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

Prepared with "dummy" data

Welcome Screen

NBCCEDP		Currently logged on as: t1admin (<u>Loqoff / Change logon</u>)
RESOURCES	HOME RESOURCES REPORTS SUBMIT MDES CBARS	ADMIN
	About Data Entry Export Edits-Submit	Help?
		OMB No. 0920-1046

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

linic Data for Test Program 1	> Andalucia Health System
Collapse All	
New Health System	[Modify] [Delete] [New Clinic]
[-] Andalucia Health System (123) -	> Partner Health System Characteristics
New Clinic	
[-] Andalucia Clinic A (001)	Health system name:
Breast	Andalucia Health System
Baseline	Health system ID:
• Year 1 - NBCCEDP 1701-py1	123
Year 2 - NBCCEDP 1701-py2	Total # of primary care clinics in health system (optional)
Year 3 - NBCCEDP 1701-py3	3
 New Year 	
Cervical	Health system type:
Baseline	CHC/FQHC 💌
 Year 1 - NBCCEDP 1701-py2 	Other health system type:
 Year 2 - NBCCEDP 1701-py3 	
 New Year 	Type of agreement in place with the health system:
[-] Andalucia Clinic B (002)	MOU/MOA -
Breast	
Baseline	Date of formal agreement (optional):
 Year 1 - NBCCEDP 1701-py3 	07/01/2017
 New Year 	Health Center Controlled Network name (optional):
Cervical	Health Center Controlled Network 1
• Baseline	Comments (optional):
[-] Catalonia Health System (321)	
New Clinic	
[-] Catalonia Clinic A (001)	
Breast	
Baseline	[Modify] [Delete] [New Clinic]
Year 1 - NBCCEDP 1701-py2	
• Year 2 - NBCCEDP 1701-py3	
 New Year 	
Cervical	
Baseline	
 New Year 	

Clinic Data for Test Program 1

```
> Andalucia Health System > Andalucia Clinic A
                                                  Q
Collapse All
                                                            [ Modify ] [ Delete ] [ New Year ]
-- New Health System --
                                                             Clinic Characteristics
[-] Andalucia Health System (123)
       -- New Clinic --
                                                             Clinic name:
    [-] Andalucia Clinic A (001)
                                                    ->
                                                             Andalucia Clinic A
          Breast

    Baseline

                                                             Clinic ID:
                                                                        *

    Year 1 - NBCCEDP 1701-pv1

                                                             1

    Year 2 - NBCCEDP 1701-py2

                                                             Clinic street address:

    Year 3 - NBCCEDP 1701-py3

                                                             123 Main Streen
              · -- New Year --
                                                             Clinic city:
          Cervical
                                                             Andaluciaville

    Baseline

                                                             Clinic state:

    Year 1 - NBCCEDP 1701-py2

                                                                 w.

    Year 2 - NBCCEDP 1701-py3

              · -- New Year --
                                                             Clinic zip:
    [-] Andalucia Clinic B (002)
                                                             12345
          Breast
                                                             Clinic type:

    Baseline

                                                             CHC/FQHC
                                                                                                    \overline{\mathbf{v}}

    Year 1 - NBCCEDP 1701-py3

                                                             # of primary care providers at clinic:
              · -- New Year --
                                                             10
                                                                        *
          Cervical
              · -- Baseline --
                                                             Name of primary EHR vendor at clinic:
                                                                                      *
                                                             Other
[-] Catalonia Health System (321)
                                                             Other EHR, please specify (optional):
       -- New Clinic --
                                                             Andalucia EHR
    [-] Catalonia Clinic A (001)
          Breast
                                                             Other HIT tools used for data analytics and reporting:
                                                             Yes
                                                                        ×.

    Baseline

    Year 1 - NBCCEDP 1701-py2

                                                             PCMH Recognition:

    Year 2 - NBCCEDP 1701-py3

                                                             Yes
                                                                        \overline{\mathbf{w}}
              · -- New Year --
                                                             Newly opened clinic:
          Cervical
                                                             No (1 or more years) 👻

    Baseline

                                                             Comments (optional):
              · -- New Year --
```

