

Revision History

Date	Changes	By Whom:
05/25/04	Original document.	J Casner
02/05/07	2007 Enhancements and WISEWOMAN Program Updates	Alison Knight

Overview

The following table defines the data proposed for collection through the CDC Heart Disease and Stroke Prevention and WISEWOMAN Information System (HDSP IS). For each key section, the question and response options are identified. If the response option is labeled "text", the responder can enter free form text. * indicates a required field. "(WW)" indicates information that is specific to the WISEWOMAN program. "(HDSP)" indicates information that is specific to the HDSP program.

Information Sections

The data collected is grouped according to the key sections listed below.

- [Program information](#)
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Program Information

Question	Response Options
Program Name	• Text
Grant Number	• Text
Program Type	• Display only
Primary Program Telephone	• Text
Business Official	• Text
Mailing Address Line 1	• Text
Mailing Address Line 2	• Text
Mailing City	• Text
Mailing State	• Select state from list
Mailing Postal Code	• Text
Shipping Address Line 1	• Text
Shipping Address Line 2	• Text
Shipping City	• Text
Shipping State	• Select state from list
Shipping Postal Code	• Text
Program Web Address	• Text

Program Fax	• Numeric
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Key Personnel

Question	Response Options
First Name *	• Text
Middle Name	• Text
Last Name *	• Text
Telephone *	• Text
E-mail Address *	• Text
Primary Role *	<ul style="list-style-type: none"> • Select one: <ul style="list-style-type: none"> - Administrative Support - Communication Specialist - Community Health Advisors - Data Manager (WW) - Data Management Staff (WW) - Epidemiologist - Evaluator - Health Educator - Health Systems Specialist - Lifestyle Intervention Specialist (WW) - Nutrition Coordinator (WW) - Physical Activity Coordinator (WW) - Policy Analyst - Program Coordinator - Program Director - Program Manager - Other (specify)
Secondary Role (WW)	<ul style="list-style-type: none"> • Select one: <ul style="list-style-type: none"> - Administrative Support - Communication Specialist - Community Health Advisors - Data Manager (WW) - Data Management Staff (WW) - Epidemiologist - Evaluator - Health Educator - Health Systems Specialist - Lifestyle Intervention Specialist (WW) - Nutrition Coordinator (WW) - Physical Activity Coordinator (WW) - Policy Analyst - Program Coordinator - Program Director - Program Manager - Other (specify)
Program Time Allocation *	• Percentage
Percentage of Salary paid by CDC DHDSP	• Percentage
Is this individual a contractor? *	<ul style="list-style-type: none"> • Select one: <ul style="list-style-type: none"> - Yes - No
Is this individual the primary program contact? *	<ul style="list-style-type: none"> • Select one: <ul style="list-style-type: none"> - Yes

Question	Response Options
	- No
Personnel Attachments Title*	• Text – file name
Date Revised*	• Date
Type of Evidence*	• Select one: - Resume - CV - Other (Specify)
Other (specify)	• Text

Key Partners

Question	Response Options
Partner Type*	• Select one: - Academia (university or college) - Community based organization (WW) - Community health center (FQHC) (WW) - District or local government agency (WW) - Faith based organization - Healthcare Organization - Organization Representing Priority Population(s) - Other State Government Entity - Private sector business - State Health Department Programs - Voluntary agencies or professional organizations - Other (specify)
Other (specify)	• Text
Partner Name*	• Text
Partner Contact Name*	• Text
Is this partner a member of the statewide work group responsible for the comprehensive CVH State plan*	• Select one: - Yes - No
Upload Evidence of Commitment*	• Text – file name
Type of Evidence	• Select one: - Letters of support - Memorandum of Understanding - Other (specify)
Other (specify)	• Text

Key Contractors

Question	Response Options
Organization Name*	• Text
Contact Name	• Text
Primary Role*	• Select one: - Communication - Communication/Marketing (WW) - Data Management (WW) - Epidemiologist - Evaluator

Question	Response Options
	<ul style="list-style-type: none"> - Health Educator - Health Systems Specialist - Information Technology Specialist (WW) - Lifestyle Intervention Service Delivery(WW) - Policy Analyst - Program/Intervention Development (WW) - Screening Service Delivery (WW) - Other (specify)
Secondary Role*	<ul style="list-style-type: none"> • Select one: <ul style="list-style-type: none"> - Communication - Communication/Marketing (WW) - Data Management (WW) - Epidemiologist - Evaluator - Health Educator - Health Systems Specialist - Information Technology Specialist (WW) - Lifestyle Intervention Service Delivery(WW) - Policy Analyst - Program/Intervention Development (WW) - Screening Service Delivery (WW) - Other (specify)
Other (specify)	<ul style="list-style-type: none"> • Text
Amount of Contract Funded by CDC CVH *	<ul style="list-style-type: none"> • Percentage

