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SCREEN for Life WI
Community Health Centers Increasing Colorectal Cancer Screening

Wisconsin's Collaborative Approach to Increase Colorectal Cancer Screening: Where Public Health Meets Primary Care

Allison Antoine & Michelle Corbett
Sarah Francois & Janet Malmon

20th Anniversary Seminar Series
November 19, 2021

School of Medicine and Public Health
UNIVERSITY OF WISCONSIN-MADISON

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Funding Statement

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The Team

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Michelle Corbett, MPH CHES®, Evaluator

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Noelle LoConte, MD, Principal Investigator

We are also very grateful for the support from numerous undergrad & graduate interns and student workers: Celena Ramsey, Callie Dufay, Katie Setum, Katherine Carpenter, Enas Alwedyan, Lisa Parlich, Kelly Landry, Danielle Washington & Kyla Quigley

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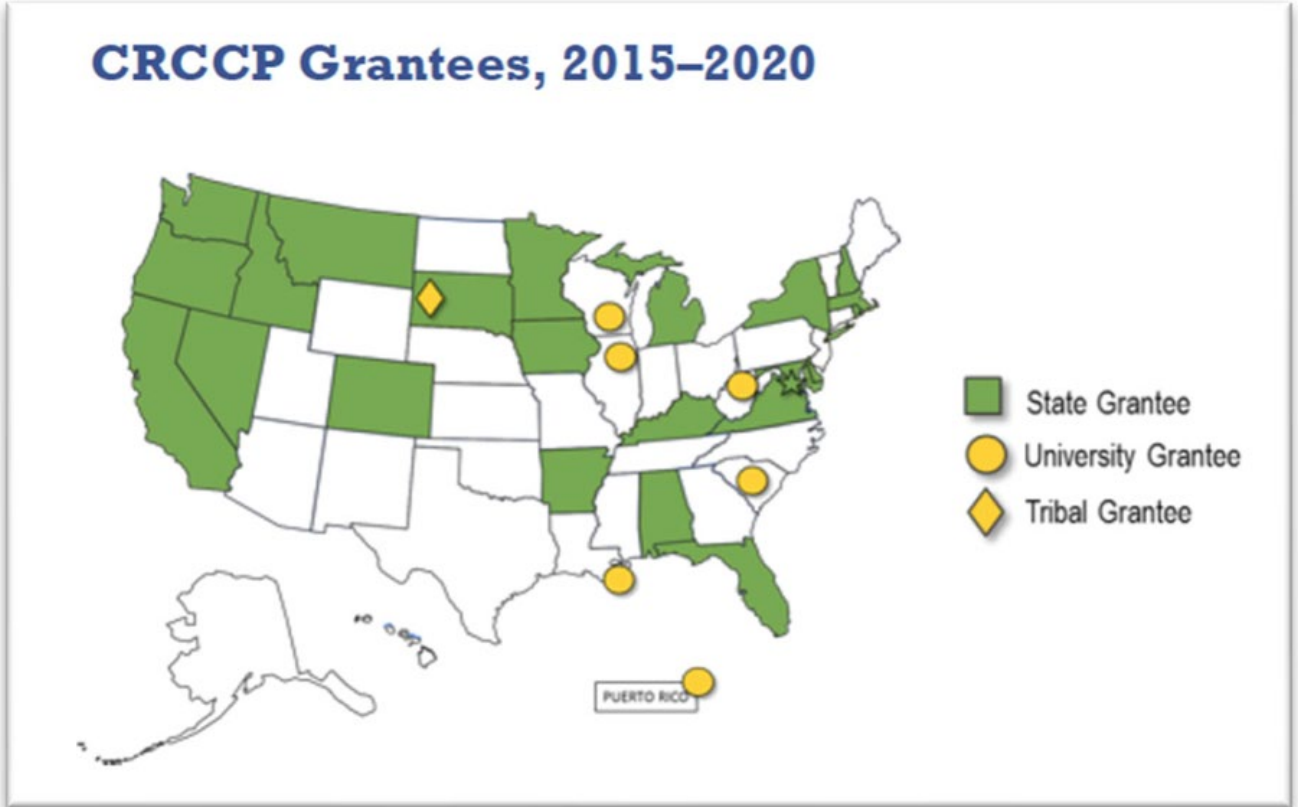
Project Framework

- CDC funded, 2015-2020
- One of 30 grantees (one of 6 university grantees) funded
- Overarching goal: increase colorectal cancer screening among medically underserved patient populations across the country
- Designed to bring together public health and clinical primary care to implement evidence-based interventions to support cancer screenings



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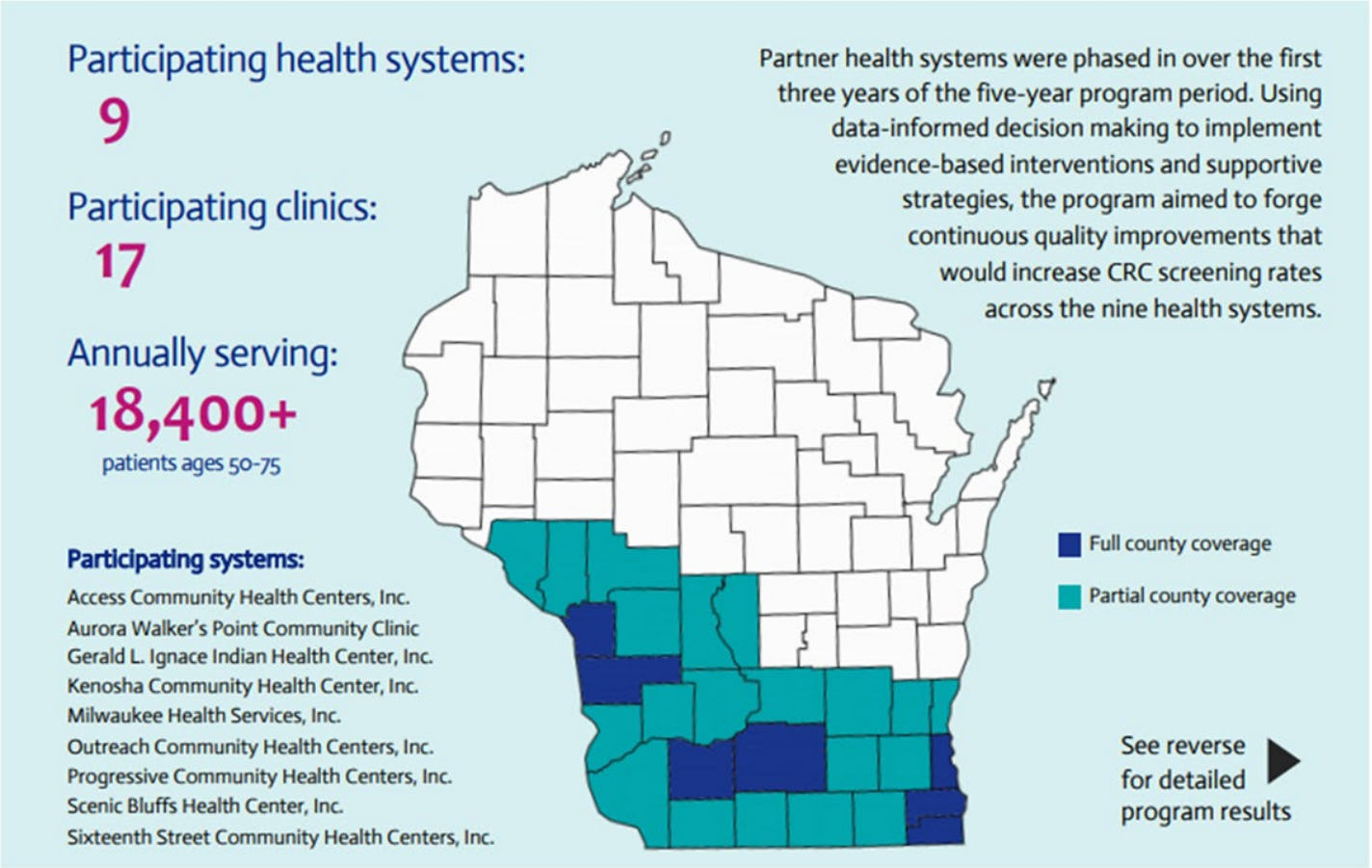
Wisconsin's Colorectal Cancer Control Program

