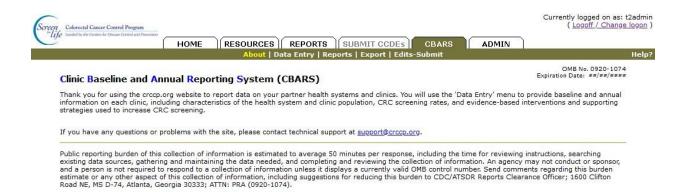
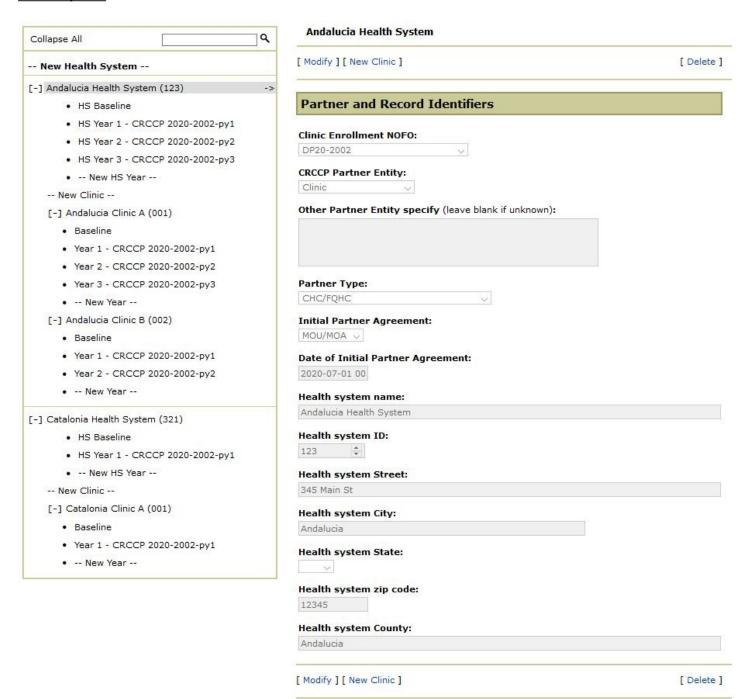
# CRCCP Clinic-level Data NOFO DP20-2002 Example/Draft Data Entry Screens From CRCCP Clinic Data Dictionary version 5 August 21, 2020