State Plan (HDSP)

Question	Response Options
Title*	<ul style="list-style-type: none"> • Text
Plan Timeframe*	<ul style="list-style-type: none"> • Dates
Status*	<ul style="list-style-type: none"> • Select one: <ul style="list-style-type: none"> - Draft - Published
Website Address	<ul style="list-style-type: none"> • Text
State Planning Group Name	<ul style="list-style-type: none"> • Text
List Subgroups	<ul style="list-style-type: none"> • Text
State Plan Attachments Title*	<ul style="list-style-type: none"> • Text – file name
Type of Evidence	<ul style="list-style-type: none"> • Select one: <ul style="list-style-type: none"> - Meeting Agenda or Minutes - State Plan - Other (specify)
Other (specify)	<ul style="list-style-type: none"> • Text

Burden Report (HDSP)

Question	Response Options
Your state's burden report is <i>currently</i> :	<ul style="list-style-type: none"> • Select one: <ul style="list-style-type: none"> - Published - Unpublished
Title*	<ul style="list-style-type: none"> • Text
Publish Date*	<ul style="list-style-type: none"> • Month and year
Report Focus*	<ul style="list-style-type: none"> • Select one: <ul style="list-style-type: none"> - Heart Disease - Stroke
Date hard copy sent to CDC*	<ul style="list-style-type: none"> • Month and year
Priority Populations:	
Gender*	<ul style="list-style-type: none"> • Select one: <ul style="list-style-type: none"> - Female - Male - Not Specific
Geography*	<ul style="list-style-type: none"> • Select all that apply: <ul style="list-style-type: none"> - Rural / Low Density - Urban / High Density - Not Specified
Race *	<ul style="list-style-type: none"> • Select up to 3: <ul style="list-style-type: none"> - American Indian or Alaska Native - Asian - African American or Black - Native Hawaiian or other Pacific Islander - White - Not Specified
Ethnicity*	<ul style="list-style-type: none"> • Select all that apply: <ul style="list-style-type: none"> - Hispanic or Latino - Not Hispanic or Latino - Not Specific
Socioeconomic Status (SES)*	<ul style="list-style-type: none"> • Select one: <ul style="list-style-type: none"> - Low - Not Specified
Additional Population Comments	<ul style="list-style-type: none"> • Text
Burden Report Web Address	<ul style="list-style-type: none"> • Text - URL
Upload Burden Report(s): Document Title	<ul style="list-style-type: none"> • Text – file name
Date Last Revised	<ul style="list-style-type: none"> • Month and year
Working Report Title*	<ul style="list-style-type: none"> • Text
Anticipated Publish Date*	<ul style="list-style-type: none"> • Month and year
Describe Progress to Date*	<ul style="list-style-type: none"> • Text

Standard Data Sources

Question	Response Options
Standard Data sources*	<ul style="list-style-type: none"> • Select one or more: <ul style="list-style-type: none"> - BRFSS Alcohol Consumption Module (WW) - BRFSS Cardiovascular Disease Module - BRFSS Cholesterol Awareness Module - BRFSS Core Modules (WW) - BRFSS Fruits and Vegetables Module (WW) - BRFSS Healthy Days Module (WW) - BRFSS Heart Attack and Stroke Module (WW) - BRFSS Heart Disease and Stroke Signs and Symptoms Module - BRFSS Hypertension Awareness Module - BRFSS Other Tobacco Products Module (WW) - BRFSS Physical Activity Module (WW) - BRFSS Quality of Life Module (WW) - BRFSS Smokeless Tobacco Module (WW) - BRFSS Tobacco Use Prevention Module (WW) - BRFSS Weight Control Module (WW) - Centers for Medicare and Medicaid Services (CMS) Health Care Organization - Health Plan Employer Data and Information Set (HEDIS) - Hospital Discharge Data - Indian Health Service (WW) - U.S. Bureau of Census - Vital statistics - WISEWOMAN Minimum Data Elements (WW) - Youth Risk Behavior Surveillance (YRBS) - Other (specify)
Other (specify)	<ul style="list-style-type: none"> • Text
Most Recent Data Set Year (YYYY)*	<ul style="list-style-type: none"> • Year

