

## Attachment 5a: CRCCP Clinic-level Data Collection Instrument (Screenshots)

### About Page

The screenshot shows the website interface for the Colorectal Cancer Control Program (CRCCP). At the top, there is a dark teal header with the text "Colorectal Cancer Control Program (CRCCP)". Below this is a navigation bar with links for Home, Resources, Reports, CBARS, QPU, Admin, and About/Help. A breadcrumb trail below the navigation bar reads "Home > CBARS > CBARS Home".

On the left side, there is a sidebar menu with the following items: "CBARS Home" (highlighted), "Data Entry", "Reports", "Export", and "Edits-Submit".

The main content area features a title "CRCCP Clinic Baseline and Annual Reporting System (CBARS)" and a paragraph of introductory text: "Thank you for using the crccp.cdc.gov 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, Colorectal Cancer (CRC) screening rates, and evidence-based interventions and other clinic activities used to improve CRC screening. We encourage you to use the comment boxes at the end of each section to explain irregular data or provide context. For example, why are you 'not confident' in the data you are reporting?"

In the top right corner, there is a notice: "Form approved OMB No. 0920-#### Expiration Date: ##/##/####".

At the bottom of the page, there is a public reporting burden notice: "Public reporting burden of this collection of information is estimated to average 50 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 30333; ATTN: PRA (0920-1074)."

## Health System

Collapse All

-- **New Health System** --

[ - ] Andalusia Health System (123) ->

- HS Baseline
- HS Year 1 - CRCCP 2020-2002-py1
- HS Year 2 - CRCCP 2020-2002-py2
- HS Year 3 - CRCCP 2020-2002-py3
- -- New HS Year --

-- New Clinic --

[ - ] Andalusia Clinic A (001)

- Baseline
- Year 1 - CRCCP 2020-2002-py1
- Year 2 - CRCCP 2020-2002-py2
- Year 3 - CRCCP 2020-2002-py3
- -- New Year --

[ - ] Andalusia Clinic B (002)

- Baseline
- Year 1 - CRCCP 2020-2002-py1
- Year 2 - CRCCP 2020-2002-py2
- -- New Year --

[ - ] Catalonia Health System (321)

- HS Baseline
- HS Year 1 - CRCCP 2020-2002-py1
- -- New HS Year --

-- New Clinic --

[ - ] Catalonia Clinic A (001)

- Baseline
- Year 1 - CRCCP 2020-2002-py1
- -- New Year --

### Andalusia Health System

[ Modify ] [ New Clinic ]

[ Delete ]

#### Partner and Record Identifiers

**Clinic Enrollment NOFO:**

DP20-2002

**CRCCP Partner Entity:**

Clinic

**Other Partner Entity specify** (leave blank if unknown):

**Partner Type:**

CHC/FQHC

**Initial Partner Agreement:**

MOU/MOA

**Date of Initial Partner Agreement:**

2020-07-01 00

**Health system name:**

Andalusia Health System

**Health system ID:**

123

**Health system Street:**

345 Main St

**Health system City:**

Andalusia

**Health system State:**

**Health system zip code:**

12345

**Health system County:**

Andalusia

[ Modify ] [ New Clinic ]

[ Delete ]

# Health System (HS) Baseline

Collapse All

-- New Health System --

- [ - ] Andalusia Health System (123)
  - HS Baseline ->
  - HS Year 1 - CRCCP 2020-2002-py1
  - HS Year 2 - CRCCP 2020-2002-py2
  - HS Year 3 - CRCCP 2020-2002-py3
  - -- New HS Year --
- New Clinic --
- [ - ] Andalusia Clinic A (001)
  - Baseline
  - Year 1 - CRCCP 2020-2002-py1
  - Year 2 - CRCCP 2020-2002-py2
  - Year 3 - CRCCP 2020-2002-py3
  - -- New Year --
- [ - ] Andalusia Clinic B (002)
  - Baseline
  - Year 1 - CRCCP 2020-2002-py1
  - Year 2 - CRCCP 2020-2002-py2
  - -- New Year --

[ - ] Catalonia Health System (321)

- HS Baseline
- HS Year 1 - CRCCP 2020-2002-py1
- -- New HS Year --

-- New Clinic --

- [ - ] Catalonia Clinic A (001)
  - Baseline
  - Year 1 - CRCCP 2020-2002-py1
  - -- New Year --