Clinic Data - Characteristics, continued

Clinic Patient Population Characteristics for Breast Cancer Screening		
# of P	itients, Gender, Insurance Status, Ethnicity, Race	
	of clinic patients, age 50-74, women:	
1000		
% of cli	ic patients, age 50-74, women (optional):	
50		
% of pa	ients, age 50-74, uninsured, women (optional):	
10		
	ients, age 50-74, Hispanic, women (optional):	
25		
Race % of pa	tients, age 50-74, White, women (optional):	
Race		
Race % of pa	tients, age 50-74, White, women (optional):	
Race % of pa	tients, age 50-74, White, women (optional):	
Race % of pa 10 % of pa 10	tients, age 50-74, White, women (optional):	
Race % of pa 10 % of pa 10	tients, age 50-74, White, women (optional):	
Race % of pa 10 % of pa 10 % of pa 10	tients, age 50-74, White, women (optional):	
Race % of pa 10 % of pa 10 % of pa 10 % of pa	tients, age 50-74, White, women (optional):	
Race % of pa 10 % of pa 10 % of pa 10 % of pa (optional 5	tients, age 50-74, White, women (optional):	
Race % of pa 10 % of pa 10 % of pa 10 % of pa (optional 5 % of pa	tients, age 50-74, White, women (optional):	
Race % of pa 10 % of pa 10 % of pa 10 % of pa (optional 5	tients, age 50-74, White, women (optional):	
Race % of pa 10 % of pa 10 % of pa (optional 5 % of pa 5	tients, age 50-74, White, women (optional):	

Clinic Data - Characteristics, continued

# of I	Patients,	Gender, Insurance Status, Ethnicity, Race
Total #	of clinic p	patients, age 21-64, women:
1000	*	
% of c	inic patie	nts, age 21-64, women (optional):
50	- #	
% of p	atients, ag	ge 21-64, uninsured, women (optional):
10		
% of p	atients, ad	ge 21-64, Hispanic, women (optional):
25	A V	
Race		
% of p		ge 21-64, White, women (optional):
% of p	atients, a <u>c</u>	ge 21-64, White, women (optional):
10	atients, ag	ge 21-64, White, women (optional): ge 21-64, Black or African American, women (optional):
10	A V	
10 % of p	atients, ag	
10 % of p 10	atients, ag	ge 21-64, Black or African American, women (optional):
10 % of p 10 % of p 10	atients, ag atients, ag atients, ag atients, ag	ge 21-64, Black or African American, women (optional):
10 % of p 10 % of p 10 % of p	atients, ag atients, ag atients, ag atients, ag	ge 21-64, Black or African American, women (optional): ge 21-64, Asian, women (optional):
10 % of p 10 % of p 10 % of p (optiona 5	atients, ag atients, ag atients, ag atients, ag atients, ag	ge 21-64, Black or African American, women (optional): ge 21-64, Asian, women (optional):
10 % of p 10 % of p 10 % of p (optiona 5	atients, ag atients, ag atients, ag atients, ag atients, ag	ge 21-64, Black or African American, women (optional): ge 21-64, Asian, women (optional): ge 21-64, Native Hawaiian or other Pacific Islander, women
10 % of p 10 % of p 10 % of p (optiona 5 % of p 5	atients, ag atients, ag atients, ag atients, ag atients, ag atients, ag	ge 21-64, Black or African American, women (optional): ge 21-64, Asian, women (optional): ge 21-64, Native Hawaiian or other Pacific Islander, women ge 21-64, American Indian or Alaskan Native, women (optional)
10 % of p 10 % of p 10 % of p (optiona 5 % of p 5	atients, ag atients, ag atients, ag atients, ag atients, ag atients, ag	ge 21-64, Black or African American, women (optional): ge 21-64, Asian, women (optional): ge 21-64, Native Hawaiian or other Pacific Islander, women
10 % of p 10 % of p 10 % of p (optiona 5 % of p 5 % of p	atients, ag atients, ag atients, ag atients, ag atients, ag atients, ag	ge 21-64, Black or African American, women (optional): ge 21-64, Asian, women (optional): ge 21-64, Native Hawaiian or other Pacific Islander, women ge 21-64, American Indian or Alaskan Native, women (optional)
10 % of p 10 % of p 10 % of p (optiona 5 % of p 5 % of p	atients, ag atients, ag atients, ag atients, ag atients, ag atients, ag	ge 21-64, Black or African American, women (optional): ge 21-64, Asian, women (optional): ge 21-64, Native Hawaiian or other Pacific Islander, women ge 21-64, American Indian or Alaskan Native, women (optional) ge 21-64, More than one race, women (optional):