Other Data Sources

Question	Response Options
Data Source Name*	<ul style="list-style-type: none"> • Text
Describe Population Sampled*	<ul style="list-style-type: none"> • Text
Describe Collection Method*	<ul style="list-style-type: none"> • Text
Collection Frequency*	<ul style="list-style-type: none"> • Select one: <ul style="list-style-type: none"> - Single Collection - Ongoing Collections
Most Recent Year Collected*	<ul style="list-style-type: none"> • Year

Policy and Environmental Assessments (HDSP)

Question	Response Options
Title*	<ul style="list-style-type: none"> • Text

Question	Response Options
Assessment Type*	Select one: <ul style="list-style-type: none"> • State level • District level
Assessment Setting*	Select one: <ul style="list-style-type: none"> • Health Care • Work Site • Community • School
Last Assessment Date*	Enter Date
Summarize the data collected in the assessment*	<ul style="list-style-type: none"> • Text
Summarize the methods used for the assessment*	<ul style="list-style-type: none"> • Text
Summarize the findings of the assessment*	<ul style="list-style-type: none"> • Text
Attachments	<ul style="list-style-type: none"> • Upload File

Intervention Long Term Objective

Question	Response Options
Objective Title*	<ul style="list-style-type: none"> • Text
Objective Description*	<ul style="list-style-type: none"> • Text
Status*	<ul style="list-style-type: none"> • Select one: <ul style="list-style-type: none"> - Planned - In Process - Completed - Cancelled - Deferred
Related Recipient Activity (WW)	<ul style="list-style-type: none"> • Select one: <ul style="list-style-type: none"> - Develop a preventive health services program or preventive health services research study/studies. - Staff with at least two professional staff members to work full-time on WISEWOMAN or a plan for hiring such staff members. - Work with health care systems that can effectively deliver WISEWOMAN services and that target the population in need of these services. - Establish a cardiovascular disease prevention program as the primary focus, with culturally appropriate interventions addressing multiple risk factors that must include physical inactivity, poor nutrition, and tobacco use. - Implement screening, referral, and follow-up according to the recommendations of the National Cholesterol Education Program (NCEP). - Design culturally appropriate lifestyle interventions aimed at lowering blood pressure or cholesterol, improving physical activity or nutrition, or achieving smoking cessation in a similar target population. - Propose methods aimed at sustaining behavioral change. - Propose methods aimed at sustaining the program in future years. - Plan or conduct evaluation strategies to include reporting of suggested minimum data elements and cost information. - Formalize plans for Recipient Activities through development of program protocols or conduct program operations according to

Question	Response Options
	<ul style="list-style-type: none"> • previously developed and approved program protocols. - Work collaboratively to develop methods that have the potential to be implemented in other WISEWOMAN programs.
Primary Priority Area* (HDSP)	<ul style="list-style-type: none"> • Select one: <ul style="list-style-type: none"> - Control of high blood pressure - Control of high blood cholesterol - Increase knowledge of signs and symptoms and importance of calling 9-1-1 - Improve emergency response - Improve quality care (prevent first and second events; control risk factors and diseases) - Eliminate Disparities
Secondary Priority Area (HDSP)	<ul style="list-style-type: none"> • Select one: <ul style="list-style-type: none"> - Control of high blood pressure - Control of high blood cholesterol - Increase knowledge of signs and symptoms and importance of calling 9-1-1 - Improve emergency response - Improve quality care (prevent first and second events; control risk factors and diseases) - Eliminate Disparities
Related HP2010 National Goal (HDSP)	<ul style="list-style-type: none"> • Select one: <ul style="list-style-type: none"> - Prevention of Risk Factors - Detection and Treatment of Risk Factors - Early Identification and Treatment of Heart Attacks and Strokes - Prevention of Recurrent Cardiovascular Events
Direction of change* (HDSP)	<ul style="list-style-type: none"> • Select one: <ul style="list-style-type: none"> - Increase - Decrease
Unit of Measurement* (HDSP)	<ul style="list-style-type: none"> • Select one: <ul style="list-style-type: none"> - Number of - Percent of - Rate of
What will be measured? (HDSP)	<ul style="list-style-type: none"> • Text
Baseline* (HDSP)	<ul style="list-style-type: none"> • Numeric • Not required if "Baseline Unknown" is selected
Baseline Unknown (HDSP)	<ul style="list-style-type: none"> • Select one: <ul style="list-style-type: none"> - Yes - No
Target * (HDSP)	<ul style="list-style-type: none"> • Number
Evidence of measuring target* (HDSP)	<ul style="list-style-type: none"> • Select one: <ul style="list-style-type: none"> - BRFS Cholesterol Awareness Module - BRFS Cardiovascular Disease Module - BRFS Heart Disease and Stroke Signs and Symptoms Module - BRFS Hypertension Awareness Module - Centers for Medicare and Medicaid Services (CMS) - Health Care Organization - Health Plan Employer Data and Information Set (HEDIS) - Hospital Discharge Data - U.S. Bureau of Census - Vital statistics - Youth Risk Behavior Surveillance (YRBS) - Other (Specify)

