NATIONAL ASSOCIATION OF
CHRONIC DISEASE DIRECTORS
Promoting Health. Preventing Disease.

Harnessing the Power of Partnerships

to Increase the Volume of Cancer Screening Services

MARCH 14, 2023 3:00-4:30 P.M. EDT

The "Enhancing Cancer Program Grantee Capacity through Peer-to-Peer Learning" project is supported by the Centers for Disease Control and Prevention of the U.S. Department of Health and Human Services (HHS) as part of a financial assistance award totaling $600,000 with 100 percent funded by CDC/HHS. The contents are those of the author(s) and do not necessarily represent the official views of, nor an endorsement, by CDC/HHS, or the U.S. Government.

COMING UP

Continue the Discussion About
Harnessing the Power of Partnerships

The call series, facilitated by Strategic Health Concepts, is an informal space to get questions answered, share insights from the webinar, and engage with your peers.

To attend one or all sessions, register at the links below. You can drop in and out at any time during the calls.

Register | Mar. 20, 2:00 p.m. - 3:00 p.m. ET

Register | Mar. 21, 4:00 p.m. - 5:00 p.m. ET

Register | Mar. 22, 3:00 p.m. - 4:00 p.m. ET

Register | Mar. 23, 11:00 a.m. - 12:00 p.m. ET

Webinar Objectives

1. To share how partnerships with traditional and non-traditional organizations and groups can be leveraged to increase cancer screenings access and services.
2. To demonstrate how partnerships can extend your community reach and enhance the volume and value of cancer screening services through financial support, resources, and tools.

Today's Speakers

Tiffany M. Young, MPH, MSW
Moderator
Think Equity

Mandi L. Pratt-Chapman, PhD
George Washington Cancer Center

Nikki Medalen, MSN, BSN, RN
Quality Health Associates of North Dakota

Allison Slaubaugh, RN-BSN
Spirit Lake Health Center

Michael Dickey, MPH
South Carolina Department of
Health and Environmental Control

THE GEORGE WASHINGTON UNIVERSITY
WASHINGTON, DC

Leveraging Partnerships to Enhance Reach and Impact of Cancer Screening

Mandi L. Pratt-Chapman, PhD

March 14, 2023

GW Cancer Center

Communify

Access Wholistic and Productive Living AWPLI

MOREHOUSE SCHOOL OF MEDICINE

Service Providers

WHITMAN-WALKER

AWCAA

NUEVA VIDA

Community Partner Representatives: Steering Committee

The Pennsylvania Avenue Baptist Church
Grow with us * Transform the world

Nuestras Voces... Our Voices
National Hispanic Network to Reduce Tobacco-Related and Cancer Health Disparities

national lgbt cancer network
ADVOCATING FOR HEALTH EQUALITY

SelfMade Health Network

Community Partner Representatives: Advisory Group

The Why…

THE GEORGE WASHINGTON UNIVERSITY
WASHINGTON, DC

GW Cancer Center

Toward Health Equity in Breast Cancer Care: THE Oncology Grant

290,560

Estimated new breast cancer diagnoses in 2022

43,780

Estimated breast cancer related deaths in 2022

Health disparities account for higher rates of breast cancer incidence and mortality

Our Project

TITLE

Activating Neighborhood Health Ambassadors to Reduce Breast Cancer Risk and Increase Screening

AUDIENCE

Seeking to amplify reach into African immigrant, African American, Latino, LGBTQI communities across the Washington, DC area

AIMS

- To increase knowledge about breast cancer prevention, risks and importance of screening
- To increase intention to adhere to risk reduction and screening recommendations
- To increase actual breast cancer screenings and behavioral changes to reduce breast cancer

Key Deliverables: 2 Pillars

Neighborhood Health Ambassador Approach

- Train **36** community members as NHAs
- Provide HealthDesk digital health support to **3600** people from priority populations through NHAs
- Guide **360** persons to breast cancer screening through NHAs and institutional CHW support

Tailored Communications Campaign

- Conduct focus groups to refine messaging
- Disseminate communications campaign

Supported by Evaluation

- Knowledge change for NHAs
- Number of persons reached through NHA education and digital health support
- Number of persons who sign up for SMS text program follow up
- Community member a) confidence in using digital health applications and b) intention to adopt a healthy behavior (tobacco cessation, alcohol reduction, increase to physical activity, breast screening)
- Number of people navigated successfully to breast cancer screening

Strategic Approach

ASSIGNMENT

Raise awareness about cancer risk and screening among African immigrant, African American, Latina and LGBTQ+ populations.

