

Quality Health Associates of North Dakota (QHA) is partnering with North Dakota's primary care clinics to increase colorectal cancer (CRC) screening rates for rural, frontier and Native American populations.

Colorectal cancer is the...

MOST DIAGNOSED CANCER

AND

LEADING CAUSE OF

CANCER-RELATED DEATHS

(among cancers that affect both men and women)

in North Dakota.

Early detection saves lives...

28% of eligible adults in North Dakota

are not up to date with CRC screening.

This delay in screening contributes to a late-stage diagnosis rate of

35%



DISPARITIES | RURAL vs. URBAN

In North Dakota there are significant disparities in CRC screening rates between urban residents and rural/frontier county residents.

ND's statewide Behavioral Risk Factor Surveillance System (BRFSS) CRC screening rate is 66.9%. Medicare data from 2018 confirms the average CRC screening rate for people aged 50-75 who reside in rural, frontier and reservation areas of ND is 44%.

QHA will assist participating clinics using the following strategies:



✓ Facilitate completion of a comprehensive readiness assessment



- ✓ Provide individual technical assistance
- ✓ Lead a rapid-action collaborative structure with small groups to target specific needs
- ✓ Conduct site visits and coaching calls to assess progress, identify barriers, and develop mitigation strategies



✓ Guide the development of clinic-specific action plans for implementing at least two evidence-based interventions (EBIs) to address CRC screening



✓ Advise clinic staff in leveraging their electronic health records (EHRs) to collect and report CRC screening program measures



✓ Share resources, tools and materials

ScreeND At A Glance

18

Participating Clinics

3 Cohorts

Over **16.56%**

CRC Screening Rate Improvement

Over **3,476** additional patients with up-to-date CRC screening



MILESTONES PROGRAM

Recognizing your clinic's achievements toward 80% in Every Community

QHA is pleased to offer an exciting new program to recognize your facility's improvement efforts in colorectal cancer screening. As a member of SCREEND, **YOU** get to decide how your facility makes improvement while gaining recognition for your progress. We will provide education, technical assistance and networking opportunities to support these efforts.

COPPER	全	Signed commitment letter Formed multidisciplinary innovation team Completed Clinic Readiness Assessment Completed introductory meeting Submitted Action Plan and set goal for year 1 Submitted baseline data
BRONZE	盘	Data submission is current Initiated two (2) evidence-based interventions as defined in Action Plan Submitted current clinic policy for CRC Screening
SILVER	益	Team members participated in scheduled coaching calls and rapid action collaborative Implemented at least two (2) evidence-based interventions specific to improving CRC screening rates Achieved 1st year goal for improving CRC screening rate Shared SCREEND performance with Clinic Board or Leadership
GOLD	宜	Reviewed and updated Action Plan annually Submitted at least one success story or lesson learned related to the interventions selected Achieved 2nd year goal for improving CRC Screening rate Distributed clinician level data to medical staff
PLATINUM	☆	Achieved 3rd year goal for improving CRC Screening rate Used EHR to fullest potential to sustain EBIs such as flagging for follow-up, tracking screening results, pulling reports, generating and send- ing reminders to both providers and patients

Helpful Tips...

- Small change may yield significant results. In fact, beginning with small steps is the best way to make lasting improvements.
- Evidence-based interventions, such as using informatics within your EHR, developing a tracking system, and pre-visit prep have proven to have maximum impact.
- Don't wait to share your final success with us. We want to acknowledge the small cycles of change your team is working on to achieve the ultimate goal.