2015–2020



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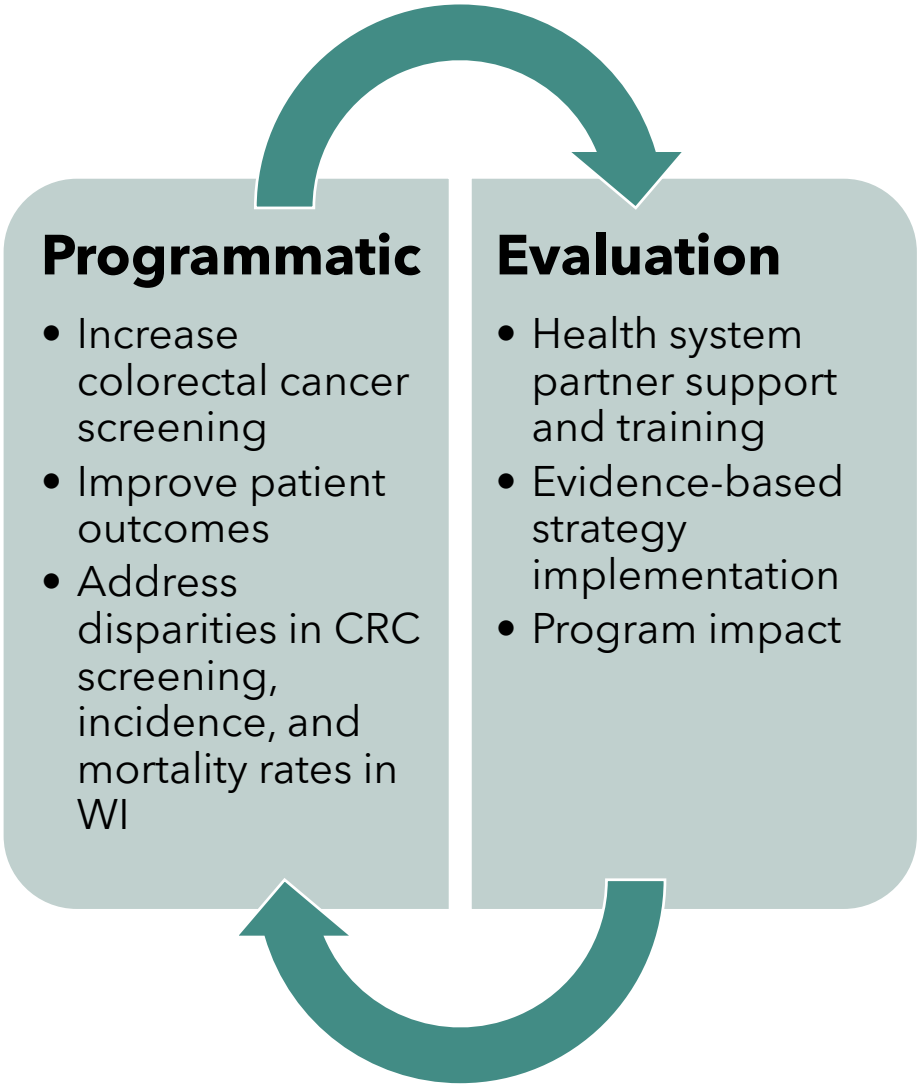
Project Goals



