # of clinic patients, age 21-64, women:

1000 ⏶⏷

Clinic Data – Annual Cervical, continued

Chart Review (CR) Screening Rate Data for Cervical Cancer

*Screening rate data may be reported using Chart Review, EHR or Both

CR Denominator to calculate screening rate:

100

CR Numerator to calculate screening rate:

30

CR Screening rate - calculated (%): 30.00

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

Measure used:

HEDIS

Start date of 12-month reporting period:

01/01/2018

End date of 12-month reporting period:

12/31/2018

% of charts reviewed to calculate screening rate: 10.00

Sampling method:

Yes

Comments (optional):

Clinic Data – Annual Cervical, continued

Electronic Health Records (EHR) Screening Rate Data for Cervical Cancer

*Screening rate data may be reported using Chart Review, EHR or Both

EHR Denominator to calculate screening rate:

1000

EHR Numerator to calculate screening rate:

300

EHR Screening rate - calculated (%): 30.00

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

Measure used:

HEDIS

Start date of 12-month reporting period:

01/01/2018

End date of 12-month reporting period:

12/21/2018

EHR rate reporting source:

Clinic EHR

How confident are you in the accuracy of the EHR-calculated screening rate?:

Very confident

Screening rate problem:

No

Specify screening rate problem:

Screening rate target:

20

Comments (optional):

Clinic Data – Annual Cervical, continued

Monitoring and Quality Improvement for Cervical Cancer Screening

Clinic screening policy:

No

Frequency of monitoring cervical cancer screening rate:

Quarterly

Frequency of implementation support to clinic:

Monthly

Validated cancer screening rate:

No

Clinic champion:

Yes

BCCEDP clinical services:

Yes

Comments (optional):

Evidence-based Interventions (EBIs)

Patient Reminder System:

Were NBCCEDP resources used toward a patient reminder system during this PY?:

No

Patient reminder system in place at PY end:

No

Patient reminder system modality:

Patient reminder dosage:

Patient reminder system planning activities:

No

Patient reminder system sustainability:

Clinic Data – Annual Cervical, continued

Provider Reminder System:

Were NBCCEDP resources used toward a provider reminder system during this PY?:

Yes ▾

Provider reminder system in place at PY end:

No ▾

Provider reminder system modality:

▾

Provider reminder system dosage:

▾

Provider reminder system planning activities:

Yes ▾

Provider reminder system sustainability:

▾

Provider Assessment and Feedback:

Were NBCCEDP resources used toward provider assessment and feedback during this PY?:

No ▾

Provider assessment and feedback in place at PY end:

No ▾

Provider assessment and feedback frequency:

▾

Provider assessment and feedback planning activities:

No ▾

Provider assessment and feedback sustainability:

▾

Reducing Structural Barriers:

Were NBCCEDP resources used toward reducing structural barriers during this PY?:

Yes ▾

Reducing structural barriers in place at PY end:

Yes ▾

Reducing structural barriers modality:

No ▾

Reducing structural barriers dosage:

▾

Reducing structural barriers planning activities:

▾

Reducing structural barriers sustainability:

Yes, with NBCCEDP resources ▾

Clinic Data – Annual Cervical, continued

Small Media:

Were NBCCEDP resources used toward small media during this PY?:

| Yes ▾ |

Small media in place at PY end:

| Yes ▾ |

Small media modality:

| Yes ▾ |

Small media dosage:

| 3 ▾ |

Small media planning activities:

| ▾ |

Small media sustainability:

| Yes, without NBCCEDP resources ▾ |

Patient Education for Clinic Patients:

Were NBCCEDP resources used toward patient education during this PY?:

| No ▾ |

Patient education in place at PY end:

| No ▾ |

Patient education dosage:

| ▾ |

Patient education planning activities:

| No ▾ |

Patient education sustainability:

| ▾ |

Reducing Out of Pocket Costs:

Were NBCCEDP resources used toward reducing out of pocket costs during this PY?:

| No ▾ |

Reducing out of pocket costs in place at PY end:

| No ▾ |

Reducing out of pocket costs modality:

| ▾ |

Reducing out of pocket costs dosage:

| ▾ |

Reducing out of pocket costs planning activities:

| No ▾ |

Reducing out of pocket costs sustainability:

| ▾ |

Clinic Data – Annual Cervical, continued

Professional Development and Provider Education

Were NBCCEDP resources used toward professional development/provider education activities during this PY?:

No ▾

Professional development/provider education in place at PY end:

No ▾

Professional development/provider education dosage:

▾

Community Outreach, Education, and Support

Were NBCCEDP resources used toward community outreach activities during this PY?:

No ▾

Community outreach activities in place at PY end:

No ▾

Community outreach activities dosage:

▾

Community outreach planning activities:

No ▾

Community outreach sustainability:

▾

If community health workers (CHWs) used, # of FTE CHWs:

⬍

Other community-clinical linkage (CCL) activities:

Clinic Data – Annual Cervical, continued

Patient Navigation for Screening, Diagnostics, and/or Treatment Initiation

Were NBCCEDP resources used toward patient navigation during this PY?:

Yes ▾

Patient navigation in place at PY end:

Yes ▾

Patient navigation dosage:

15 to 30 minutes ▾

Patient navigation planning activities:

▾

Patient navigator sustainability:

Yes, with NBCCEDP resources ▾

If patient navigation in place, # of FTEs delivering navigation:

1.5 ⇳

If patient navigation in place, # of clients navigated (optional):

⇳

Clinic Data – Annual Cervical, continued

Other Cervical Cancer-related Strategies

Other Cervical Cancer Activity 1:

Other cervical cancer Activity 1 (optional):

Quality improvement activities in clinic

Were NBCCEDP resources used towards Activity1 during this PY? (optional):

Yes

Other Cervical Cancer Activity 2:

Other cervical cancer Activity 2 (optional):

Were NBCCEDP resources used towards Activity2 during this PY? (optional):

Other Cervical Cancer Activity 3:

Other cervical cancer Activity 3 (optional):

Were NBCCEDP resources used towards Activity3 during this PY? (optional):

[Modify] [Delete]