## Andalusia Health System > New HS Baseline

[ Modify ] [ New HS Year ] [ Delete ]

### Baseline Health System and Clinic Characteristics and Clinic Patient Population

**Total # of primary care clinics in health system:**


10

**Total # of primary care providers in health system:**

15

[ Modify ] [ New HS Year ] [ Delete ]

## Health System (HS) Annual

Collapse All  

-- New Health System --

[ - ] Andalusia Health System (123)

- HS Baseline
- HS Year 1 - CRCCP 2020-2002-py1 ->
- HS Year 2 - CRCCP 2020-2002-py2
- HS Year 3 - CRCCP 2020-2002-py3
- -- New HS Year --

-- New Clinic --

[ - ] Andalusia Clinic A (001)

- Baseline
- Year 1 - CRCCP 2020-2002-py1
- Year 2 - CRCCP 2020-2002-py2
- Year 3 - CRCCP 2020-2002-py3
- -- New Year --

[ - ] Andalusia Clinic B (002)

- Baseline
- Year 1 - CRCCP 2020-2002-py1
- Year 2 - CRCCP 2020-2002-py2
- -- New Year --

[ - ] Catalonia Health System (321)

- HS Baseline
- HS Year 1 - CRCCP 2020-2002-py1
- -- New HS Year --

-- New Clinic --

[ - ] Catalonia Clinic A (001)

- Baseline
- Year 1 - CRCCP 2020-2002-py1
- -- New Year --

### > New HS Year

[ Modify ] [ New HS Year ]

[ Delete ]

#### Annual Health System and Clinic Characteristics and Clinic Patient Population

Total # of primary care clinics in health system:

10

Total # of primary care providers in health system:

15

#### Annual Monitoring and Quality Improvement Activities

Annual Partner Agreement type:

MOU/MOA

[ Modify ] [ New HS Year ]

[ Delete ]

**Clinic Information**

Collapse All

-- New Health System --

- [ - ] Andalusia Health System (123)
  - HS Baseline
  - HS Year 1 - CRCCP 2020-2002-py1
  - HS Year 2 - CRCCP 2020-2002-py2
  - HS Year 3 - CRCCP 2020-2002-py3
  - -- New HS Year --
- New Clinic --
- [ - ] Andalusia Clinic A (001) ->
  - Baseline
  - Year 1 - CRCCP 2020-2002-py1
  - Year 2 - CRCCP 2020-2002-py2
  - Year 3 - CRCCP 2020-2002-py3
  - -- New Year --
- [ - ] Andalusia Clinic B (002)
  - Baseline
  - Year 1 - CRCCP 2020-2002-py1
  - Year 2 - CRCCP 2020-2002-py2
  - -- New Year --
- [ - ] Catalonia Health System (321)
  - HS Baseline
  - HS Year 1 - CRCCP 2020-2002-py1
  - -- New HS Year --
- New Clinic --
- [ - ] Catalonia Clinic A (001)
  - Baseline
  - Year 1 - CRCCP 2020-2002-py1
  - -- New Year --

**Andalusia Health System > Andalusia Clinic A**

[ Modify ] [ New Year ] [ Delete ]

**Partner and Record Identifiers**

**Clinic name:**

**Clinic ID:**

**Clinic Street:**

**Clinic City:**

**Clinic State:**

**Clinic zip code:**

**Clinic County:**

**Comments** (leave blank if there are no comments):

[ Modify ] [ New Year ] [ Delete ]

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

Collapse All

-- **New Health System** --

[ - ] Andaluca Health System (123)

- HS Baseline
- HS Year 1 - CRCCP 2020-2002-py1
- HS Year 2 - CRCCP 2020-2002-py2
- HS Year 3 - CRCCP 2020-2002-py3
- -- New HS Year --

-- New Clinic --

[ - ] Andaluca Clinic A (001)

- **Baseline** ->
- Year 1 - CRCCP 2020-2002-py1
- Year 2 - CRCCP 2020-2002-py2
- Year 3 - CRCCP 2020-2002-py3
- -- New Year --

[ - ] Andaluca Clinic B (002)

- Baseline
- Year 1 - CRCCP 2020-2002-py1
- Year 2 - CRCCP 2020-2002-py2
- -- New Year --

[ - ] Catalonia Health System (321)

- HS Baseline
- HS Year 1 - CRCCP 2020-2002-py1
- -- New HS Year --

-- New Clinic --

[ - ] Catalonia Clinic A (001)

