Dissemination of the Cancer Screening Transformation Project

PURPOSE
To disseminate and bring to scale successful colorectal and cervical cancer screening strategies identified and tested in NACHC’s 2017–2018 Cancer Screening Transformation Project.

BACKGROUND
The United States Preventive Services Task Force recommends regular screening for colorectal and cervical cancers. Despite these recommendations, the federal Bureau of Primary Health Care reports that in 2017 only 42 percent of health center patients received appropriate screening for colorectal cancer and 56 percent of women were screened for cervical cancer. For both types of cancers, health centers nationally are below Healthy People 2020 screening targets.

The first year of NACHC’s Cancer Screening Transformation Project saw promising results. On average across 8 participating health centers, there was a 13 percent increase in colorectal cancer screening rates and a 7 percent increase in cervical cancer screening. In addition, participating health centers achieved improvements in other quality of care measures—diabetes control (23%), depression screening (13%), hypertension control (5%), and body mass index (BMI) screening (3%). This suggests that health centers that implement cancer screening interventions as part of a larger transformation strategy can see improvements not only in cancer screening but also across other indicators.

GOAL
Create a technical package based on actionable findings from NACHC’s 2017–2018 Cancer Screening Transformation Project to scale and spread a transformation approach to cancer screening in health centers.

POPULATION OF FOCUS
- Female patients ages 23 to 64
- Patients ages 50 to 75

APPROACH
Advance and scale a cancer screening transformation approach developed through NACHC’s 2017-2018 Cancer Screening Transformation Project to improve colorectal and cervical cancer screening in health centers:

- Review and summarize the evidence-base and existing toolkits, guidelines, and best practices for inclusion in a technical package
- Conduct and publish case studies from a subset of the health centers that participated in NACHC’s 2017-2018 Cancer Screening Transformation Project to describe implementation and quality improvement activities and highlight lessons learned
- Disseminate the technical package and case studies to health centers nationally

MEASURES
- Female patients 23 through 64 years of age who were screened for cervical cancer
- Patients 50 through 75 years of age who had appropriate screening for colorectal cancer
- Patients 18 through 75 years of age with Hemoglobin A1c greater than 9% (uncontrolled)
- Patients 12 years of age and older who were (1) screened for depression with a standardized tool and, if screening was positive, (2) had a follow-up plan documented
- Patients 18 through 85 years of age diagnosed with hypertension whose last blood pressure was less than 140/90
- Patients 18 years of age and older with (1) BMI documented and (2) follow-up plan documented if BMI is outside normal parameters

FUNDING | CDC
TYPE OF INTERVENTION
Systems Transformation

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- Implement the technical package through Elevate, NACHC’s national learning forum designed to help a cohort of over 100 health centers across 19 states
- Utilize NACHC’s online transformation platform to support health center self-assessment and competency-based learning in systems transformation as part of the technical package implementation
- Design an evaluation strategy that includes assessment of the usability of the technical package among the centers in the Elevate cohort
- Collect and summarize colorectal and cancer screening measure data for centers in the Elevate cohort

CDC
- Project Officer. Financial and technical support.

NACHC
- Establish national leadership role around cancer screening for PCAs and health centers. Project design, support, and management. QI strategies for cancer screening as part of system transformation.

PCA
- Coordinate a group of health centers to engage in Elevate. Receive health center assessment data and leverage Elevate resources to advance state/network transformation efforts.

Health Center
- Participate in Elevate, including monthly learning forum calls and topic-focused series. Complete online Elevate assessment and report annual UDS data.

ATSU
- Design 3-year evaluation plan; assess “usability” of learning resources; analyze provider and patient experience data; manage IRB.

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