Question	Response Options
Other (specify) (HDSP)	<ul style="list-style-type: none"> • Text
Measurement (WW)*	<ul style="list-style-type: none"> • Select one <ul style="list-style-type: none"> - Increase the number of women to be screened each year for chronic disease risk factors and to receive risk reduction counseling based on the screening results. - Increase the percentage of new WISEWOMAN participants screened who return for the evaluation (first annual) screening visit within 10-14 months from baseline screening. This is required for purposes of program evaluation. - Increase the percentage of new women screened who attend at least one standardized lifestyle intervention session. - Increase the percentage of new women screened who have completed standardized lifestyle intervention sessions. - Decrease the percentage of failure to complete diagnostic/medical follow-up for women who have an alert screening value. - Increase the percentage of participants who adopt a healthier lifestyle during the year following baseline screening. - Reduce the percentage of expected cardiovascular disease events and deaths per 1,000 women, in 10 years.
Specify the measurement for the performance indicator selected above (WW)*	<ul style="list-style-type: none"> • Baseline: Number • Target: Number
If baseline is unknown, explain how baseline will be defined: (HDSP)	<ul style="list-style-type: none"> • Text
Which state plan objective does this objective relate to? (HDSP)	<ul style="list-style-type: none"> • Text
Related RE-AIM Goal* (WW)	<ul style="list-style-type: none"> • Select one: <ul style="list-style-type: none"> - To build a national WISEWOMAN program that provides every eligible NBCCEDP woman with an opportunity for WISEWOMAN services. (R-1) - To establish a WISEWOMAN program that reaches NBCCEDP women with the highest cardiovascular disease risk, including minority women in numbers that represent the proportion seen in NBCCEDP. (R-2) - To establish a WISEWOMAN program where at least 60% to 75% of the women screened receive the lifestyle intervention (LSI). (R-3) - To establish a WISEWOMAN program that improves lifestyle behavior. (E-1) - To establish a WISEWOMAN program that improves CVD risk scores. (E-2) - To ensure that WISEWOMAN is a cost effective program. (E-3) - To establish a WISEWOMAN program that is easy to adopt. (A-1) - To establish a WISEWOMAN program that can be delivered as intended (i.e. implemented with fidelity). (I-1) - To establish that the benefits of the WISEWOMAN program can be maintained over time at the individual level. (M-1) - To establish that the activities of the WISEWOMAN program can be sustained over time at the organizational level. (M-2)
Estimated Start Date*	<ul style="list-style-type: none"> • Month and year
Estimated End Date*	<ul style="list-style-type: none"> • Month and year
Describe revisions to this objective (required if target is updated, status is deferred or cancelled, start date is delayed, or end date is extended.):	<ul style="list-style-type: none"> • Text

