Maryland Department of Health and Mental Hygiene
Prevention and Health Promotion Administration
Cancer and Chronic Disease Bureau
Center for Cancer Prevention and Control

CIGARETTE RESTITUTION FUND PROGRAM
2017 PROGRAMS NEEDS ASSESSMENT
ABBREVIATED SUMMARY
APRIL 2017

The Cigarette Fund Restitution Program's Unit (CRFP Unit) developed a Needs Assessment to gauge CRF-CPEST program needs for the coming year. Questions in this assessment focused on the following CRFP areas:

- The Grant Application process
- CRFP Unit Site Visits
- Fiscal and Budget Processes
- Education and Outreach

- Community Health Coalitions
- Clinical Processes
- Communications
- Other Program Technical Needs

Overall Summary of Findings

In general, the majority of programs indicated a high level of importance (either important or very important) to each topic area. However, answers to open ended questions varied as some participants who took the assessment indicated that they had greater or lesser experience as a program employee. A common theme throughout the assessment was the need for greater CRFP Unit training, particularly for new program employees. Below is a summary of findings, which indicates that the programs are aligned in most areas in regard to what is important for them, and how the CRFP Unit can contribute to their success through providing additional training, technical guidance and support. Additionally, it was noted in several instances that programs appreciate the CRFP Unit's commitment to the success of each program as this was not as apparent in the past.

Grant Application

In regard to the CRFP grant application, 75% reported it was important/very important to receive additional grant application instruction training or guidance when the application is released. 71% reported it was important/very important to receive more time for the application to be completed. 54% reported it was important/very important to remove the policies and procedures from the grant application. Additionally, several open-ended comments in regard to the grant application process included the need for the CRFP Unit to:

- Provide a review of the grant application via webinar or teleconference;
- Provide a template for policies and procedures (i.e. such as billing, outreach, database quality assurance, intake);

- Provide guidance about specific changes to the Budget Grant Review Tool and the Non-Budget Grant Review Tool via webinar or teleconference.

CRFP Unit Site Visits

In regard to CRFP Unit Site Visits, 64% reported that it was important/very important to be able to complete a comprehensive assessment prior to the site visit to prioritize areas that will be reviewed as part of the site visit. 56% reported it is important/very important for programs to receive more time (from 30 days to 45 days) to complete the site visit Action Plan. 40% reported that it was important/very important to receive training about the site visit process. 76% reported that it is important/very important for the Surveillance Evaluation Unit (SEU) to provide a summary of performance measures during the site visit. 72% reported that it is important/very important for the SEU to provide a summary of Cancer Screening by Fiscal Year during each site visit. 64% reported that it is important/very important for the SEU to provide the Benchmarks Review during the site visit. Finally, 56% reported that it was important/very important for SEU to provide technical support for the Client Data Base and Education Data Base (CDB and EDB) as part of the Site Visit breakout sessions.

Fiscal and Budget Processes

In regard to the CRF Fiscal and Budget Processes, 74% reported that it is important/very important for the CRFP Unit to provide technical guidance on how to set up the purchase of care portion of the grant application budget. Equally, 74% reported that it is important/very important for the CRFP Unit to provide technical guidance on how to complete a budget modification request. 70% reported that it is important/very important for the CRFP Unit to provide technical guidance on how to complete the budget justification narrative for the grant application. 61% reported that it is important/very important for the CRFP Unit to provide technical guidance on how to determine whether the 60 percent clinical and 7 percent indirect costs rule is met in the grant application budget. Finally, 60% reported that it is important/very important for the CRFP Unit to provide technical guidance on how to determine the 15 percent funding limit for advertising and educational supplies in the grant application budget.

Education and Outreach

In regard to Education and Outreach, 68% reported that the Education and Outreach Work Plan is important/very important to each program's current process for planning and implementing effective education and outreach strategies. 72% reported it is important/very important for the CRFP Unit to provide evaluation and feedback on each program's education and outreach work plan. 88% reported it is important/very important for the CRFP Unit to provide guidance on effective ways to increase client recruitment. 84% reported it is important/very important for the CRFP Unit to provide guidance on effective approaches in planning and implementing public health outreach and education activities. 72% reported it is important/very important for the CRFP Unit to provide guidance on effective strategies for collaborating with local health providers. Equally, 72% reported it is important/very important for the CRFP Unit to provide guidance on how to create effective program goals and objectives for outreach and education planning. 60% reported it is important/very important for the CRFP Unit to provide guidance on how to assess the effectiveness of outreach and education activities. 76% reported it is

important/very important for the CRFP Unit to provide navigation guidance to increase patient participation.

Community Health Coalitions
In regard to Community Health Coalitions, 72% reported it is important/very important for the CRFP Unit to provide guidance in regard to the involvement of coalition members to guide program goals and activities. 60% reported it is important/very important for the CRFP Unit to provide guidance in regard to recruitment of Community Health Coalition (CHC) members. 56% reported it is important/very important for the CRFP Unit to provide guidance in regard to the organization of CHC meetings and minutes. Finally, 48% reported it is important/very important for the CRFP Unit to provide guidance in regard to assembling a CHC of diverse community representation.

Clinical Processes
In regard to the CRFP Unit's Clinical Process, 64% reported it is important/very important for the CRFP Unit to develop a new minimal standard policy template for intake, enrollment, and discharge. 48% reported it is important/very important for the CRFP Unit to develop a new case management checklist/flow sheet tool. Finally, 40% reported it is important/very important for the CRFP Unit to develop a new tracking tool to guide intake, enrollment, and discharge of client.

Communication
In regard to CRFP Unit communication, 88% reported it is important/very important for the CRFP Unit to provide orientation and/or trainings provided in person or by webinar for new program clinical staff. In regard to communication type, the majority (84%) prefer teleconferences and e-mail/listservs. Programs ranked webinars and one on one phone calls second in their preference at 68%.

Other Program Technical Needs
General program technical needs comments varied. Some programs identified the following technical needs:1) connecting right away with staff for guidance on CDB and EDB issues, 2) orientation training/classes for EDB database users, 3) having the CRFP Unit develop several standardized policy/procedure documents, and 4) a dedicated CRF/CPEST website for resources and additional training for new and current staff.

A complete report of assessment findings is available upon request to the CRFP Unit. To obtain a copy, please contact Cindy Doming, CRFP Unit Program Manager via email at cindy.domingo@maryland.gov, or by telephone at 410-767-5123.