- Baseline
- Year 1 - CRCCP 2020-2002-py1
- -- New Year --

[Andaluca Health System](#) > [Andaluca Clinic A](#) > Baseline

[ Modify ] [ New Year ]

[ Delete ]

**Baseline Clinic CRCCP Activity and Status**

**Clinic CRCCP Activities Start Date:**

**Baseline PY: 1**

**COVID-19 clinic closure or hours reduced:**

**COVID-19 closure amount:**

**COVID-19 Hours reduced:**

**COVID-19 screening/diagnostic impact:**

**COVID-19 sick visits:**

**COVID-19 high risk visits:**

**COVID-19 telemed visits:**

**COVID-19 no referrals for screening colo:**

**COVID-19 no referrals for follow-up colo:**

**COVID-19 pts cancelled:**

**COVID-19 pts fearful:**

**COVID-19 other:**

**COVID-19 other specify** (leave blank if unknown):



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

**COVID-19 EBI impact:**

**COVID-19 PTR impact:**

**COVID-19 PVR impact:**

**COVID-19 PAF impact:**

**COVID-19 RSB impact:**

**COVID-19 PN impact:**

**COVID-19 Comments** (leave blank if there are no comments):

**Baseline (part 3 - Health System and Clinic Characteristics and Clinic Patient Population)**



## Baseline Health System and Clinic Characteristics and Clinic Patient Population

# of primary care providers at clinic:

10

Total # of clinic patients:

2000

Total # of clinic patients, age 50-75:

1000

% of patients, age 50-75, women:

50

% of patients, age 50-75, uninsured:

10

% of patients, age 50-75, Hispanic (leave blank if unknown):

50

% of patients, age 50-75, White (leave blank if unknown):

20

% of patients, age 50-75, Black or African American (leave blank if unknown):

20

% of patients, age 50-75, Asian (leave blank if unknown):

20

% of patients, age 50-75, Native Hawaiian or other Pacific Islander (leave blank if unknown):

10

% of patients, age 50-75, American Indian or Alaskan Native (leave blank if unknown):

10

% of patients, age 50-75, More than one race (leave blank if unknown):

20

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):

Newly screening or opened:

No (1 or more years)

Comments (leave blank if there are no comments):

## 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

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### Chart Review Screening Rates

**CR Screening rate (%):** 30

**CR screening rate numerator:**

30

**CR screening rate denominator:**

100

**CR Measure used:**

HEDIS

**% of charts reviewed to calculate screening rate:** 10

**Sampling Method:**

Yes

**CR screening rate confidence:**

Somewhat confident

**CR Screening rate problem:**

No

**Specify CR- screening rate problem:**

**CR Screening rate target:**

50

**Comments for CR rates** (leave blank if there are no comments):

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

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**EHR Screening Rates**

**EHR Screening rate (%):** 30

**EHR screening rate numerator:**

30

**EHR screening rate denominator:**

100

**EHR Measure used:**

HEDIS

**EHR screening rate confidence:**

Somewhat confident

**EHR Screening rate problem:**

No

**Specify EHR screening rate problem:**

**EHR rate reporting source:**

Clinic EHR

**EHR screening rate target:**

50

**Comments for EHR rates (leave blank if there are no comments):**

**Baseline (part 6 - CRC Screening Rates and Practices continued)**

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## 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:

30

Fecal kit return date available:

Colonoscopy completion rate: 30

# patients referred for colonoscopy:

100

# patients completing colonoscopy:

30

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 ▾

Clinic colorectal cancer champion:

Yes ▾

Utilizing health IT to improve data collection and quality:

Yes ▾

Utilizing health IT tools for monitoring program performance:

Yes ▾

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:

No ▾

Provider reminder system in place:

No ▾

Provider assessment and feedback in place:

No ▾

Reducing structural barriers in place:

No ▾

Small media in place:

Yes ▾

Patient navigation in place:

Yes ▾

Patient Navigation Purpose:

CRC screening ▾

Number of FTEs delivering patient navigation:

2 ▾

Comments (leave blank if there are no comments):

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

### Other Baseline Colorectal Cancer Activities and Comments

**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):

[\[ Modify \]](#) [\[ New Year \]](#)

[\[ Delete \]](#)