Intervention Supporting Objective

Question	Response Options
Objective Title*	<ul style="list-style-type: none"> • Text
Objective Description*	<ul style="list-style-type: none"> • Text
Status*	<ul style="list-style-type: none"> • Select one: <ul style="list-style-type: none"> - Planned - In Process - Completed - Cancelled - Deferred
Setting	<ul style="list-style-type: none"> • Select one: <ul style="list-style-type: none"> - Healthcare - Community - Worksite - Other (Specify)
Other (specify)	<ul style="list-style-type: none"> • Text
Measurement (WW)*	<ul style="list-style-type: none"> • Select one <ul style="list-style-type: none"> - Increase the number of women to be screened each year for chronic disease risk factors and to receive risk reduction counseling based on the screening results. - Increase the percentage of new WISEWOMAN participants screened who return for the evaluation (first annual) screening visit within 10-14 months from baseline screening. This is required for purposes of program evaluation. - Increase the percentage of new women screened who attend at least one standardized lifestyle intervention session. - Increase the percentage of new women screened who have completed standardized lifestyle intervention sessions. - Decrease the percentage of failure to complete diagnostic/medical follow-up for women who have an alert screening value. - Increase the percentage of participants who adopt a healthier lifestyle during the year following baseline screening. - Reduce the percentage of expected cardiovascular disease events and deaths per 1,000 women, in 10 years.
Specify the measurement for the performance indicator selected above (WW)*	<ul style="list-style-type: none"> • Baseline: Number • Target: Number
Direction of change* (HDSP)	<ul style="list-style-type: none"> • Select one: <ul style="list-style-type: none"> - Increase - Decrease
Unit of Measurement* (HDSP)	<ul style="list-style-type: none"> • Select one: <ul style="list-style-type: none"> - Number of - Percent of - Rate of
What will be measured?* (HDSP)	<ul style="list-style-type: none"> • Text
Baseline* (HDSP)	<ul style="list-style-type: none"> • Numeric • Not required if "Baseline Unknown" is selected
Baseline Unknown	<ul style="list-style-type: none"> • Select one: <ul style="list-style-type: none"> - Yes - No
Target * (HDSP)	<ul style="list-style-type: none"> • Number
Evidence of measuring target* (HDSP)	<ul style="list-style-type: none"> • Select one:

Question	Response Options
	<ul style="list-style-type: none"> - BRFSS Cholesterol Awareness Module - BRFSS Cardiovascular Disease Module - BRFSS Heart Disease and Stroke Signs and Symptoms Module - BRFSS Hypertension Awareness Module - Centers for Medicare and Medicaid Services (CMS) - Health Care Organization - Health Plan Employer Data and Information Set (HEDIS) - Hospital Discharge Data - U.S. Bureau of Census - Vital statistics - Youth Risk Behavior Surveillance (YRBS) - Other (Specify)
Other (specify) (HDSP)	<ul style="list-style-type: none"> • Text
If baseline is unknown, explain how baseline will be defined:	<ul style="list-style-type: none"> • Text
Objective Focus*	<ul style="list-style-type: none"> • Select one: <ul style="list-style-type: none"> - General Population Based - WISEWOMAN Population Based (WW) - Priority Population Based (specify below) <ul style="list-style-type: none"> • Gender* (HDSP) <ul style="list-style-type: none"> ▪ Select one: <ul style="list-style-type: none"> o Female o Male o Not Specific • Geography* (HDSP) <ul style="list-style-type: none"> ▪ Select all that apply: <ul style="list-style-type: none"> o Rural / Low Density o Urban / High Density o Other (Specify) o Not Specified • Geography* (WW) <ul style="list-style-type: none"> ▪ Select all that apply <ul style="list-style-type: none"> o City o County o District/Region o Entire State o Entire Territory o Frontier o Rural o Tribal Reservation/Service Area o Urban o Not Specific • Ethnicity* <ul style="list-style-type: none"> ▪ Select all that apply: <ul style="list-style-type: none"> o Hispanic or Latino o Not Hispanic or Latino o Not Specific • Race* <ul style="list-style-type: none"> ▪ Select up to 3: <ul style="list-style-type: none"> o American Indian or Alaska Native o Asian o African American or Black o Native Hawaiian or other Pacific Islander

Question	Response Options
	<ul style="list-style-type: none"> o White o Not Specified • SES* (HDSP) <ul style="list-style-type: none"> ▪ Select one: <ul style="list-style-type: none"> o Low o Not Specified
Describe the steps taken to ensure the objective is culturally competent for the priority population identified. (HDSP)	<ul style="list-style-type: none"> • Text
Additional Population Comments (WW) Supplemental project (HDSP)	<ul style="list-style-type: none"> • Select one: <ul style="list-style-type: none"> - None - Stroke Registry - Optional Funding
Summarize how resources have been leveraged for this objective*	<ul style="list-style-type: none"> • Text
Estimated Start Date*	<ul style="list-style-type: none"> • Month and year
Estimated End Date*	<ul style="list-style-type: none"> • Month and year
Describe revisions to this objective (required if target is updated, status is deferred or cancelled, start date is delayed, or end date is extended.):	<ul style="list-style-type: none"> • Text