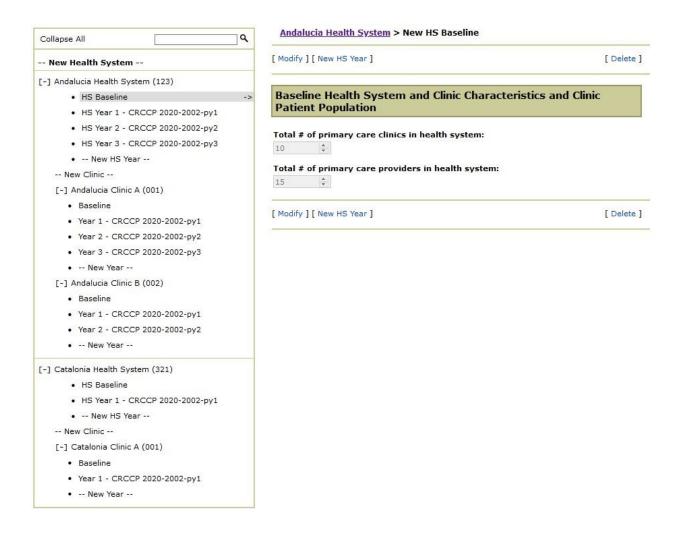
#### **About Page**



#### **Health System**

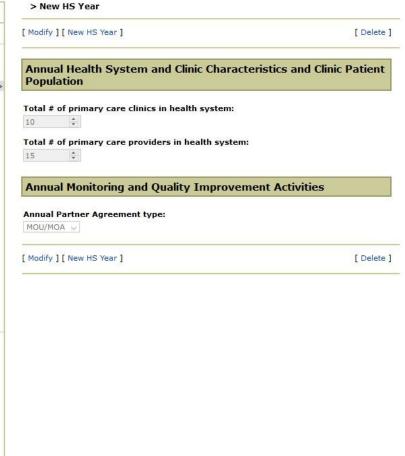


#### **Health System (HS) Baseline**

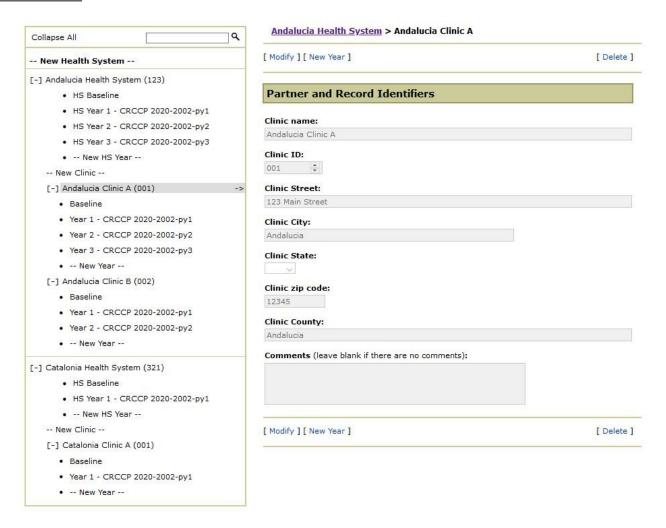


#### **Health System (HS) Annual**

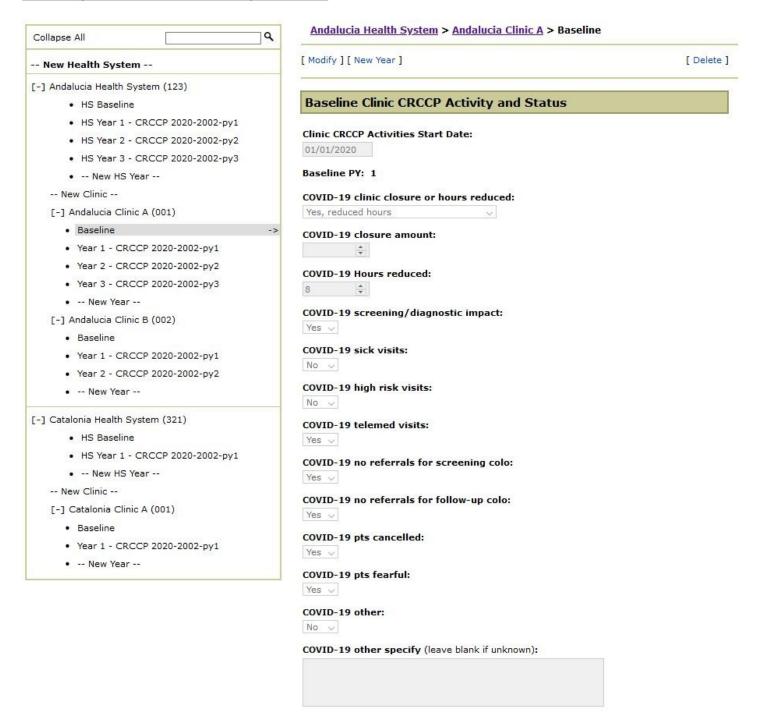




#### **Clinic Information**



#### Baseline (part 1 - Clinic CRCCP Activity and Status)



### **Baseline (part 2 - Clinic CRCCP Activity and Status continued)**

Yes COVID-19 PAF impact:
COVID-19 PVR impact: Yes COVID-19 PAF impact:
COVID-19 PAF impact:
COVID-19 RSB impact:
COVID-19 PN impact:
Yes COVID-19 Comments (leave blank if there are no comments):

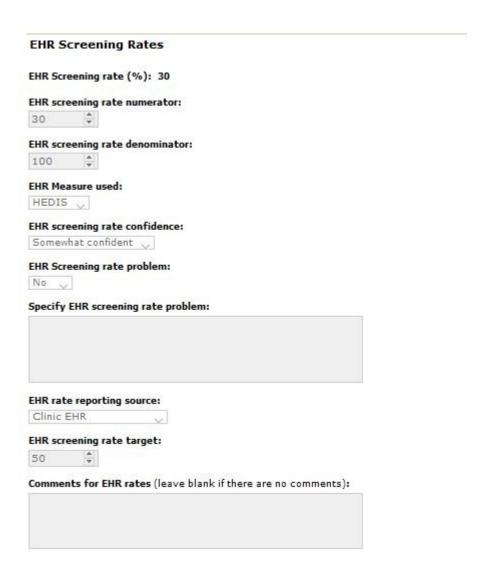
Baseline (part 3 - Health System and Clinic Characteristics and Clinic Patient Population)	
Attachment 5a – Clinic-Level Data Collection Instrument	Page <b>8</b> of <b>31</b>