Collapse All

-- New Health System --

- [-] Andalusia Health System (123)
  - HS Baseline
  - HS Year 1 - CRCCP 2020-2002-py1
  - HS Year 2 - CRCCP 2020-2002-py2
  - HS Year 3 - CRCCP 2020-2002-py3
  - -- New HS Year --
- New Clinic --
- [-] Andalusia Clinic A (001)
  - Baseline
  - Year 1 - CRCCP 2020-2002-py1 ->
  - Year 2 - CRCCP 2020-2002-py2
  - Year 3 - CRCCP 2020-2002-py3
  - -- New Year --
- [-] Andalusia Clinic B (002)
  - Baseline
  - Year 1 - CRCCP 2020-2002-py1
  - Year 2 - CRCCP 2020-2002-py2
  - -- New Year --
- [-] Catalonia Health System (321)
  - HS Baseline
  - HS Year 1 - CRCCP 2020-2002-py1
  - -- New HS Year --
- New Clinic --
- [-] Catalonia Clinic A (001)
  - Baseline
  - Year 1 - CRCCP 2020-2002-py1
  - -- New Year --

[ Modify ] [ New Year ]

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### Annual Clinic CRCCP Activity and Status

**Annual Report Period:**

CRCCP 2020-2002-py1

**Annual Partner Status:**

Active

**Suspension/Termination date:**

**Reason for suspension or termination:**

**Other reason for suspension or termination:**

**COVID-19 clinic closure or hours reduced:**

Yes, reduced hours

**COVID-19 closure amount:**

**COVID-19 Hours reduced:**

8

**COVID-19 screening/diagnostic impact:**

Yes

**COVID-19 sick visits:**

Yes

**COVID-19 high risk visits:**

Yes

**COVID-19 telemed visits:**

No



Annual (part 2 - Clinic CRCCP Activity and Status continued)

**COVID-19 no referrals for screening colo:**

Yes ▾

**COVID-19 no referrals for follow-up colo:**

Yes ▾

**COVID-19 pts cancelled:**

No ▾

**COVID-19 pts fearful:**

Yes ▾

**COVID-19 other:**

No ▾

**COVID-19 other specify** (leave blank if unknown):

**COVID-19 EBI impact:**

Yes ▾

**COVID-19 PTR impact:**

Yes ▾

**COVID-19 PVR impact:**

Yes ▾

**COVID-19 PAF impact:**

No ▾

**COVID-19 RSB impact:**

No ▾

**COVID-19 PN impact:**

Yes ▾

**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:**

**Total # of clinic patients, age 50-75:**

**% of patients, age 50-75, uninsured:**

**Name of primary EHR vendor at clinic:**

**Other EHR, specify** (leave blank if unknown):

**Primary EHR home:**

**Other EHR home specify** (leave blank if unknown):

**Comments** (leave blank if there are no comments):

Annual (part 4 - CRC Screening 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 SR period:**

01/01/2020

**End date of 12-month measurement period: 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

**% of charts reviewed to calculate screening rate: 10**

**Sampling Method:**

No

**CR screening rate confidence:**

Somewhat confident

**CR Screening rate problem:**

No

**Specify CR- screening rate problem:**

**CR Screening rate target:**

50

**Comments for CR rates** (leave blank if there are no comments):

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### EHR Screening Rates

**EHR Screening rate (%):** 30

**EHR screening rate numerator:**

30

**EHR screening rate denominator:**

100

**EHR Measure used:**

HEDIS

**EHR screening rate confidence:**

Somewhat confident

**EHR Screening rate problem:**

No

**Specify EHR screening rate problem:**

**EHR rate reporting source:**

Clinic EHR

**EHR screening rate target:**

50

**Comments for EHR rates** (leave blank if there are no comments):

---

## 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:**

30

**Fecal kit return date available:**

**Colonoscopy completion rate:** 30

**# patients referred for colonoscopy:**

100

**# patients completing colonoscopy:**

30

**Colonoscopy completion rate date available:**

Annual (part 7 - CRC Screening Rates and Practices continued)