1

Working with community partners / orgs to set us up for success during research

2

Research and focus group

3

Creative development

4

Media Deployment

Communications Strategy

Hypothesis: Using a multichannel campaign, we can further awareness about cancer risk and drive the number of screenings for the target audience.

Strategies

- Search engine marketing
- Engaging images
- Online video and audio streaming
- Social media
- Retargeting to lift the above strategies to raise awareness among priority groups

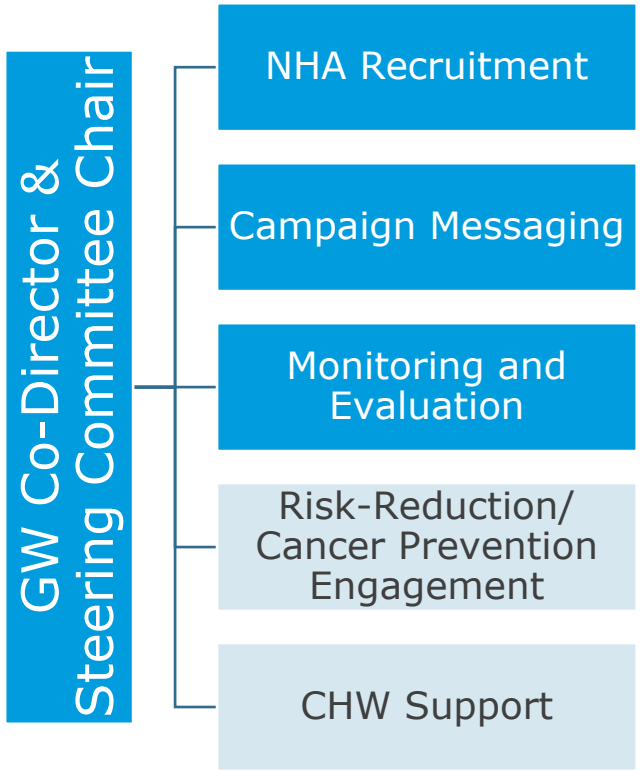
Project Timeline

Official Project Launch: March 1, 2023

Q1 (March-May 2023)	Q2 (June-August 2023	Q3 (September-November 2023	Q4 (December 2023-February 2024)	Q1 (March-May 2024)	Q2 (June-August 2024)
• Project Onboarding • Recruitment of Community Co-Director • Recruitment of NHAs • Communication campaigns message development, refinement, message testing	• Communication campaigns message development, refinement, message testing • CHW Training	• NHA education and navigation within community	• NHA education and navigation within community • Communication campaign flight	• NHA education and navigation within community • Communication campaign flight • Project Evaluation/ Dissemination of Findings	• Project Evaluation/ Dissemination of Findings

Working Methods & Structure

Community partners will be engaged in the **planning, prioritization, implementation and evaluation** of all project activities



Next Steps

Structure	CHW Recruitment	Campaign Messaging	Monitoring and Evaluation
• Develop Steering Committee structure and meeting cadence • Recruit Community Co-Director • Community partner vendor registration	• Determine NHA recruitment process ✔ Develop recruitment flyer and application ✔ Identify timeline for recruitment and selection ✔ Establish selection criteria	• Develop Focus Group protocol • Determine timeline for engagement	• Develop process for tracking data including use of Trumpia software • Create pre and post evaluations for NHAs • Follow up on actions resulting from 3/8 evaluation meeting with Gilead

March/ April 2023

Q&A

THE GEORGE WASHINGTON UNIVERSITY

WASHINGTON, DC

Thank you!

