

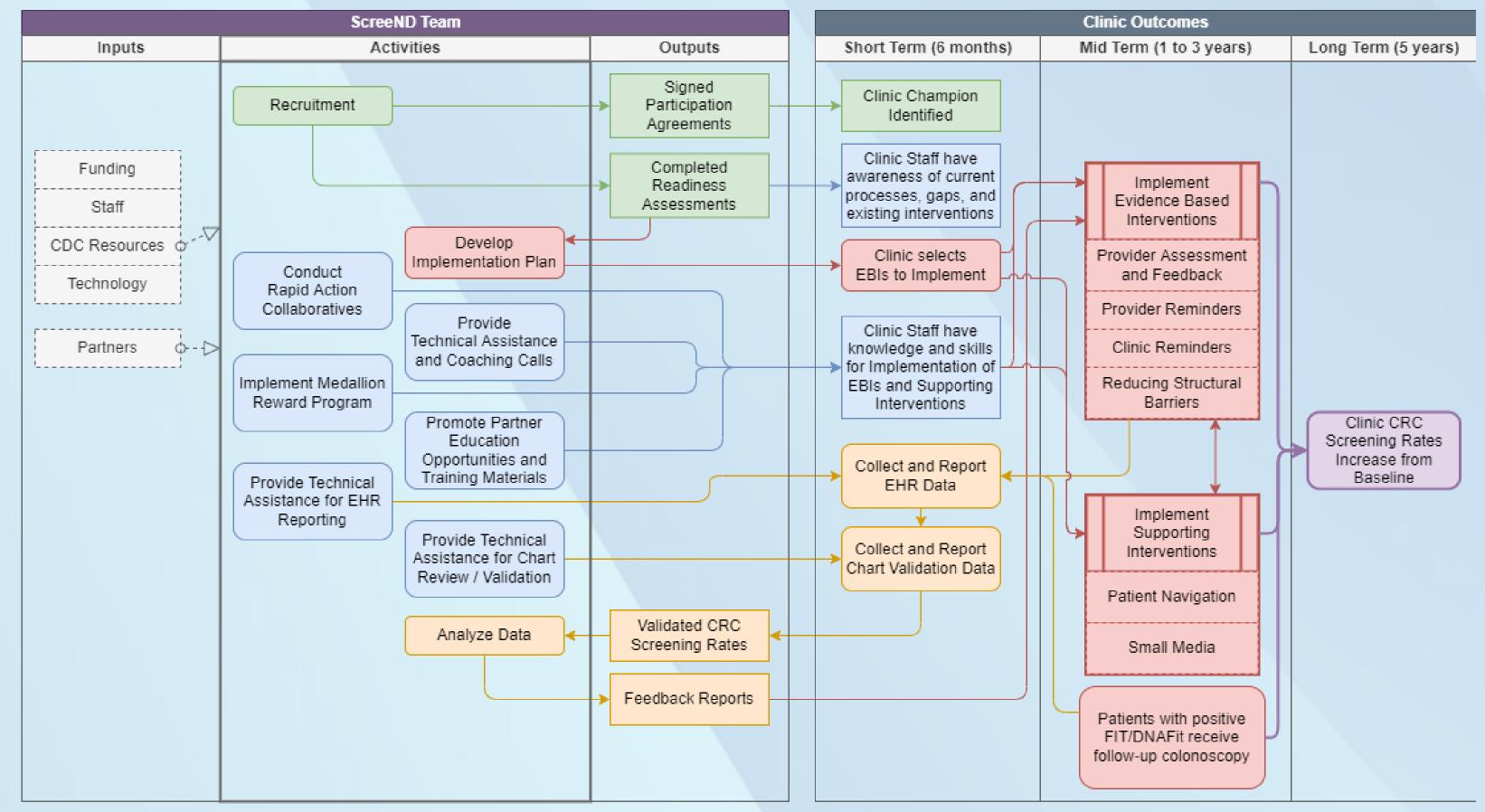
# **Improving Colorectal Cancer Screening Rates in North Dakota**

## Colorectal cancer is the...



### in North Dakota.

Despite strong evidence of their effectiveness, stool tests for CRC screening are underused. Through a grant from the Centers for Disease Control and Prevention, Quality Health Associates of North Dakota (QHA) is partnering with primary care clinics in ND to increase CRC screening rates for rural, frontier and Native American populations. These efforts will work to reduce the incidence and late-stage diagnosis of colorectal cancer, increase the number of lives saved, and potentially impact 6,500 ND residents who have not been screened for CRC.



