

Follow-Up Survey for Cancer Control Implementation Science Base Camp

Please complete the survey below.

Thank you!

SURVEY DIRECTIONS

Answer the following questions for yourself, not for the team as a whole.
Please complete this survey in its entirety.

When asked about "Base Camp" we are referring to the Cancer Control Implementation Science Base Camp training you previously completed.

For open-ended questions, please share as much as you feel is important.

NOTE: EBIs = Evidence-based interventions

Since the Cancer Control Implementation Science Base Camp, please indicate if you have, personally, done any of the following:

	Not at all	Somewhat	Very much
I have developed or contributed to a plan or standards for facilitating implementation of EBIs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I have removed barriers to implementing EBIs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I have answered questions about EBIs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I have supported coalition efforts to use EBIs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I have addressed challenges with implementing EBIs	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Select which of these stakeholders have benefitted from this training and their level of improvement:

	Not involved in my work plan	No improvements	Some improvements	Many improvements
Patients/ survivors in your region	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Clinicians in your region	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Cancer coalition members	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comprehensive Cancer Control program staff	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comprehensive Cancer Control program leadership	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Other	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Not applicable/ I don't know	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Describe other stakeholders here:

How have you utilized what you learned in the Cancer Control Implementation Science Base Camp in your cancer control work since you completed the training?