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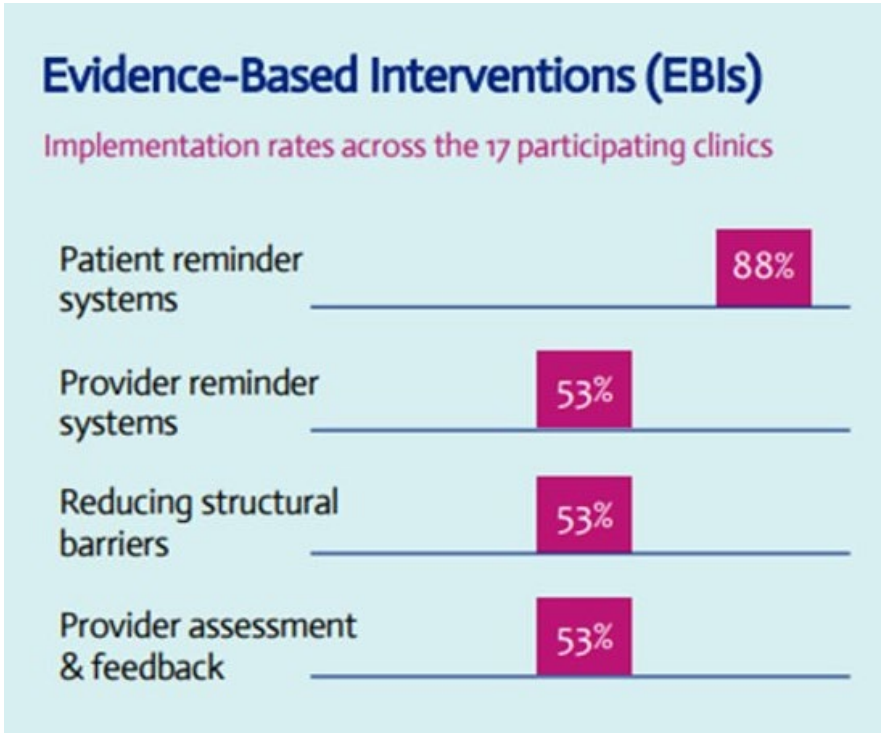
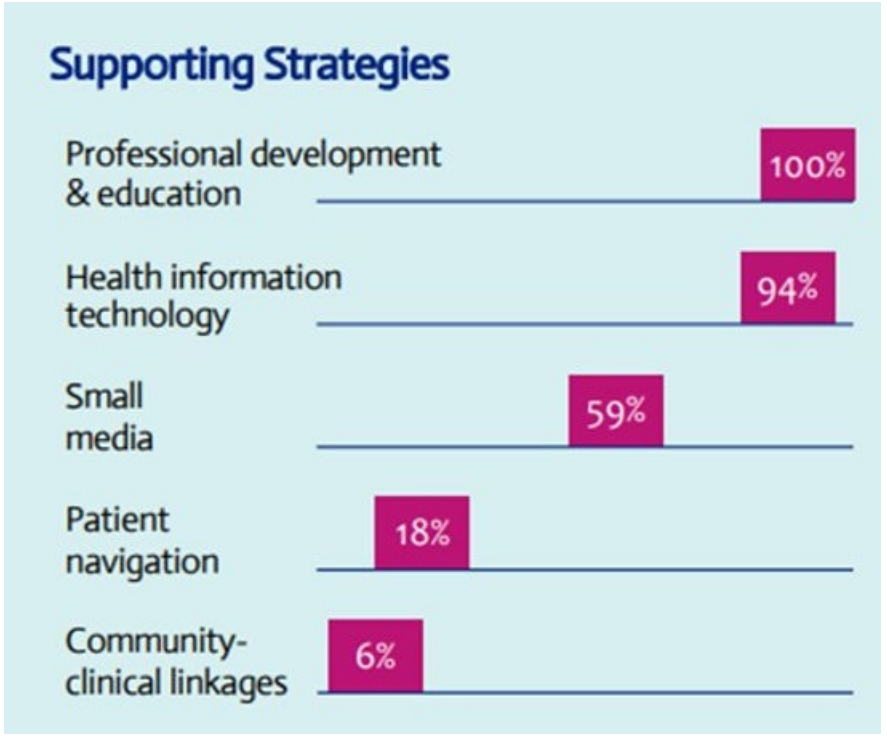
Project Coordination & Partner Support

Intervention Implementation





Partner Perspectives

Progressive℠ Community Health Centers

Sarah Francois

Director of Fund Development & Marketing

Outreach COMMUNITY HEALTH CENTERS

Janet Malmon

Director of Quality

CRC Team

- David Goines
  Community Health Worker
- Sarah François
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- Tracy Blohm
  Medical Records
- Jay Schubring
  Clinical Data Analyst
- Dr. Allison Kos
  Chief Medical Officer
- Amanda Parrell Kaczmarek
  Program Manager

CRC Screening Project

Success…a decade in the making!

Progressive℠ Community Health Centers

About Us

- 3 clinic locations
  - 2 primary care
  - 1 urgent care only
- 14,000 patients annually
- 81% African American
- 93% low-income
- 25% age 50+
- 56% Medicaid

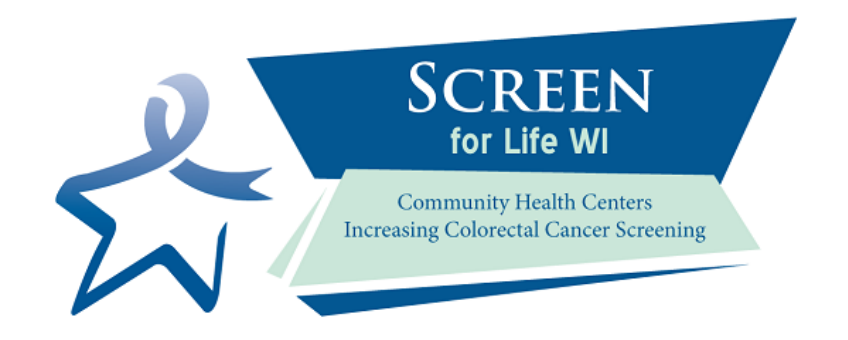
Progressive℠ Community Health Centers

Our CRC Journey

- 2010
  - Sponsored by: CUPH/Milwaukee Regional Cancer Control Network
- 2014-2016
  - Sponsored by: American Cancer Society/Walgreens
- 2015-2020
  - Sponsored By: Wisconsin Colorectal Cancer Control Program/CDC
- 2021-2022
  - Sponsored by: American Cancer Society

Progressive℠ Community Health Centers

Screen for Life Project



- Project began in 2015
- Started interventions and data tracking in 2016
  - Starting screening rate: 46%
- Interim activities
  - TA support
  - Peer learning sessions
  - Patient/provider surveys
- Project concluded in 2020
  - Ending screening rate: 63%

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Evidence Based Interventions

- Strategies implemented
  - Updated clinical guidelines and procedures
  - Staff training
  - CHW engagement in patient reminders and navigation
  - Data analysis and quarterly chart scrubs
  - Incentives
  - Friendly competition

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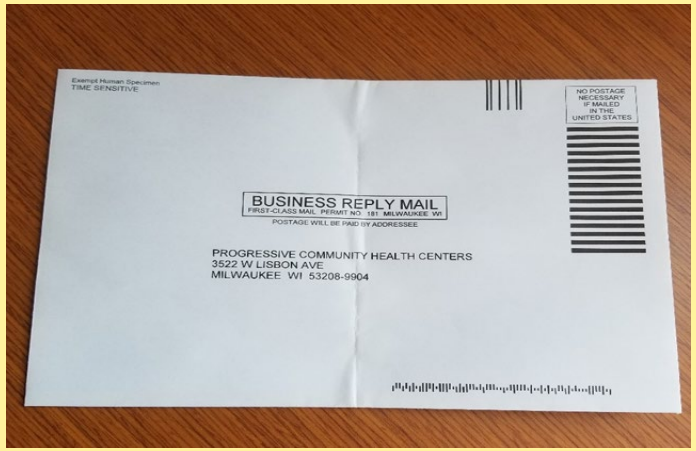
Patient Targeted Strategies



- Patient Reminders
  - Verbal reminders from providers
  - Telephonic reminders
  - Referral letters
  - Poop pins
  - Text messages
- Patient Navigation
  - CHW follow-up for patients who have not completed screening
- Reducing Barriers
  - FIT kit mailers

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Challenges

- Covid-19
- Staffing transitions and shifting capacity
- Human nature is out of our control
  - Impossible to achieve 100% screening
- EHR data is only a good as what the system supports
  - Cologuard

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Successes

- Re-engaged patients into preventative care
  - Current screening rate: 64%
- Replication of model to other QI projects
  - Lung cancer screening
  - Breast cancer screening
  - Cervical cancer screening
- New innovations
  - Text message reminders

Progressive℠ Community Health Centers

Questions?