Objective Progress

Question	Response Options
Date Progress Occurred*	<ul style="list-style-type: none"> • Month and year
Describe Progress*	<ul style="list-style-type: none"> • Text
Has the objective's target been met?	<ul style="list-style-type: none"> • Select one: <ul style="list-style-type: none"> - Yes - No - Currently Ongoing
Date objective's target was met	<ul style="list-style-type: none"> • Month and year
Actual Measurement	<ul style="list-style-type: none"> • Direction of Change <ul style="list-style-type: none"> - Select one: <ul style="list-style-type: none"> o Increase o Decrease • Unit of Measurement <ul style="list-style-type: none"> - Select one <ul style="list-style-type: none"> o Number of o Percent of o Rate of • What was measured?: Text • Actual level: Number
Facilitating factors for success	<ul style="list-style-type: none"> • Text
Describe any barriers and/or issues to meeting the objective and plans to overcome:	<ul style="list-style-type: none"> • Text
Describe any additional benefits (unexpected outcomes) as a result of this objective:	<ul style="list-style-type: none"> • Text

Activity

Question	Response Options
Activity Title*	• Text
Activity Description*	• Text
Estimated Start Date*	• Month and year
Estimated End Date*	• Month and year
Current Status*	• Select one: <ul style="list-style-type: none"> - Planned - In Process - Completed - Cancelled - Deferred
Lead Personnel*	• Select from list
Other personnel assigned to this activity	• Select from list
Contractors assigned to this activity	• Select from list
Partners assigned to this activity	• Select from list
Describe Partner Involvement:	• Text
Other (specify)	• Text

Activity Progress (HDSP)

Question	Response Options
Date Progress Occurred*	• Month and year
Describe Progress*	• Text

Products

Question	Response Options
Title*	• Text
Type*	• Select one: <ul style="list-style-type: none"> - Audio - Book - Book Chapter - Booklet - Conference Paper - Conference Proceedings - Curriculum - Electronic Tool/Resource - Evaluation Plan - Fact Sheet - Featured Article - Journal Article - Manual - Newsletter - Policy Document - Poster/Billboard - Presentation - Press Kit

Question	Response Options
	<ul style="list-style-type: none"> - Report - Slideshow - Survey/Instruments - Video - Other (specify)
Other (specify)	<ul style="list-style-type: none"> • Text
Product Description*	<ul style="list-style-type: none"> • Text
Authors	<ul style="list-style-type: none"> • Text
Product Focus*	<ul style="list-style-type: none"> • Select one or more: <ul style="list-style-type: none"> - Assessment and inventory - Awareness approaches/strategies - Burden of Cardiovascular Disease - Cultural competence - Data Management - Disease/Risk Factors - Epidemiology - Environmental approaches/strategies - Evaluation - Health Communication - Lifestyle Intervention (Nutrition) (WW) - Lifestyle Intervention (Physical Activity) (WW) - Lifestyle Intervention (Tobacco) (WW) - Partnerships - Policy approaches/strategies - Population based strategies - Priority population strategies - Program planning - Recruitment (WW) - System approaches/strategies - Training & Technical Assistance - Other (specify)
Other (specify)	<ul style="list-style-type: none"> • Text
Product Language*	<ul style="list-style-type: none"> • Select all that apply <ul style="list-style-type: none"> - English - Spanish - Other(Specify)
Other (specify)	<ul style="list-style-type: none"> • Text
Intended Audience*	<ul style="list-style-type: none"> • Select one or more: <ul style="list-style-type: none"> - General Population (WW) - WISEWOMAN population (WW) - Priority Population (WW) - Community/local program - Decision/policy makers - Faith-based organization - General population - Healthcare organization - Healthcare provider - Lifestyle Intervention Delivery (WW) - Lifestyle Intervention Development (WW) - Local health department - Other state government entity - Priority population - Private sector business

Question	Response Options
	<ul style="list-style-type: none"> - State health department - Voluntary agency or professional organization - Other (specify)
Other (specify)	<ul style="list-style-type: none"> • Text
Website Address	<ul style="list-style-type: none"> • Text
Upload product	<ul style="list-style-type: none"> • Text – file name
Date last revised	<ul style="list-style-type: none"> • Date
Can this product be shared?	<ul style="list-style-type: none"> • Select one: <ul style="list-style-type: none"> - Yes - No

DRAFT