

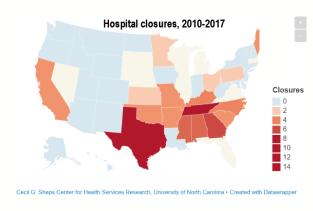
The Screening Process: Ensuring Patient Access Among Vulnerable Populations



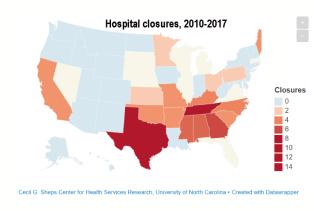




No conflicts of interest to disclose. The conclusions in this presentation are those of the presenter and do not represent of official position of the Centers for Disease Control and Prevention.



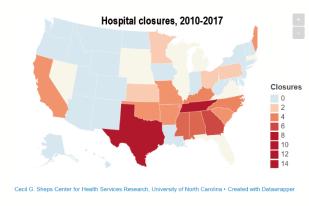
No access to services in their community



No access to services in their community



Can't afford care



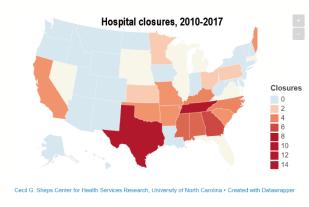
No access to services in their community



Can't afford care



More likely to have other health issues



No access to services in their community



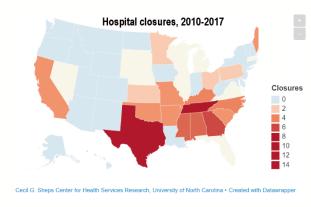
Can't afford care



More likely to have other health issues



Mistrust of the health care system



No access to services in their community



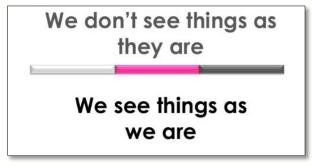
Can't afford care



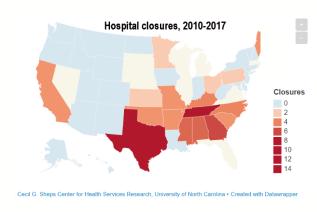
More likely to have other health issues



health care system



Unconscious bias



No access to services in their community



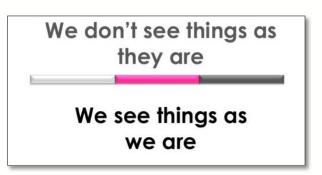
Can't afford care



More likely to have other health issues



Mistrust of the health care system



Unconscious bias



Fear or fatalistic beliefs

Identify the Problem



Assess the Issues

- Find out the concerns
- Legitimize their concerns
- Recognize that science may not have all the answers
- Be flexible
- LISTEN
- COMMUNICATE



Understanding Patient Challenges

- What screenings do I need?
 - Awareness and education
 - Understanding the screening process
- How do I pay for the screening?
 - Insurance coverage
 - Free and subsidized services
- Where do I go?
 - What health care services are available in their community?
 - Do they have transportation to get to services?



Understanding Provider Challenges

- Technology not available
- Patient does not have insurance
- Patient doesn't follow through
- Takes too long to have conversations about risk and benefits



So What Can We Do?



Use Evidence-Based Interventions

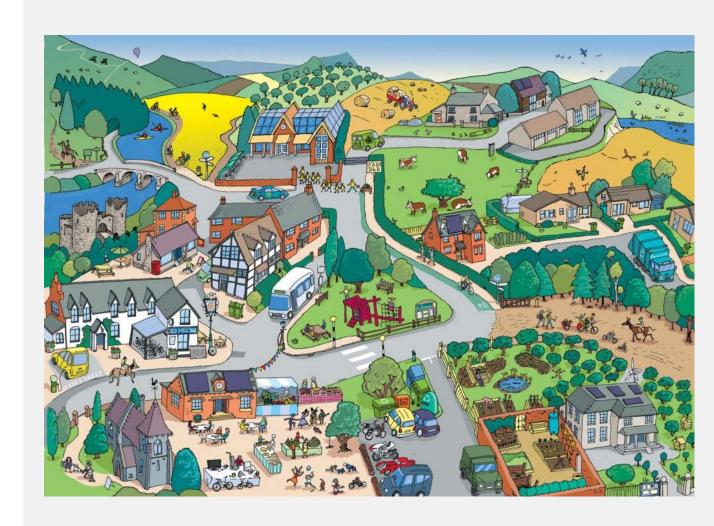
The Guide to Community Preventive Services (The Community Guide)

- Evidence-based interventions for health care system and communities
- Improve screening rates
- Address multiple components
 - Improve access to screening
 - Increase demand for screening
 - Improve provider delivery
- Includes use of community health workers
- Use of multicomponent interventions found to be more effective



Go To Where People Live and Work

- Bring opportunities to the people
- Community Health workers
- Worksite settings
- Pharmacies
- Telehealth



Empower Patients

Digital technology

- Access to information
- Ease of making appointments
- Ease of communicating with providers







Include Cultural Competence

Be able to understand and interact with all people

- Reduce bias
- Develop trust
- Feel comfortable and understood

- Social acceptance
- Linguistic differences
- Respect identity



Potential Steps



Enhance What Already Exists

- Public health programs
- Focus on rural health
- Community health clinics
- Electronic health records
- Digital technology
- Telehealth