GW Cancer Center

SCREEND

Improving Colorectal Cancer Screening Rates in North Dakota

Harnessing the Power of Partnerships: Spirit Lake Health Center and Spirit Lake Public Health

Quality Health Associates *of* North Dakota

Data

GPRA Data

Baseline	Latest Available Rate	3-month Rolling Rate	3-month Rolling RI	12-month Rolling Rate	12-month Rolling RI
29.16%	33.36%	36.22%	22.95%	33.17%	12.60%

Government Performance and Results Act (GPRA)

- Denominator changed from 50-75 to 45-75 in March of 2022.
- Denominator includes patients who have accessed any healthcare service in the last 3 years (dental, behavioral health, optometry, medical clinic).
- Goal for 2023: 41% GPRA or 64% Clinic

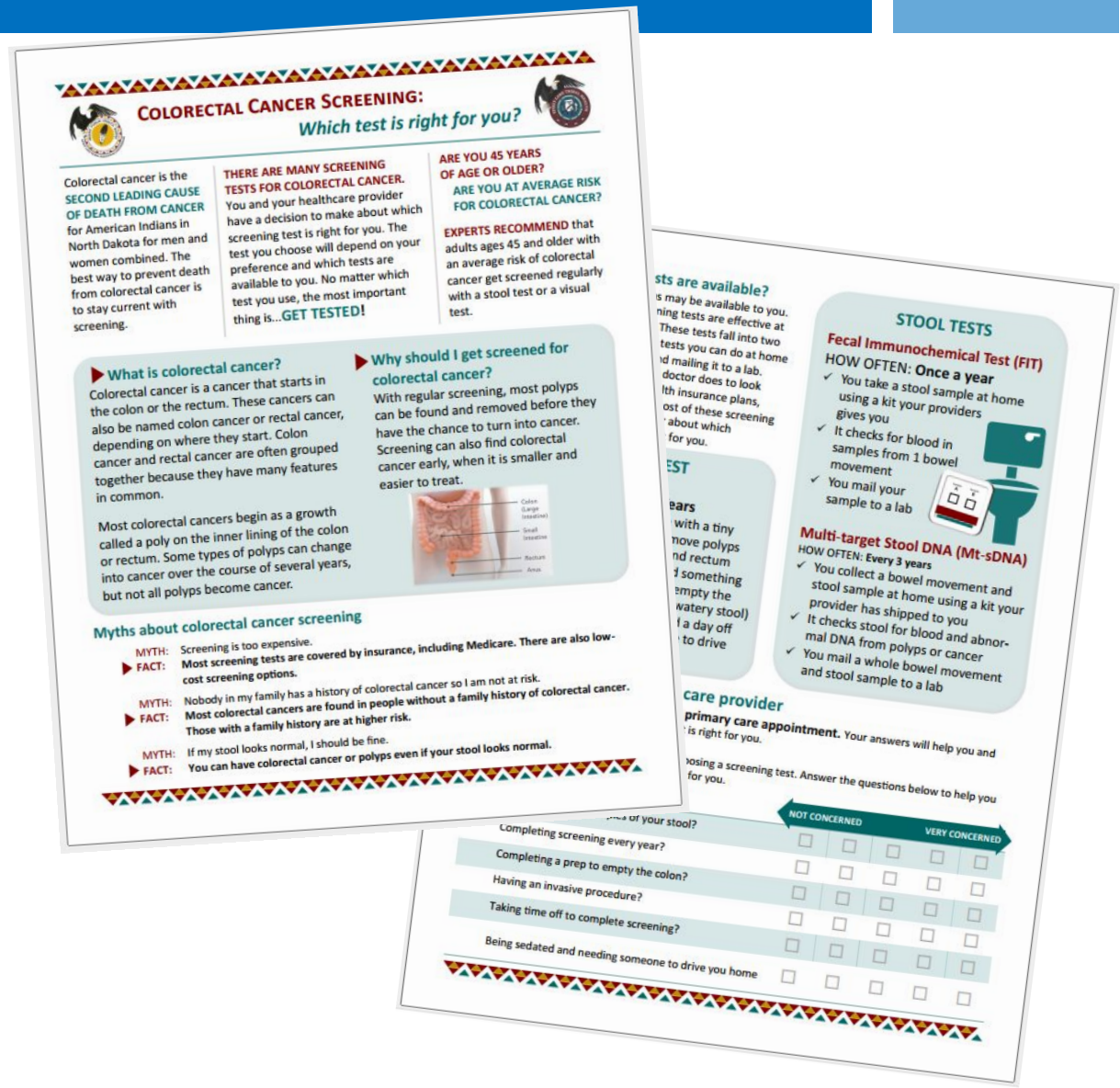
Clinic Data

For Patients seen in General Clinic (01) Only December 2022

Providers	# of Patient's due for CRC screening	# of Patient's Screened for CRC	Total Number of Patient's Ages 45 to 75	% of Patient's Due	% of Patient's Screened
MD 1	76	108	184	41%	59%
MD 2	24	19	43	56%	44%
FNP 1	27	72	99	27%	73%
FNP 2	44	68	112	39%	61%
FNP 3	18	41	59	31%	69%
FNP 4	68	87	155	44%	56%
FNP 5	4	14	18	22%	78%
FNP 6	3	5	8	38%	63%
FNP 7	13	10	23	57%	43%
No PCP	77	49	126	61%	39%
Total	**354**	**473**	**827**	**43%**	**57%**