Sarah Francois

Director of Fund Development & Marketing

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Progressive℠ Community Health Centers

CRC Screening at Outreach

CUPH Seminar Series, November 19, 2021

Janet Malmon, MPH, MBA
OCHC Director of Quality

Outreach
COMMUNITY HEALTH CENTERS

Outline

- Overview of OCHC
- Overview of CRC Project
- Successes & Challenges
- Current State of CRC Screening
- Benefits of Academic Partnership

Outreach
COMMUNITY HEALTH CENTERS

Overview of OCHC

- Established in 1982 as Healthcare for the Homeless
  - Became Outreach CHC in 2011
- Two locations: 210 W. and 711 W. Capitol, Milwaukee
- Serve close to 8,000 each year*
  - 71% African American
  - 91% below 200% FPL
  - 34% uninsured
- Primary care, behavioral health, case management, homeless programs

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* Based on 3-year average

CRC Project

- Purpose: Learn new approaches to increase CRC screening rates from population health experts.
- Interventions:
  - Patient reminders
  - Reducing structural barriers
  - Small media
  - Health information technology
  - Professional development
  - Provider assessment & feedback

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CRC Project

- Accomplishments:
  - Increased rates from 11% in 2015 to 32% in 2019
    - Provider champion rate: 46%
  - Established policy, workflows
  - Used health IT to identify workflow issues
  - Learned how to use small media for health promotion
  - Expanded use of iFOBTs
  - Began giving feedback to providers

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CRC Project

- Challenges:
  - Staff capacity, particularly for reminder calls
  - Staff turnover
  - Staff attitudes
  - Changes at US Post Office
    - Interfered with return of iFOBT kits

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CRC Screening: Today

- Rates rising again, following pandemic
  - Estimated rate 35%
- All new providers receive CRC training
- Continue annual CRC promotions
- Providers get feedback for all quality metrics
- Created Population Health Specialist position to assist with patient reminders

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Partnership Benefits

- Expertise in population health
- Access to tools, training, evidenced-based interventions
- Kept us focused and accountable!
- Collaborative effort, tailored to OCHC
- Learned from other CHCs
- Impact: Long-lasting
  - We have a play-book for population health projects

Outreach
COMMUNITY HEALTH CENTERS

Conclusion

- Thank you to:
  - Allison Antoine, CHES
  - Michelle Corbett, MPH, CHES
  - Carrie Stehman, MA
  - Center for Urban Population Health
  - University of Wisconsin
  - Couldn’t have done it without you!

- Questions?