### **Participants** Cohort 1

Quentin N. Burdick Memorial Spirit Lake Health Center **Standing Rock Service Unit** 

### Cohort 2

First Care Health Center CliniCare Towner County Medical Center **UND** Family Practice

### Cohort 3

South Central Health Clinics Jacobsen Memorial Clinics Southwest Health Care

### Cohort 4

St. Luke's Crosby Clinic Grafton Family Clinic Park River Family Clinic

# Do

ScreeND Clinics implement the following:

#### **Provider Interventions**

- Reminders/recall systems
- Assessment/feedback
- Improved recommendation to patient

#### System Interventions

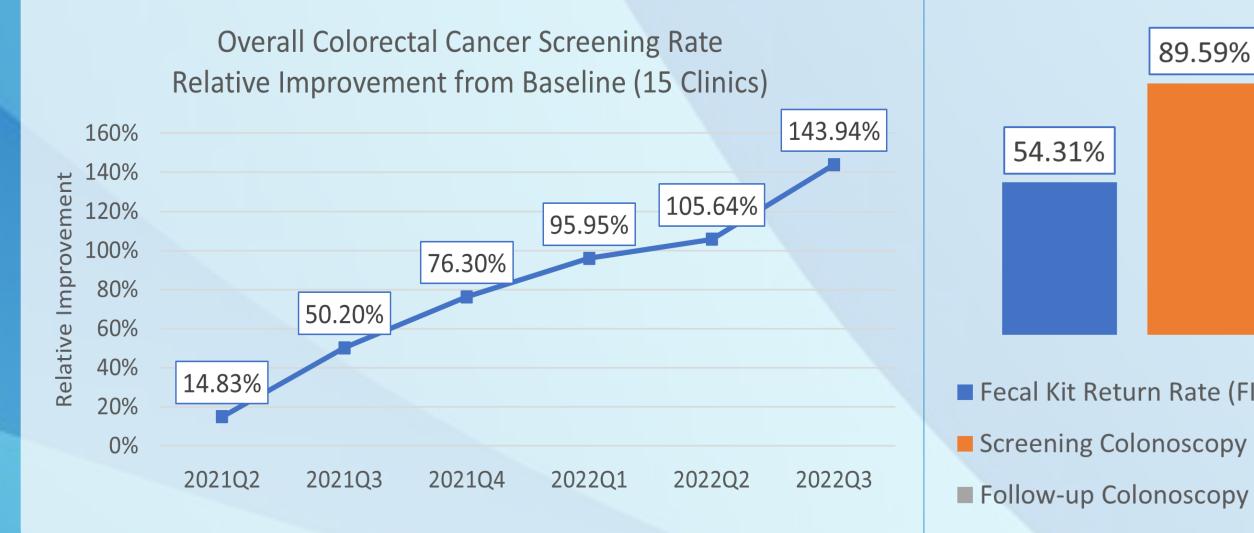
- ✓ Policy development
- Reducing structural barriers
- Measuring practice progress

#### Patient Interventions

- ✓ Client reminders
- Screening test tracking and follow-up
- ✓ Small media
- ✓ Patient navigation

# Plan

# Study



### Acknowledgement

Sincere appreciation to **Exact Sciences** for their tremendous support and collaboration.



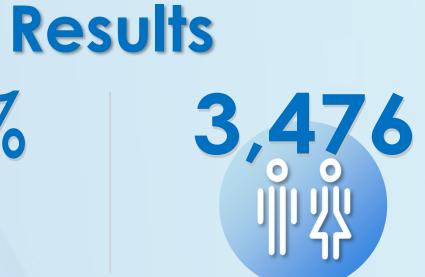
# Quality Health Associates of North Dakota

# Act

- Development of a Rapid Action Collaborative where cohorts could share barriers and develop solutions on specific topics.
- Peer-to-peer education for providers
- Epic users webinar to demonstrate data tools
- Monthly TA calls
- Development of an annual survey and report
- CRC Awareness Month Social Media Toolkit
- External Evaluation Team, meets semi-annually

**Overall CRC screening** rate improvement

16.56%



additional patients with up-to-date CRC screening

# **Our Team**

Judy Beck, MSN, RN Program Director

Nikki Medalen, MSN, BSN Quality Improvement Specialist

> Jonathan Gardner Data Manager

Carolyn Tufte, LPN **Quality Improvement Specialist** 

> Nathan Brintnell Data Analyst

Geneal Roth **Communications Coordinator** 

Fecal Kit Return Rate (FIT/iFOBT/FIT-DNA) Screening Colonoscopy Completion Follow-up Colonoscopy Completion

66.00%