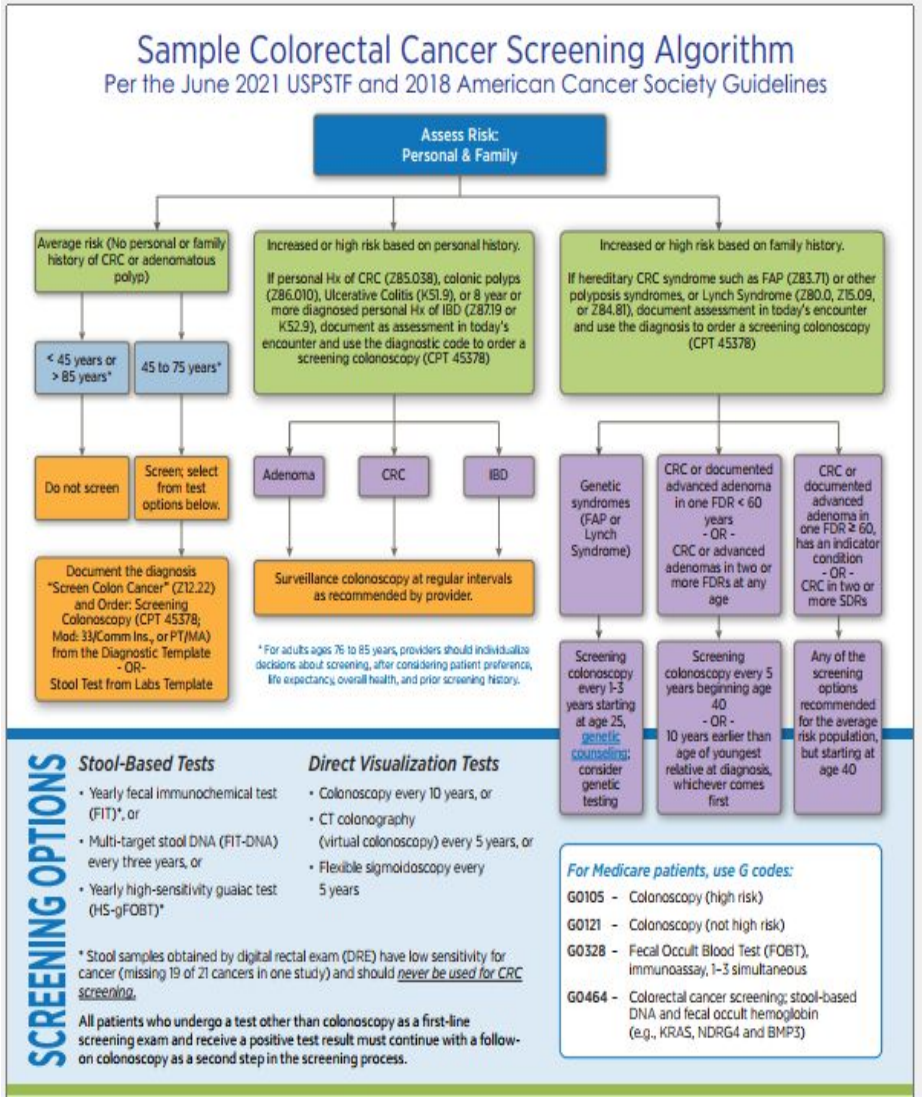
Developing Partnership

- October 2022 – Noted PH had been a partner pre-covid; reached out to re-establish relationship
- December 12, 2022 – First meeting
  - Introduced the ScreeND work
  - PH currently performing community-based services, including IV therapy, wound care; travel to patients' homes across the entire reservation
    - Would like to be involved in patient education and distribution of FIT
  - Need for educational materials specific to community setting
  - Discussed community events such as monthly Elders Day Out
  - Recalled use of incentives for completion of CRC screening in the past



Standing Order

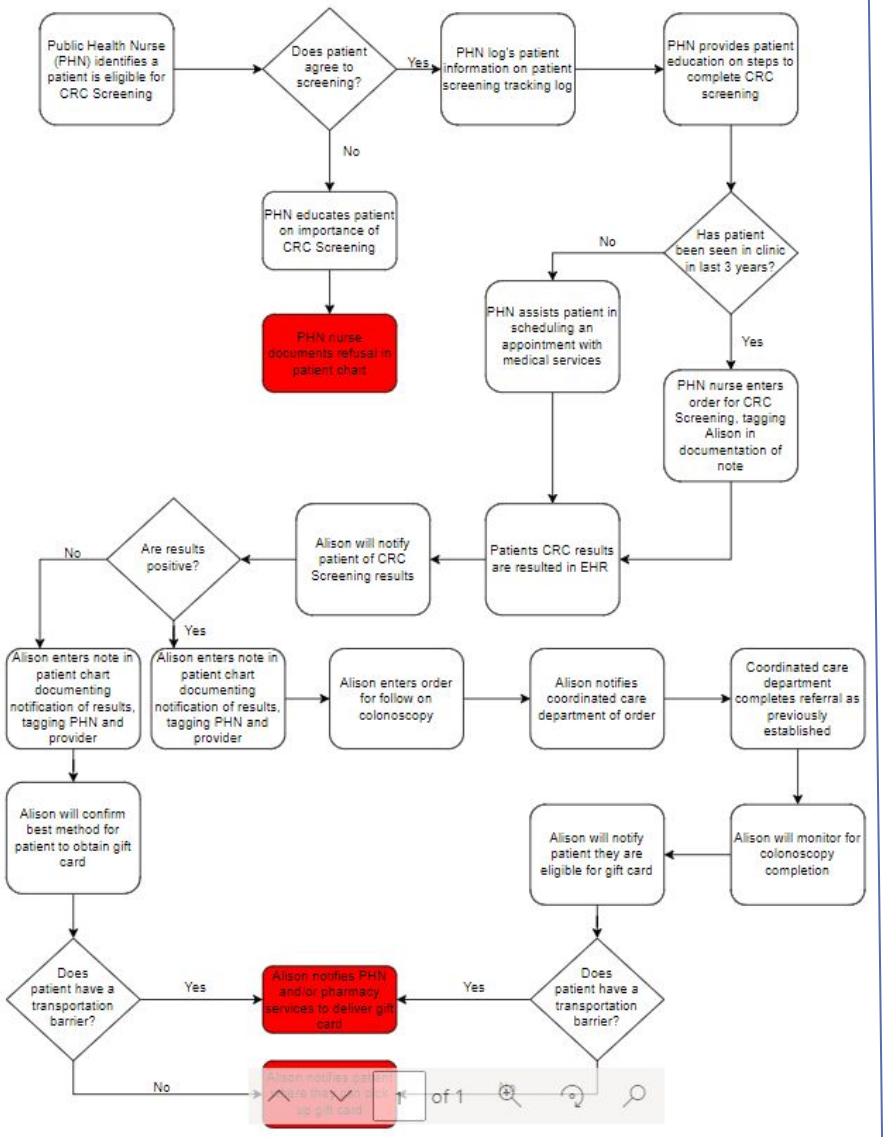
- Identified needs:
  - Clear lines of communication and loop closure
  - Extend standing order to PHNs
  - Training in use of the algorithm – need to assure patients who receive FIT are of average risk
  - Tracking of ordering to resulting needs to be taken care of by non-provider (ScreeND Team Lead – Allison)
- Standing Order
  1. Nurse to determine risk level based on algorithm
  2. Based on findings, nurse may enter an order under the PCP or acting medical director for FIT test or GI consult/colonoscopy on average risk patients based on patient preference and review results when available
  3. If patient is high risk, nurse may enter a referral for a GI consult/colonoscopy under the patient's PCP or acting medical director if the patient has had a medical appointment at Spirit Lake Health Center within the past 3 years
  4. If the patient has not been seen within the past 3 years, they will need to schedule an appointment to establish care