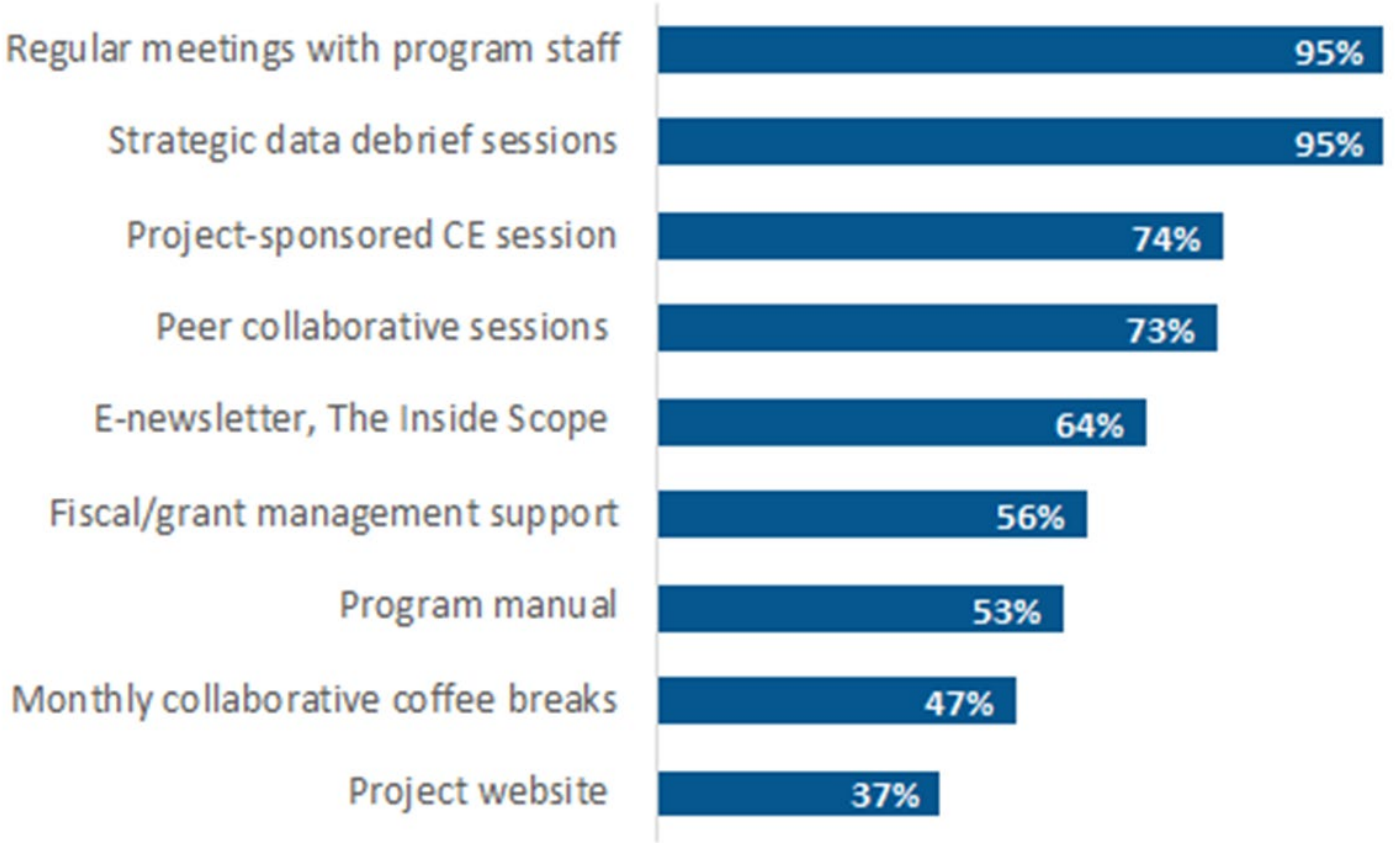
Outreach
COMMUNITY HEALTH CENTERS

Select Performance Measure & Evaluation Results

- Clinic Environmental Assessments
- CDC Annual Clinic Data
- Clinic Implementation & Annual Workplans
- Partner Meeting Notes
- Quarterly Implementation Logs
- Annual Provider/Staff Surveys
- Annual Patient Surveys
- Peer Collaborative Partner Presentations
- Peer Collaborative Participant Surveys
- Mid-Project Partner Interviews
- Project-End Partner Interviews
- Project-End Partner Surveys
- UDS National Grantee Data

Health System Partner Support & Training:

Usefulness/ Helpfulness of Project Coordination & Partner Support



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Health System Partner Support & Training:
Peer Learning Collaborative

3.6 out of **4**

Average Participant Overall Rating
of program-led sessions

4.5 out of **5**

Average Participant Level of Agreement with statement
"I have learned from others' successes and challenges in implementing EBIs."
(5 = Strongly Agree)

"I think that the trainings that we've gotten are helpful and useful...it's like your meeting other partners that share their information and whatever is not helpful for us might be helpful for them, or whatever is not working for us, might help them. And just meeting new people, because if I have questions, I can feel free to call someone from [another FQHC]."

"The peer learning opportunities were good and positive, and it wasn't always about CRC. It was about program sustainability or PDSAs or communication with your patients. And all of those are good pieces to the program."

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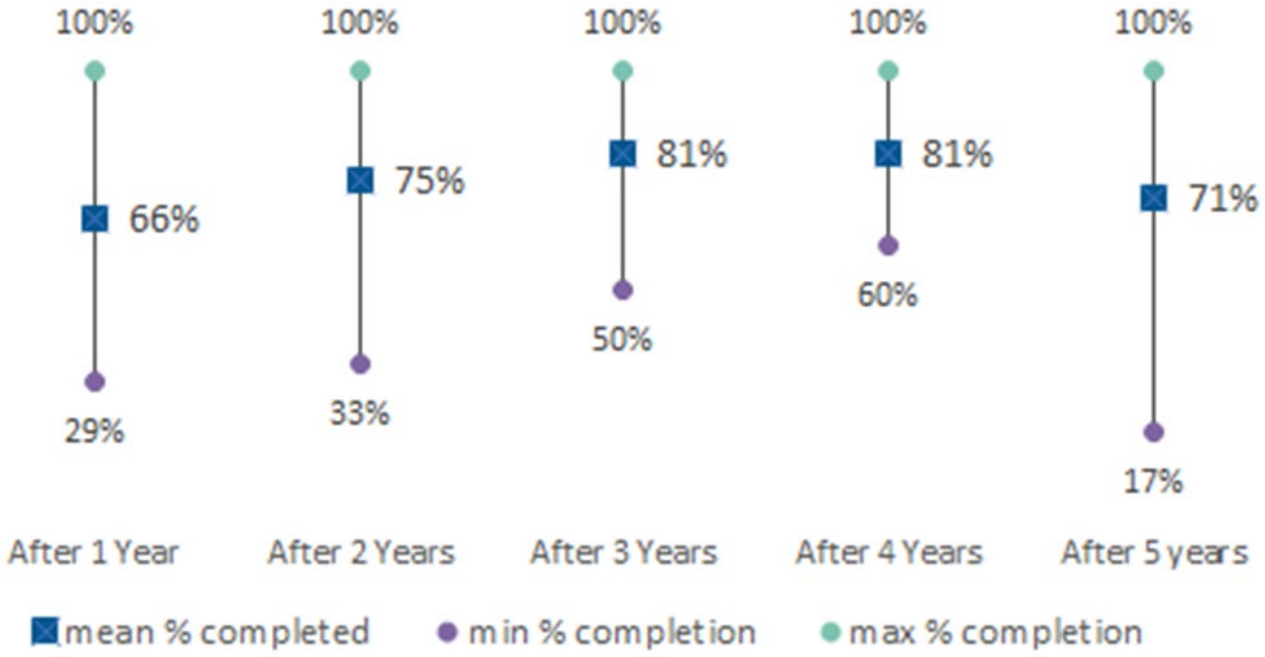
Health System Partner Support & Training:

Annual Clinic Workplan Objectives Met



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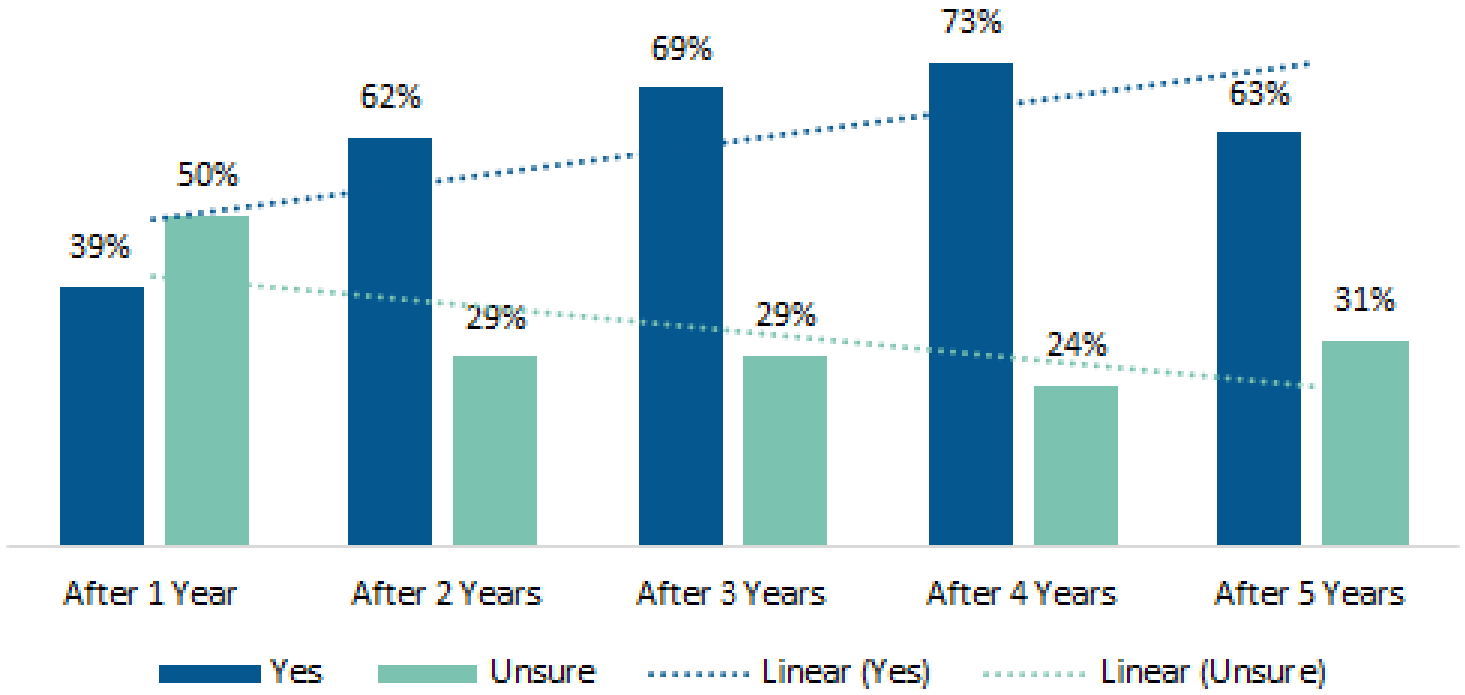
Evidence-Based Intervention Implementation:

Provider/Staff Awareness of Screening Policies and National Guidelines



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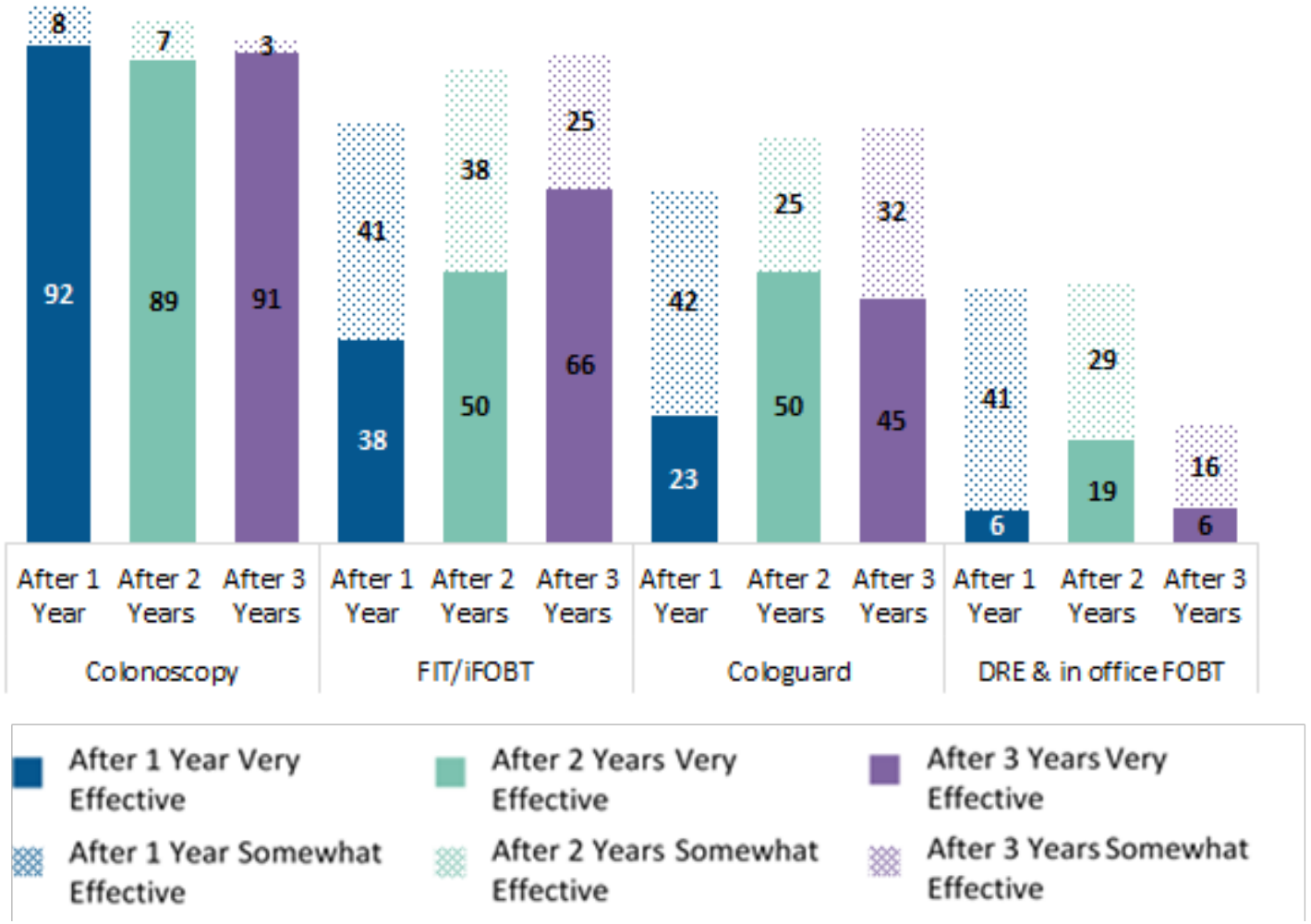
Evidence-Based Intervention Implementation:

Provider Rating of Screening Modality Effectiveness



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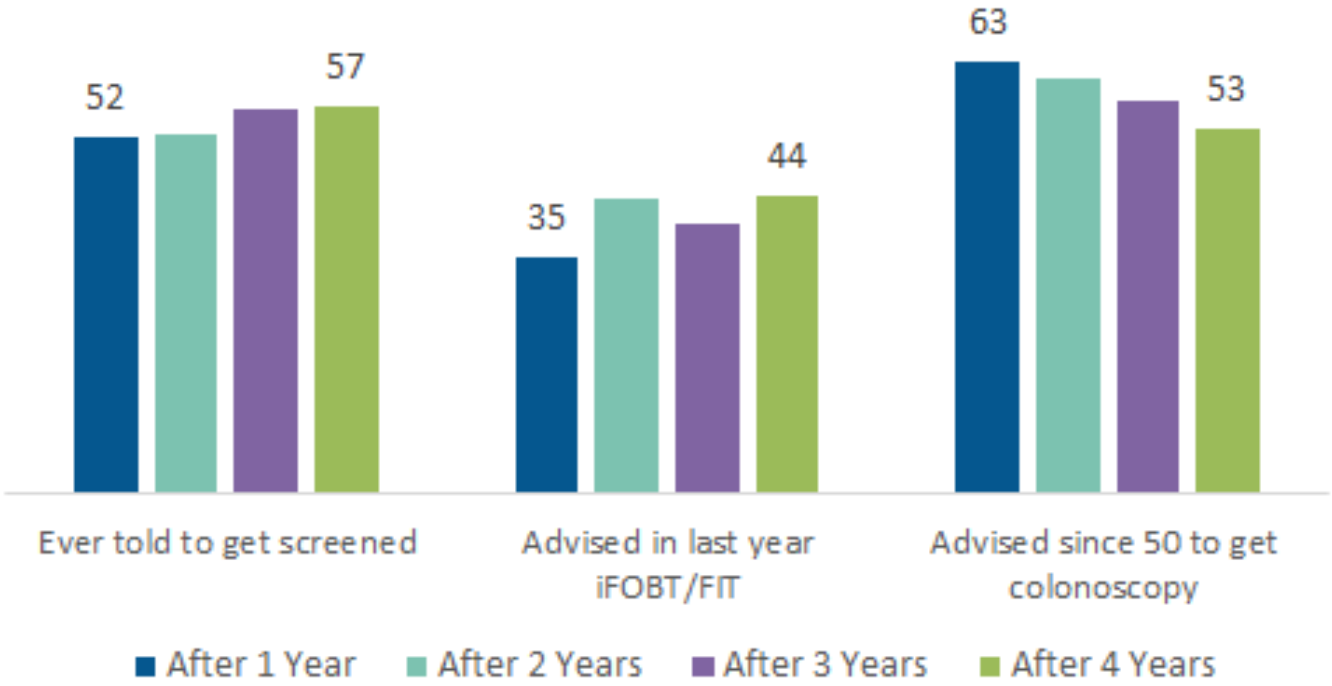
Evidence-Based Intervention Implementation:
Patient-Reported Screening Recommendations



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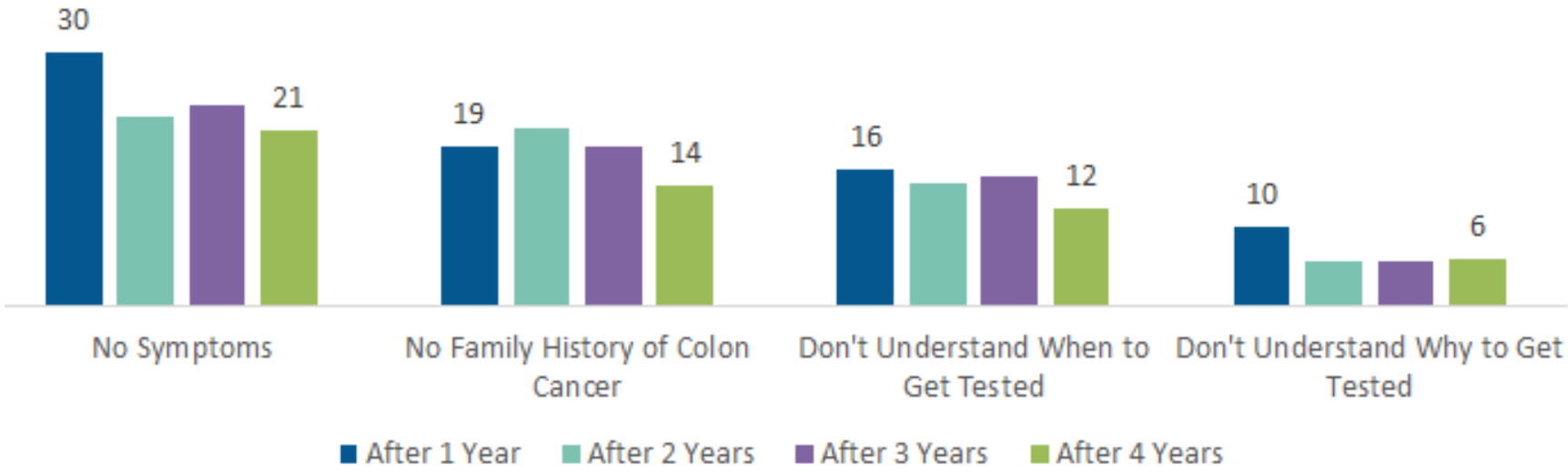
Evidence-Based Intervention Implementation:

Patient-Reported Barriers to Screening



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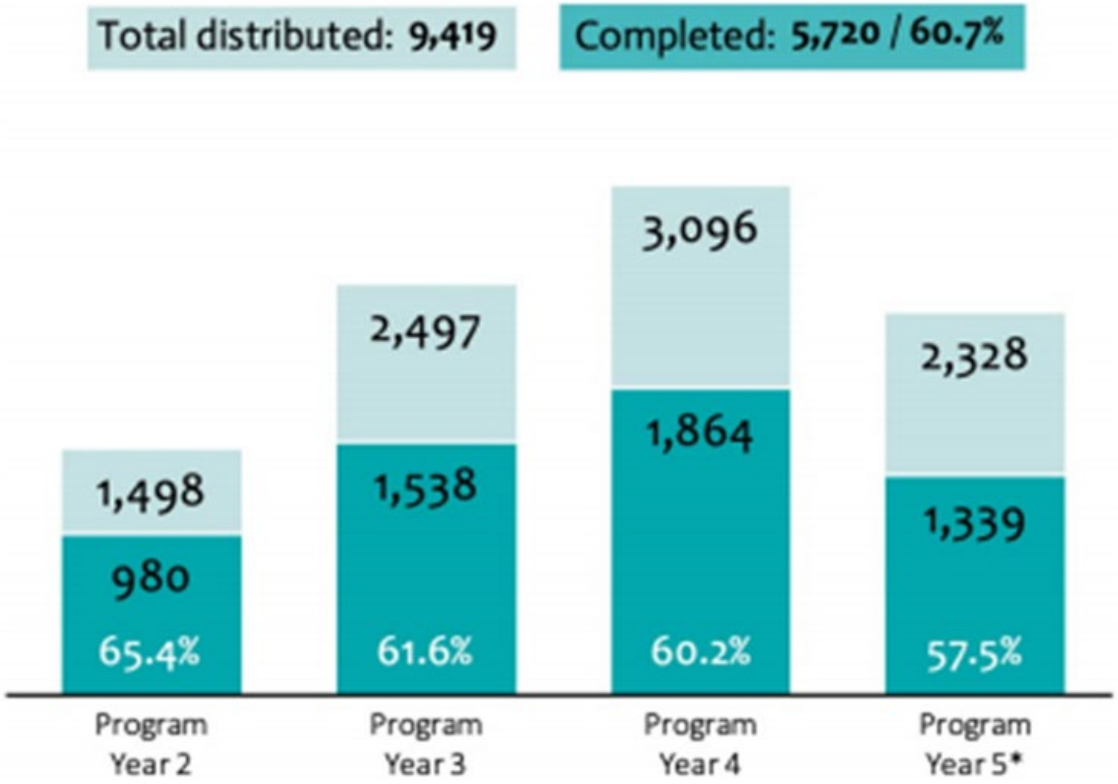
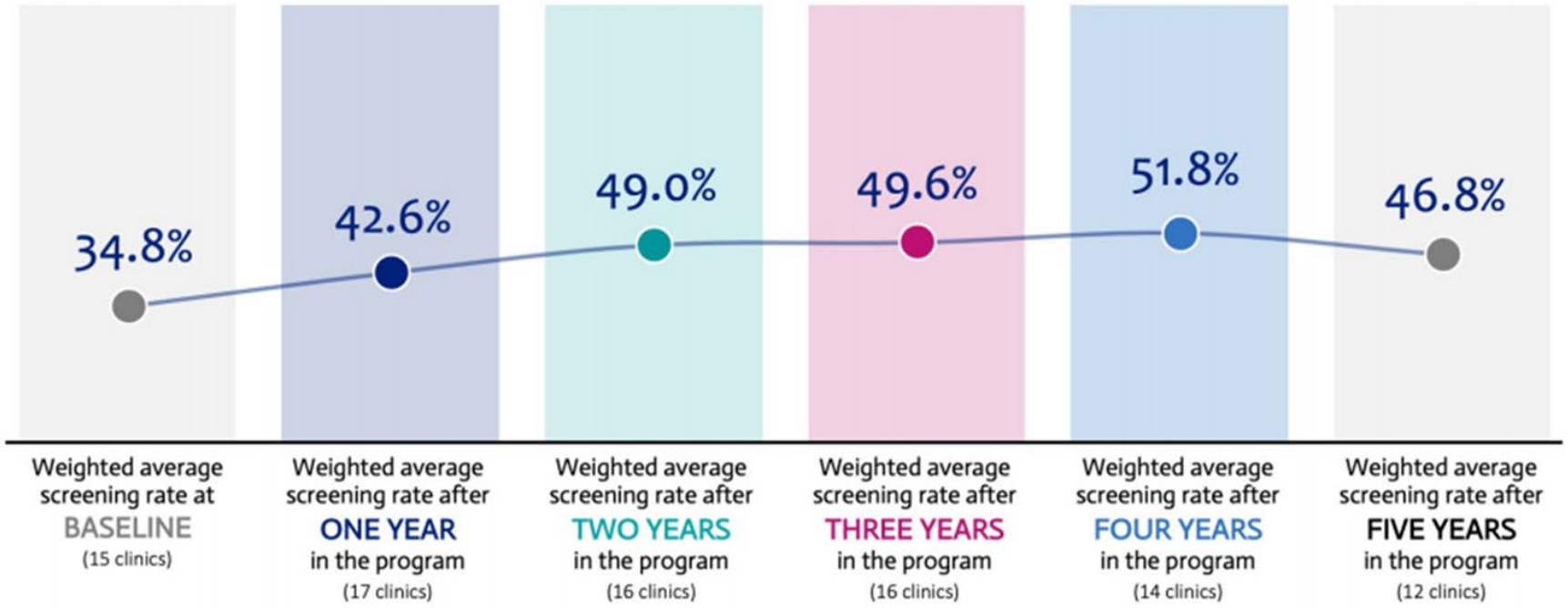
Program Impact:
At-Home Test* Distribution & Completion



*COVID-19 impacts began

*FIT, iFOBT, Stool-DNA

Program Impact: Screening Rates



Primary care services were dramatically impacted due to the COVID-19 pandemic beginning in March 2020 (Program Year 5).

Select Recommendations

- Organizational Buy-In
  - Help partners weigh benefits and burdens of participation
  - Review of project commitments on a regular basis
  - Obtain signed understanding of annual deliverables

"I think we had good buy-in. We're always working on several projects, and so, it might be kind of hard to disentangle one from the other. But from leadership, they were supportive for sure."

Select Recommendations

- Staff Training & Onboarding
  - Have a formal policy that can be referenced
  - Intentionally onboard new staff to ensure understanding

"Educating and training staff was really paramount because staff really had no idea about this. What the measure entailed, how they were supposed to implement it. So initially, there was a lot of pushback. But now over the years with our continuous education and training, we have better buy-in. It's still a work in progress, but we have come a long way."

Select Recommendations

- Project Staffing & Turnover
  - Strategize how funds can be leveraged
  - Recruit a clinic CRC team with broad representation
  - Empower each member of the clinic CRC team

"It's just everybody wants us to do things, and if you don't have the staff to do it, you're not going to get it done."

Select Recommendations

- HIT & Data
  - Budget time and money to optimize EHR
  - Include detailed review of data availability/accessibility during assessment phase

"Our EHR has always been the biggest barrier with everything we've done along the way. [J]ust being able to get the true accurate data into having consistent reminders, it just looks very funny in our system. It just takes up a lot of time."

Select Recommendations

- EBI Selection & Implementation Planning
  - Encourage implementing no more than two EBI at a time
  - Provide examples and encourage creativity
  - Take HIT and data into consideration

"They provided us with good examples of interventions and how we could apply them to our health center. We had a lot to choose from, and some of them turned out to the successful for us."

Select Recommendations

- Stakeholder Engagement
  - Identify and engage local, state, and national stakeholders from the beginning

"I think it would have been cool to partner with one of our critical access hospitals to be able to have a stronger referral link for patients that need a colonoscopy."

Select Recommendations

- Helpful Resources
  - Offer regularly and in a variety of ways
  - Partner with credible experts

"Those peer learning opportunities were great. The Lean Training…through UWM was very useful. So overall, I enjoyed working with your team."

Select Recommendations

- Length of Project
  - Use a tiered approach that provides the right level of technical assistance and support to each partner knowing the stage of readiness and capacity to do the required work will vary.

"I think it's been too long of a grant. You can survive some uncomfortableness for a while. Five years has gotten to be like I want to be able to see the end."

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Thank you!

Allison, Michelle, Sarah & Janet