**Follow-up colonoscopy completion rate: 30**

**# patients referred for follow-up colonoscopy:**

**# patients completing follow-up colonoscopy:**

**Follow-up colonoscopy completion rate date available:**

**# patients with CDC-paid follow-up colonoscopy:**

**# patients with normal colonoscopy results:**

**# patients with adenomatous polyps:**

**# patients with abnormal findings:**

**# patients diagnosed with CRC:**

**Comments** (leave blank if there are no comments):

**Annual (part 8 - Monitoring and Quality Improvement Activities)**



## Annual Monitoring and Quality Improvement Activities

**Clinic colorectal cancer screening policy:**

Yes ▾

**Clinic colorectal cancer champion:**

Yes ▾

**Utilizing health IT to improve data collection and quality:**

No ▾

**Utilizing health IT tools for monitoring program performance:**

Yes ▾

**QA/QI support:**

Yes ▾

**Process Improvements:**

No ▾

**Frequency of monitoring colorectal cancer screening rate:**

Quarterly ▾

**Validated screening rate:**

No ▾

**Validation method:**

Yes ▾

**Other Validation Method Specify** (leave blank if unknown):

**Health Center Controlled Network:**

Yes ▾

**Frequency of implementation support to clinic:**

Monthly ▾

**CRCCP financial resources:**

Yes, to the clinic ▾

**Amount of CRCCP financial resources:**

100000 ▾

**Comments** (leave blank if there are no comments):

### Annual (part 9 - EBIs and Other Clinic Activities)

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

### EBI-Patient Reminder System

CRCCP resources used toward a patient reminder system:

Yes ▾

Patient reminder system in place:

Yes, newly in place ▾

Patient reminder system planning activities:

▾

Patient reminder system enhancements:

Yes ▾

Patient reminders sent multiple ways:

Yes ▾

Maximum number and/or frequency of patient reminders:

3 ▾

Patient reminder system sustainability:

Yes ▾

### EBI -Provider Reminder System

CRCCP resources used toward a provider reminder system:

No ▾

Provider reminder system in place:

No ▾

Provider reminder system planning activities:

Yes ▾

Provider reminder system enhancements:

▾

Provider reminders sent multiple ways:

▾

Maximum number and/or frequency of provider reminders:

▾

Provider reminder system sustainability:

▾

Annual (part 10 - EBIs and Other Clinic Activities continued)

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**EBI -Provider Assessment and Feedback**

**CRCCP resources used toward provider assessment and feedback:**

Yes ▾

**Provider assessment and feedback in place:**

Yes, newly in place ▾

**Provider assessment and feedback planning activities:**

▾

**Provider assessment and feedback enhancements:**

▾

**Provider assessment and feedback frequency:**

Monthly ▾

**Provider assessment and feedback sustainability:**

Yes ▾

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**EBI -Reducing Structural Barriers**

**CRCCP resources used toward reducing structural barriers:**

No ▾

**Reducing structural barriers in place:**

No ▾

**Reducing structural barriers planning activities:**

No ▾

**Reducing structural barriers enhancements:**

▾

**Reducing structural barriers more than one way:**

▾

**Maximum ways reducing structural barriers:**

▾

**Reducing structural barriers sustainability:**

▾

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

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## Small Media

CRCCP resources used toward small media:

Yes ▾

Small media in place:

Yes, continuing ▾

Small media planning activities:

▾

Small media enhancements:

Yes ▾

Maximum number of ways and times small media delivered:

3 ▾

Small media sustainability:

No ▾

---

## Patient Navigation

CRCCP resources used toward patient navigation:

Yes ▾

Patient navigation in place:

Yes, continuing ▾

Patient navigation planning:

▾

Patient Navigation Purpose:

Follow-up colonoscopies ▾

Patient Navigation Enhancements:

Yes ▾

Average amount of patient navigation time:

> 30 minutes to 1 hour ▾

Patient navigators for EBIs:

Yes ▾

Patient navigation sustainability:

Yes ▾

Number of FTEs delivering patient navigation:

2 ▾

Number of patients navigated:

100 ▾

Comments (leave blank if there are no comments):

Annual (part 12 - Annual Implementation Factors)

**Annual Implementation Factors**

**Complexity:**

Strongly Disagree ▾

**Adaptability:**

Neither Agree nor Disagree ▾

**Cost-substantial resources:**

Agree ▾

**Cost-worthy:**

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 ▾

**Staff-time and resources:**

Neither Agree nor Disagree ▾

**Staff-training:**

Strongly Disagree ▾

**Appropriate Set:**

Disagree ▾

**Champion designated:**

Neither Agree nor Disagree ▾

**Champion responsibility:**

Agree ▾

**Team debrief:**

Strongly Agree ▾

Annual (part 13 - Other Colorectal Cancer Activities and Comments)

**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 ▾

**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):

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[ [Modify](#) ] [ [New Year](#) ] [ [Delete](#) ]

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