Developing Partnership

- Developed workflow process
- Modified data tracking system
- Approval of incentive

Workflow Process



Checklist

The following are tasks to be completed continuously, as pre planning and/or monthly reminders

- ☐ Public Health Nurses (PHN) will familiarize themselves with adopted standing orders and guidelines for appropriate screening
- ☐ Alison will be responsible for ensuring lab has enough tests on hand
- ☐ PHN will be responsible for collecting fit kits from lab for use/distribution
- ☐ PHN nurses will submit the log of patients who received kits or CRC screening was ordered for to Alison monthly
- ☐ Alison will use combination of note tagging system and submitted log to track incoming results
- ☐ Once results are found, Alison will secure gift card for patient

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- ☐ PHN determines a patient is appropriate for CRC Screening
- ☐ If a patient agree's to screening, PHN will log patient on patient log
- ☐ PHN will educate patient on screening completion process
- ☐ PHN will enter the order for CRC screening following guidelines in standing order
  - If patient has not been seen in clinic in the last three years, PHN will assist patient in scheduling an appointment prior to ordering CRC screening
  - PHN will enter note documenting education and entered order, being sure to tag Alison as well

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- ☐ Alison will notify patients of results
  - Alison will confirm best method for obtaining gift card
  - IF transportation is an issue Alison will notify PHN and/or pharmacy delivery services
- ☐ Alison will enter note in chart, tagging ordering PHN and provider
  - If positive stool test, Alison will place referral for follow on colonoscopy and notify Coordinated Care Services (is this the correct name for department)
  - Coordinated Care Services will complete the referral in same fashion as before

First Joint Ventures

- **Feb 27 – Elders Day Out**
  - Presentation
  - Educational materials and FIT kit distribution on site
- **Developing a process for incentive card distribution**
- **Data sharing – Allison to run report of patients who are seen by PHNs to see who is due for screening**
- **March 14 – CRC Awareness Event**
  - Educational Booths
  - Refreshments
  - Wear BLUE to be entered for door prizes