# Baseline Health System and Clinic Characteristics and Clinic Patient Population

# of prin	пагу с	are providers at clinic:
10	¥	
Total # c	f clin	ic patients:
2000	*	
Total # c	f clin	ic patients, age 50-75:
1000	A V	
% of not	ionto	, age 50-75, women:
50	1ents	age 50-75, women:
		1.1000000000000000000000000000000000000
% of pat	ents	, age 50-75, uninsured:
10	*	
		, age 50-75, Hispanic (leave blank if unknown):
50	÷	
% of pat		, age 50-75, White (leave blank if unknown):
20	¥	
% of pat	ients	age 50-75, Black or African American (leave blank if unknown):
20	*	
% of pat	ients	, age 50-75, Asian (leave blank if unknown):
20	A	
		, age 50-75, Native Hawaiian or other Pacific Islander (leave blank if
unknown 10	): 	
10	¥	
Committee of		, age 50-75, American Indian or Alaskan Native (leave blank if unknown):
10	÷	
% of pat		, age 50-75, More than one race (leave blank if unknown):
20	¥	
Name of	prima	ary EHR vendor at clinic:
Allscrip	ts	V
Other EH	R, sp	ecify (leave blank if unknown):
Primary	EHR h	ome:
•		to the clinic 🔍
Other FH	R hor	ne specify (leave blank if unknown):
o circi Eri		, core sound and only
Newly sc	reeni	ng or opened:
No (1 or	more	years) 🔾
Commen	ts (lea	ave blank if there are no comments):
		20 3 4 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5

# **Baseline CRC Screening Rates and Practices** Rate Status: Both Chart Review and EHR Rate Screening rate date available: Start date of 12-month measurement SR period: 01/01/2019 End date of 12-month measurement period: 12/31/2019 **Chart Review Screening Rates** CR Screening rate (%): 30 CR screening rate numerator: 30 CR screening rate denominator: 100 CR Measure used: HEDIS V % of charts reviewed to calculate screening rate: 10 Sampling Method: Yes CR screening rate confidence: Somewhat confident 😞 CR Screening rate problem: Specify CR- screening rate problem: CR Screening rate target: Comments for CR rates (leave blank if there are no comments):

#### Baseline (part 5 - CRC Screening Rates and Practices continued)



Baseline (part 6 – CRC Screening Rates and Practices continued)	

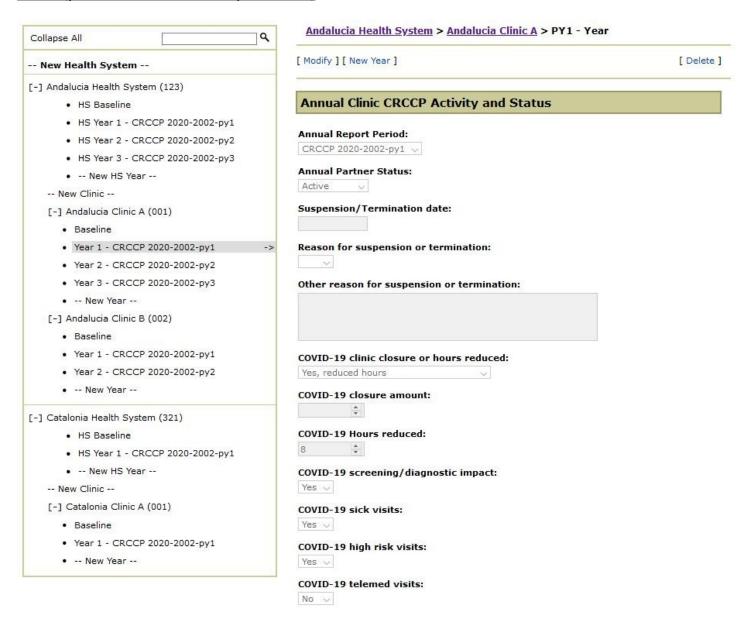
# **CRC Screening Practices and Outcomes** CRC Screening methods: FIT Other CRC Screening methods (leave blank if unknown): Primary CRC screening method: FIT Other primary CRC screening method (leave blank if unknown): Free fecal testing kits: Yes Fecal Kit return rate: 30 # of patients given fecal kits: 100 # of patients returning fecal kits: Fecal kit return date available: Colonoscopy completion rate: 30 # patients referred for colonoscopy: 100 # patients completing colonoscopy: Colonoscopy completion rate date available: Follow-up colonoscopy completion rate: 30 # patients referred for follow-up colonoscopy: 100 # patients completing follow-up colonoscopy: 30 Follow-up colonoscopy completion rate date available: Comments (leave blank if there are no comments):