[Modify] [Delete] [New Year]

Clinic Data - Baseline Breast

Clinic Data for Test Program 1

Collapse All	> <u>Andalucia Health System</u> > <u>Andalucia Clinic A</u> > Baseline
New Health System	[Modify] [Delete] [New Year]
[-] Andalucia Health System (123)	Report Period
New Clinic	
[-] Andalucia Clinic A (001)	Baseline Assessment Date:
Breast	01/01/2017
• Baseline -	>
Year 1 - NBCCEDP 1701-py1	Chart Review (CR) Screening Rate Data for Breast Cancer
Year 2 - NBCCEDP 1701-py2	Chart Review (CR) Screening Rate Data for breast cancer
Year 3 - NBCCEDP 1701-py3	*Screening rate data may be reported using Chart Review, EHR o
• New Year	Both
Cervical	
Baseline	CR Denominator to calculate screening rate:
Year 1 - NBCCEDP 1701-py2	
• Year 2 - NBCCEDP 1701-py3	CR Numerator to calculate screening rate:
• New Year	30
[-] Andalucia Clinic B (002)	
Breast	CR Screening rate - calculated (%): 30.00
• Baseline	If screening rate unavailable, date the rate will be available:
 Year 1 - NBCCEDP 1701-py3 	
 New Year 	Measure used:
Cervical	HEDIS V
• Baseline	
buschine	Start date of 12-month reporting period:
[-] Catalonia Health System (321)	01/01/2017
New Clinic	End date of 12-month reporting period:
[-] Catalonia Clinic A (001)	12/31/2017
Breast	% of charts reviewed to calculate screening rate: 10.00
Baseline	
 Year 1 - NBCCEDP 1701-py2 	Sampling method:
 Year 2 - NBCCEDP 1701-py3 	Yes 💌
 New Year 	Comments (optional):
Cervical	
• Baseline	
• New Year	in the second

Electronic Health Re Cancer	cords (EHR) Screening Rate Data for Breast
*Screening rate data Both	may be reported using Chart Review, EHR or
-	
EHR Denominator to calcu	late screening rate:
EHR Numerator to calculat	te screening rate:
300	
EHR Screening rate - calco	ulated (%): 30.00
If screening rate unavaila	ble, date the rate will be available:
Measure used:	
HEDIS 👻	
Start date of 12-month re	norting period
01/01/2017	Porting Periodi
End date of 12-month rep	orting perioa:
12/01/2017	
EHR rate reporting source	6
HCCN data warehouse 👻	
	the accuracy of the EHR-calculated screening rate?:
Very confident 👻	
Screening rate problem:	
No 👻	
Specify screening rate pro	oblem:
Comments (optional):	

Monitoring and Quality Improvement for Breast Cancer Screening	
Clinic screening po	licy:
Yes 💌	
Clinic champion:	
Yes 👻	
BCCEDP clinical ser	vices:
Yes 👻	
Evidence-based	d Interventions (EBIs)
Patient reminder sy	ystem in place at baseline:
No 👻	
Provider reminder	system in place at baseline:
No 👻	
Provider assessme	nt and feedback in place at baseline:
No 👻	
Reducing structura	l barriers in place at baseline:
Yes 👻	
Small media in plac	e at baseline:
Yes 👻	
Patient education in	n place at baseline:
No 👻	
Reducing out of poo	cket costs in place at baseline:
No 👻	
No 🔹	

Professional development/provider education in place at baseline:

Yes 💌

	nunity Outreach, Education, and Support
Commu No v	nity outreach activities in place at baseline:
If comn	nunity health workers (CHWs) used, # of FTE CHWs:
Other c	ommunity-clinical linkage (CCL) activities:
Patier Initiat	nt Navigation for Screening, Diagnostics, and/or Treatment tion
uncin	navigation in place at baseline:
Yes 💌	navigation in place at baseline: nt navigation in place, # of FTEs delivering patient navigation:
Yes ▼ If patie 1.5	nt navigation in place, # of FTEs delivering patient navigation:
Yes * If patie 1.5 Other	nt navigation in place, # of FTEs delivering patient navigation:
Yes * If patie 1.5 Other HIT acti	nt navigation in place, # of FTEs delivering patient navigation:
Yes * If patie 1.5 Other HIT acti	nt navigation in place, # of FTEs delivering patient navigation:

[Modify] [Delete] [New Year]

<u> Clinic Data - Annual Breast</u>

Clinic Data for Test Program 1

Collapse All	> <u>Andalucia Health System</u> > <u>Andalucia Clinic A</u> > Year 1 (PY1)
New Health System	[Modify] [Delete]
[-] Andalucia Health System (123)	Report Period
New Clinic	
[-] Andalucia Clinic A (001)	Report period:
Breast	NBCCEDP 1701-py1 👻
Baseline	Implementation status:
• Year 1 - NBCCEDP 1701-py1 ->	Started 💌
Year 2 - NBCCEDP 1701-py2	Implementation start date:
• Year 3 - NBCCEDP 1701-py3	
• New Year	
Cervical	Breast cancer activity partnership status:
Baseline	Not terminated 💌
 Year 1 - NBCCEDP 1701-py2 	Reason for termination:
 Year 2 - NBCCEDP 1701-py3 	
• New Year	Termination date:
[-] Andalucia Clinic B (002)	
Breast	
• Baseline	
 Year 1 - NBCCEDP 1701-py3 	Clinic Patient Population Characteristics for Breast Cancer
• New Year	Screening
Cervical	Total # of clinic patients, age 50-74, women:
• 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	

*Screening Both	rate data may be reported using Chart Review, EHR o
CR Denomina	or to calculate screening rate:
100 *	
CR Numerato	to calculate screening rate:
30 (*)	
CR Screening	rate - calculated (%): 30.00
If screening	ate unavailable, date the rate will be available:
Measure used	E
HEDIS -	
Start date of	12-month reporting period:
01/01/2018	
	2-month reporting period:
12/31/2018	
0/ of chanter	aviawed to calculate companing rates 10.00
- or charts r	eviewed to calculate screening rate: 10.00
	hod:
Sampling me	
Sampling met	

Electron Cancer	ic Health Records (EHR) Screening Rate Data for Breast
*Screeni Both	ing rate data may be reported using Chart Review, EHR or
EHR Denor	ninator to calculate screening rate:
1000	
EHR Nume	rator to calculate screening rate :
300	
EHR Scree	ning rate - calculated (%): 30.00
If screenir	ng rate unavailable, date the rate will be available:
Measure u	sed:
HEDIS +	
Start date	of 12-month reporting period:
01/01/2018	
Ful data a	f 12 month according provide
100000000000000000000000000000000000000	of 12-month reporting period:
12/31/2018	
EHR rate r	eporting source:
Clinic EHR	· ·
How confid	dent are you in the accuracy of the EHR-calculated screening rate?:
Very confid	ient 👻
Screening	rate problem:
No +	
Specify sc	reening rate problem:
	rate target:
20	
Comments	(optional):

Monitoring and Quality Ir	nprovement for Breast Cancer Screening
Clinic screening policy:	
No 💌	
Frequency of monitoring breast	cancer screening rate:
Quarterly 👻	
Frequency of implementation su	upport to clinic:
Monthly 👻	
Validated cancer screening rate	
No 🔻	
Clinic champion:	
Yes *	
BCCEDP clinical services:	
Yes 💌	
Comments (optional):	
	. It.
Evidence-based Interven	tions (ERIs)

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:

+

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 🚽

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?:

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?:

÷

-

Reducing out of pocket costs in place at PY end:

No 👻

Reducing out of pocket costs modality:

Ŧ

Reducing out of pocket costs dosage:

.

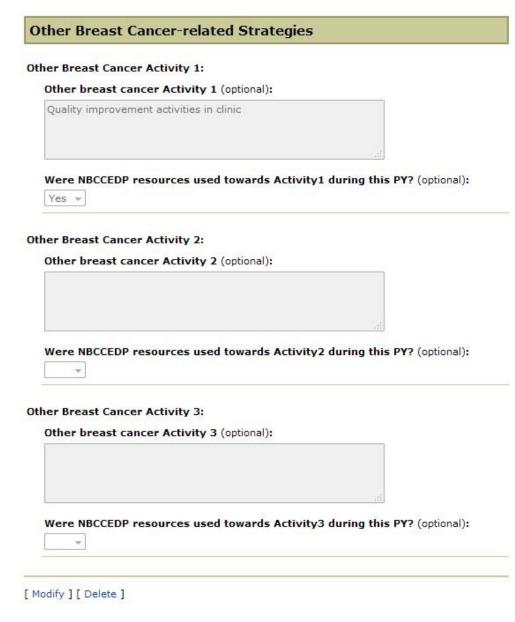
Reducing out of pocket costs planning activities:

Reducing out of pocket costs sustainability:

Professional Development and Provider Education
Vere NBCCEDP resources used toward professional development/provider education activities during this PY?:
No 💌
Professional development/provider education in place at PY end:
Professional development/provider education dosage:
Community Outreach, Education, and Support
Vere NBCCEDP resources used toward community outreach activities during
Y?:
No 👻
community outreach activities in place at PY end:
No *
Community outreach activities dosage:
ammunity outroach planning activities:
Community outreach planning activities:
Community outreach sustainability:
f community health workers (CHWs) used, # of FTE CHWs:
Other community-clinical linkage (CCL) activities:

Patient Navigation for Screening, Diagnostics, and/or Treatmen Initiation			
Were NBCCEDP	esources used toward patient navigation during this PY?:		
Yes v			
Patient navigati	on in place at PY end:		
Yes 💌			
Patient navigati	on dosage:		
2 to 3 hours			
Patient navigati	on planning activities:		
×			
Patient navigati	on sustainability:		
Yes, without NBC	CEDP resources 🔻		
If patient naviga	ation in place, # of FTEs delivering patient navigation:		
1.5			
If patient navig	ation in place, # of clients navigated (optional):		





Clinic Data - Baseline Cervical

Clinic Data for Test Program 1

Collapse All	> Andalucia Health System > Andalucia Clinic A > Baseline
New Health System	[Modify] [Delete] [New Year]
[-] Andalucia Health System (123)	Report Period
New Clinic [-] Andalucia Clinic A (001) Breast • Baseline	Baseline Assessment Date:
• Year 1 - NBCCEDP 1701-py1	Chart Review (CR) Screening Rate Data for Cervical Cancer
 Year 2 - NBCCEDP 1701-py2 Year 3 - NBCCEDP 1701-py3 New Year 	*Screening rate data may be reported using Chart Review, EHR of Both
Cervical	CR Denominator to calculate screening rate:
 Baseline Year 1 - NBCCEDP 1701-py2 	> 100 <u>*</u>
 Year 2 - NBCCEDP 1701-py3 New Year 	CR Numerator to calculate screening rate:
[-] Andalucia Clinic B (002) Breast	CR Screening rate - calculated (%): 30.00
 Baseline Year 1 - NBCCEDP 1701-py3 	If screening rate unavailable, date the rate will be available:
• New Year	Measure used:
Cervical • Baseline	HEDIS -
[-] Catalonia Health System (321)	Start date of 12-month reporting period: 01/01/2017
New Clinic	End date of 12-month reporting period:
[-] Catalonia Clinic A (001) Breast	01/01/2017
• Baseline	% of charts reviewed to calculate screening rate: 10.00
 Year 1 - NBCCEDP 1701-py2 Year 2 - NBCCEDP 1701-py3 	Sampling method:
New Year	Comments (optional):
Cervical	
• Baseline	
 New Year 	

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):

Screening	
Clinic screening	policy:
Yes 🔻	
Clinic champion	
Yes 💌	
BCCEDP clinical	services:
Yes 👻	
Evidence-ha	sed Interventions (EBIs)
Evidence-ba	
Patient reminde	r system in place at baseline:
No 👻	
Provider remind	ler system in place at baseline:
No -	ier system in place at baseline.
	ment and feedback in place at baseline:
No +	ment and reedback in place at baseline:
	ural barriers in place at baseline:
Yes 💌	
	place at baseline:
Yes 👻	
Patient educatio	on in place at baseline:
No 👻	
Reducing out of	pocket costs in place at baseline:
No 👻	
No 💌	

Professional development/provider education in place at baseline:

<u> Clinic Data – Baseline Cervical, continued</u>

Community Outreach, Education, and Supp	ort
Community outreach activities in place at baseline:	
If community health workers (CHWs) used, # of FTE C	HWs:
Other community-clinical linkage (CCL) activities:	
	- Inc.
Patient Navigation for Screening, Diagnosti Initiation	cs, and/or Treatmen
Patient navigation in place at baseline:	
Yes w If patient navigation in place, # of FTEs delivering nav	vigation:
Other Cervical Cancer-related Strategies	
HIT activities in place at baseline (optional):	
Provided training on EHR, Develop B and C related reports	
	t
Other cervical cancer-related strategies in place at ba	seline (optional):
Quality improvement activities in clinic	