Contact Info

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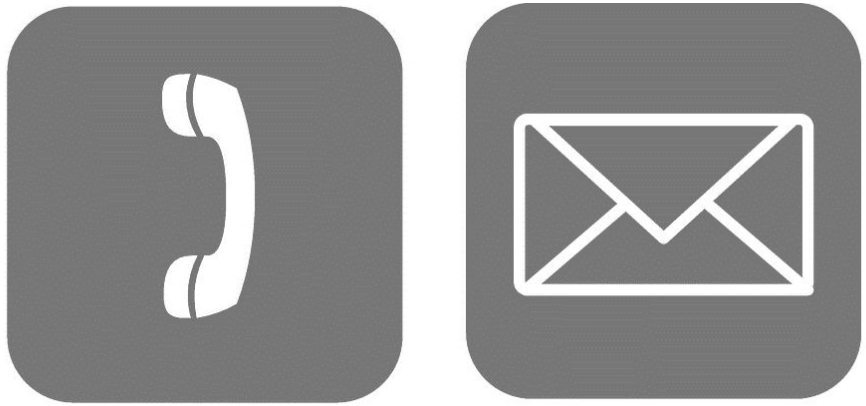

Division of Cancer Prevention and Control

Partnerships at Work

Presenter: Michael Dickey, MPH

South Carolina Department of Health and Environmental Control

Healthy People. Healthy Communities.

Camille and Leath (Cont.)

- Partnership Development 2020-2021
- 1300 BCN Qualifying Residents
- Success - 115 Women Screened & 1500 women received cancer prevention education

Camille and Leath (Cont.)

Partner Involvement

- Current Challenge – change in leadership
- SCDC - provided follow-up diagnostic screenings
- SC Witness Project – provided cancer prevention and screening education
- SC Comp Cancer Program – worked with BCN to update the Cancer Division's screening procedures for the SCDC

Goodwill Industries

- Women's Vocational Program
- Offers education
- Partnership Development 2021-2022
- Veteran, employment, and family support services
- Cancer prevention education and mobile mammography screenings

Goodwill Industries (Cont.)

- BCN cancer prevention education and mobile mammography screenings
- Successes: We have screened around 20 women, although that number may seem low, we value continuation of this partnership that has provided us with a niche way to reach women veterans

SHARE
Sunbelt Human Advancement Resources

- Partnership Development 2021-2022
- Community Action Agency
- Provides an array of services eliminating poverty and empowering low-income families

SHARE (Cont.)
Sunbelt Human Advancement Resources

- 1000+ agencies in National Network

- Successes:
  - 7 Mobile Mammography Events
  - 5 Events at 3 Headstart Locations
  - 2 Events at SHARE Headquarters

- Challenges: Change in SHARE staff

Other Community Partners

work@health®

Training Employers | Promoting Health | Maximizing Performance

Walmart
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Comprehensive Cancer Control
Collaborating to Conquer Cancer

More Community Partners

UNIVERSITY OF SOUTH CAROLINA
Arnold School of Public Health

MUSC
HOLLINGS CANCER CENTER
A National Cancer Institute Designated Cancer Center

AMERICAN CANCER SOCIETY

SOUTH CAROLINA OFFICE OF RURAL HEALTH
Investment. Opportunity. Health.

Gibbs Cancer Center & Research Institute
A Division of Spartanburg Regional Healthcare System

THE JOLA BROWN FOUNDATION

SC ONCOLOGY ASSOCIATES

SOUTH EAST AMERICAN INDIAN COUNCIL

The South Carolina Witness Project
WITNESSING TO SAVE LIVES

Register | Apr. 24, 2:00 p.m. - 3:00 p.m. ET
Register | Apr. 25, 10:00 a.m. - 11:00 a.m. ET
Register | Apr. 26, 3:00 p.m. - 4:00 p.m. ET
Register | Apr. 27, 11:00 a.m. - 12:00 p.m. ET

Call SERIES APRIL 2023

REGISTER TODAY

Register
Tue. May. 23, 2023
3:00 p.m. - 4:30 p.m. ET

Webinar MAY 2023

Register | Jun. 12, 2:00 p.m. - 3:00 p.m. ET
Register | Jun. 13, 10:00 a.m. - 11:00 a.m. ET
Register | Jun. 14, 3:00 p.m. - 4:00 p.m. ET
Register | Jun. 15, 11:00 a.m. - 12:00 p.m. ET

Call SERIES JUNE 2023