## **Baseline Monitoring and Quality Improvement Activities** Clinic colorectal cancer screening policy: Yes V Clinic colorectal cancer champion: Yes 🗸 Utilizing health IT to improve data collection and quality: Utilizing health IT tools for monitoring program performance: Yes V QA/QI support: Yes 🗸 Comments (leave blank if there are no comments): Baseline Evidence-based Interventions (EBIs) and Other Clinic **Activities** Patient reminder system in place: Provider reminder system in place: Provider assessment and feedback in place: Reducing structural barriers in place: Small media in place: Yes 🗸 Patient navigation in place: Yes 🗸 Patient Navigation Purpose: CRC screening Number of FTEs delivering patient navigation: Comments (leave blank if there are no comments):

### **Baseline (part 8 - Other Colorectal Cancer Activities and Comments)**

Other Baseline Colorectal Cancer Activities and Co	mments
Other Colorectal Cancer Activity 1 (leave blank if unknown):	
Quality improvement activities in clinic	
Other Colorectal Cancer Activity 2 (leave blank if unknown):	
Other Colorectal Cancer Activity 3 (leave blank if unknown):	
Comments (leave blank if there are no comments):	
[ Modify ] [ New Year ]	[ Delete ]

#### Annual (part 1 - Clinic CRCCP Activity and Status)



### <u>Annual (part 2 - Clinic CRCCP Activity and Status continued)</u>

COVID-19 no referrals for screening colo:
Yes V
COVID-19 no referrals for follow-up colo:
Yes V
COVID-19 pts cancelled:
No V
COVID-19 pts fearful:
Yes V
COVID-19 other:
No V
COVID-19 other specify (leave blank if unknown):
COVID-19 EBI impact:
Yes V
COVID-19 PTR impact:
Yes V
COVID-19 PVR impact:
Yes 🗸
COVID-19 PAF impact:
No ~
COVID-19 RSB impact:
No ~
COVID-19 PN impact:
Yes V
COVID-19 Comments (leave blank if there are no comments):

#### Annual (part 3 - Health System and Clinic Characteristics and Clinic Patient Population)

# Annual Health System and Clinic Characteristics and Clinic Patient **Population** # of primary care providers at clinic: Total # of clinic patients: 2000 Total # of clinic patients, age 50-75: 1000 % of patients, age 50-75, uninsured: Name of primary EHR vendor at clinic: Allscripts Other EHR, specify (leave blank if unknown): Primary EHR home: EHR specific to the clinic 🗸 Other EHR home specify (leave blank if unknown): Comments (leave blank if there are no comments):

Annual (part 4 - CRC Screen	ing Rates and Practices)		

### **Annual CRC Screening Rates and Practices**

Rate Status:	
Both Chart Review and EHR Rate $$	
Screening rate date available:	
Start date of 12-month measurement SI	R period:
01/01/2020	155 A. W. (1)
End date of 12-month measurement per	riod: 12/31/2020
Chart Review Screening Rates	
CR Screening rate (%): 30	
CR screening rate numerator:	
30 💠	
CR screening rate denominator:	
100 💠	
CR Measure used:	
HEDIS V	
% of charts reviewed to calculate scree  Sampling Method:	ning rate: 10
CR screening rate confidence:	
Somewhat confident >	
CR Screening rate problem:	
No v	
Specify CR- screening rate problem:	
CR Screening rate target:	
50 🕏	
Comments for CR rates (leave blank if the	re are no comments):

### <u>Annual (part 5 - CRC Screening Rates and Practices continued)</u>

EHR S	creening R	lates		
EHR Sc	reening rate	(%): 30		
EHR sci	reening rate	numerator:		
30	+			
EHR sci	reening rate	denominator:		
100	0			
EHR Me	asure used:			
HEDIS	V			
EHR sci	reening rate	confidence:		
	hat confident			
EHR rat	te reporting s	ing rate proble	m:	
Clinic E	HR	~		
EHR sci	reening rate	target:		
50	-			
Comme	nts for EHR r	rates (leave blan	nk if there are no	comments):

CRC S	Screening Practices and Outcomes
CRC Scr	reening methods:
FIT	~
Other C	RC Screening methods (leave blank if unknown):
Primary	y CRC screening method:
FIT	~
Other p	rimary CRC screening method (leave blank if unknown
Free fe	cal testing kits:
Yes	×
IV	it return rate: 30
recark	it return rate: 30
# of pa	tients given fecal kits:
100	* T
# of pa	tients returning fecal kits:
30	<u>*</u>
Fecal k	it return date available:
Colonos	scopy completion rate: 30
# patie	nts referred for colonoscopy:
100	*
# patie	nts completing colonoscopy:
30	*
Colonos	scopy completion rate date available:

### <u>Annual (part 7 - CRC Screening Rates and Practices continued)</u>

Follow	up colonoscopy completion rate: 30
# patie	its referred for follow-up colonoscopy:
100	₹
# patie	nts completing follow-up colonoscopy:
30	<b></b>
Follow	up colonoscopy completion rate date available:
# patie	nts with CDC-paid follow-up colonoscopy:
100	A V
# patie	its with normal colonoscopy results:
30	-
# patie	its with adenomatous polyps:
2	€
# patie	nts with abnormal findings:
2	•
# patie	nts diagnosed with CRC:
Comme	nts (leave blank if there are no comments):
	**

Annual (part 8 – Monitoring a	and Ouality Improveme	nt Activities)	
Annual (part o Monitoring a	ind Quality improveme	ne Activides)	

### **Annual Monitoring and Quality Improvement Activities**

Clinic colorectal cancer screening policy:	
Clinic colorectal cancer champion:	
Utilizing health IT to improve data collection and quality	r:
Utilizing health IT tools for monitoring program perform	ance
QA/QI support:	
Process Improvements:	
Frequency of monitoring colorectal cancer screening rate	te:
Validated screening rate:	
Yes V	
Other Validation Method Specify (leave blank if unknown):	P I
Health Center Controlled Network:  Yes  Frequency of implementation support to clinic:	
Monthly	
Yes, to the clinic	
Amount of CRCCP financial resources:	
Comments (leave blank if there are no comments):	

<u>Annual (part 9 - EBIs and Other Clinic Activities)</u>

# Annual Evidence-based Interventions (EBIs) and Other Clinic Activities

# EBI-Patient Reminder System CRCCP resources used toward a patient reminder system: Yes v Patient reminder system in place: Yes, newly in place v Patient reminder system planning activities: Patient reminder system enhancements: Patient reminders sent multiple ways: Yes v Maximum number and/or frequency of patient reminders: Patient reminder system sustainability: Yes v EBI -Provider Reminder System CRCCP resources used toward a provider reminder system: No v Provider reminder system in place: Provider reminder system planning activities: Provider reminder system enhancements: Provider reminders sent multiple ways: Maximum number and/or frequency of provider reminders:

Provider reminder system sustainability:

EBI -Provider /	Assessment and Feedback
CRCCP resources u	used toward provider assessment and feedback:
Yes V	
Provider assessm	ent and feedback in place:
Yes, newly in place	
Provider assessm	ent and feedback planning activities:
	ent and feedback enhancements:
	ent and feedback frequency:
Monthly $\lor$	
Provider assessm	ent and feedback sustainability:
Yes 🗸	
EBI -Reducing	Structural Barriers
No v	used toward reducing structural barriers:
Reducing structure	al barriers in place:
No	·
Reducing structur	al barriers planning activities:
1.0	
keducing structur	al barriers enhancements:
Reducing structure	al barriers more than one way:
~	
Maximum ways re	ducing structural barriers:
Reducing structure	al barriers sustainability:
~	

Annual (part 11 – EBIs and Other Clinic Activities continued)							



### **Annual Implementation Factors** Complexity: Strongly Disagree Adaptability: Neither Agree nor Disagree V Cost-substantial resources: Agree Cost-worthwhile: Neither Agree nor Disagree 🗸 Patient Needs/Resources: Strongly Disagree **External Policy:** Don't know/Not Applicable Incentives: Don't know/Not Applicable Conform: Strongly Agree Innovate and experiment: Agree Priority: Neither Agree nor Disagree V Staff-time and resources: Neither Agree nor Disagree 🗸 Staff-training: Strongly Disagree Appropriate Set: Disagree Champion designated: Neither Agree nor Disagree V Champion responsibility: Agree Team debrief:

Strongly Agree

#### <u>Annual (part 13 - Other Colorectal Cancer Activities and Comments)</u>

# Other Annual Colorectal Cancer Activities and Comments Other Colorectal Cancer Activity 1 (leave blank if unknown): Quality improvement activities in clinic CRCCP resources used toward Activity 1: Yes v Other Colorectal Cancer Activity 2 (leave blank if unknown): CRCCP resources used toward Activity 2: Other Colorectal Cancer Activity 3 (leave blank if unknown): CRCCP resources used toward Activity 3: Comments (leave blank if there are no comments): [ Modify ] [ New Year ] [ Delete ]