[Modify] [Delete] [New Year]

<u> Clinic Data - Annual Cervical</u>

Clinic Data for Test Program 1

Collapse All	> <u>Andalucia Health System</u> > <u>Andalucia Clinic A</u> > Year 1 (PY2)
New Health System	[Modify] [Delete]
[-] Andalucia Health System (123)	Report Period
New Clinic	
[-] Andalucia Clinic A (001)	Report period:
Breast	NBCCEDP 1701-py2 👻
• Baseline	Implementation status:
Year 1 - NBCCEDP 1701-py1	Started v
Year 2 - NBCCEDP 1701-py2	Implementation start date:
 Year 3 - NBCCEDP 1701-py3 	
 New Year 	
Cervical	Cervical cancer activity partnership status:
Baseline	Not terminated 👻
 Year 1 - NBCCEDP 1701-py2 - 	Reason for termination:
 Year 2 - NBCCEDP 1701-py3 	
 New Year 	Termination date:
[-] Andalucia Clinic B (002)	
Breast	
• Baseline	
Year 1 - NBCCEDP 1701-py3	Clinic Patient Population Characteristics for Cervical Cance
 New Year 	Screening
Cervical	Total # of clinic patients, age 21-64, women:
Baseline	1000
[-] 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 	

1

*Screening Both	rate data may be reported using Chart Review, EHR o
CR Denominat	tor to calculate screening rate:
	to calculate screening rate:
30	
	rate - calculated (%): 30.00
ck screening	
If screening r	ate unavailable, date the rate will be available:
_	ранования и на накологиятельного во водинали статичания наконската законската наконската на сели на наконската наконската наконската наконската на наконската на наконската наконс
Measure used	:
HEDIS -	
Start date of	12-month reporting period:
01/01/2018	
End date of 1	2-month reporting period:
12/31/2018	
or _6_b	
% of charts r	eviewed to calculate screening rate: 10.00
	hod:
Sampling met	
Sampling met	

Electronic Health Records (EHR) Screening Rate Data for Cervica Cancer
*Screening rate data may be reported using Chart Review, EHR or Both
EHR Denominator to calculate screening rate:
EHR Numerator to calculate screening rate:
EHR Screening rate - calculated (%): 30.00
If screening rate unavailable, date the rate will be available:
Measure used:
Start date of 12-month reporting period: 01/01/2018 End date of 12-month reporting period: 12/21/2018
EHR rate reporting source:
How confident are you in the accuracy of the EHR-calculated screening rate?:
Screening rate problem:
Specify screening rate problem:
Screening rate target:
Comments (optional):

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:

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Patient reminder system sustainability:

<u>Clinic Data - Annual Cervical, continued</u>

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?:

-

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:

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

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Yes 👻

Reducing structural barriers in place at PY end:

Yes 👻

Reducing structural barriers modality:

No 👻

Reducing structural barriers dosage:

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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:

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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?:

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Reducing out of pocket costs in place at PY end:

No 🚽

Reducing out of pocket costs modality:

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Reducing out of pocket costs dosage:

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Reducing out of pocket costs planning activities:

No -

Reducing out of pocket costs sustainability:

Professional Development and Provide	r Education
Were NBCCEDP resources used toward profession education activities during this PY?:	nal development/provider
No *	
Professional development/provider education in	place at PY end:
Professional development/provider education do	osage:
Community Outreach, Education, and S	Support
Were NBCCEDP resources used toward communit	y outreach activities during this
PY?:	
Community outreach activities in place at PY end	:
Community outreach activities dosage:	
Community outreach planning activities:	
No 🔻	
Community outreach sustainability:	
· · ·	
If community health workers (CHWs) used, # of F	FTE CHWs:
Other community-clinical linkage (CCL) activities	:

Patient Navigation for Screening, Diagnostics, and/or Treatmen Initiation	
Were NBCCEDP res	ources 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 s	ustainability:
Yes, with NBCCEDP r	resources 🔻
If patient navigatio	on in place, # of FTEs delivering navigation:
1.5	
If natient navigatio	on in place, # of clients navigated (optional):

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