CDC's Colorectal Cancer Control Program

Increasing population-level Colorectal Cancer Screening Rates







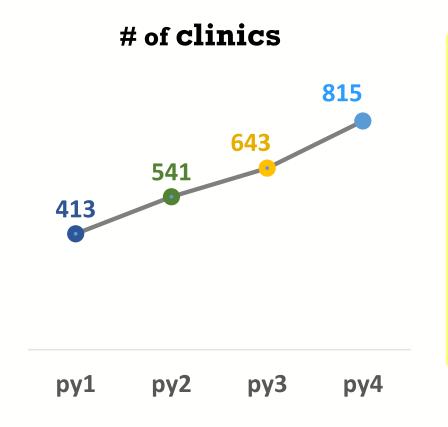




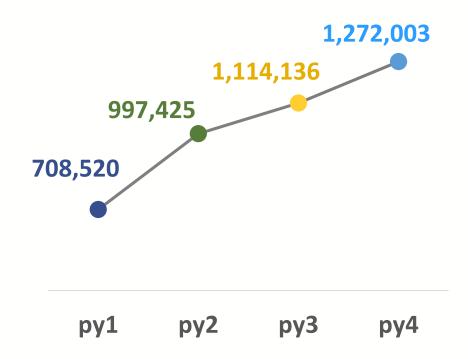
Colorectal Cancer Control Program

- 24 state health depts, 6 universities, and 1 tribal organization
- System-level integration into primary care clinics
- Implement evidence-based strategies
- Continuous evaluation and improvement

CRCCP Reach is Significant

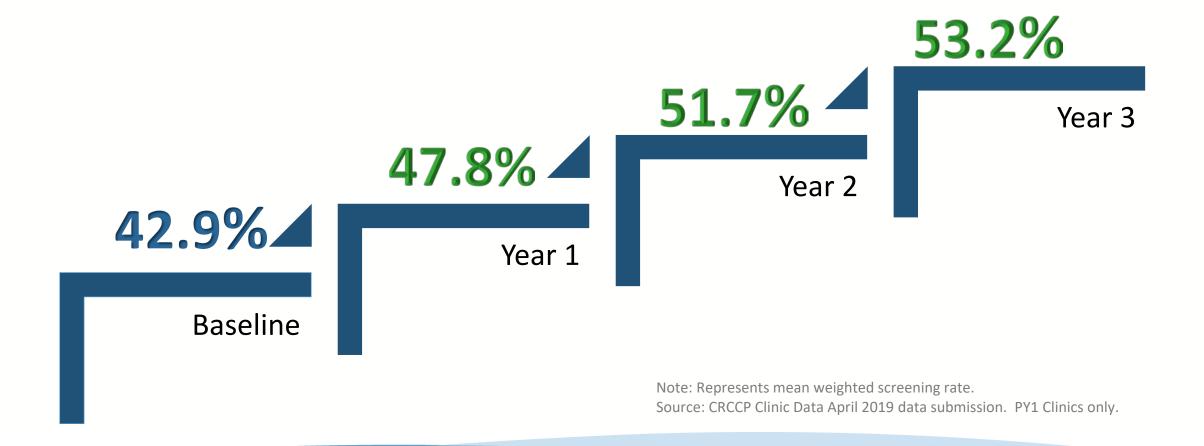


of patients, aged 50 to 75



Source: CRCCP clinic data submission, April 2019

CRCCP Clinic Screening Rates Increase



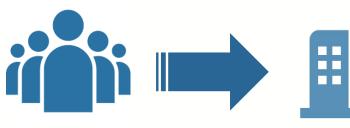
CDC's National Breast & Cervical Cancer Early Detection Program (NBCCEDP)

Nearly 30 Years of outreach, education, screening, diagnostic testing



- Serves low-income, uninsured or underinsured women
- Screening and diagnostic services
- Special emphasis on women geographically or culturally isolated and racial/ethnic minorities
- Expand to evidence-based strategies in clinics and working with communities

NBCCEDP Program Years 2014-2018



50 state, DC, 13 tribes/tribal organizations, 6 territories

>10,000 providers

12,132 diagnosed breast cancers

diagnosed cervical cancers 6,436 high-grade precancerous cervical lesions

560

April 2019 Minimal Data Elements submission July 1, 2013 – June 30, 2018

1,253,859

Early Detection Working in West Virginia

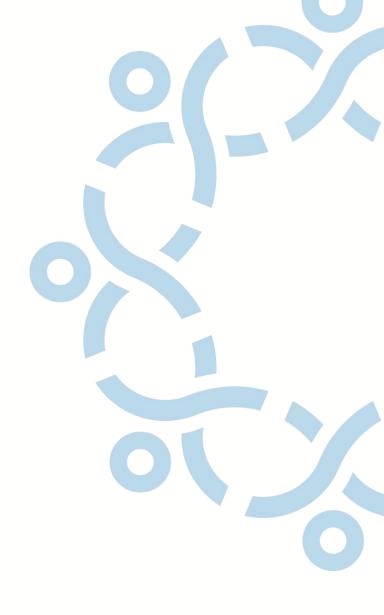
West Virginia Pilgrim Strong Wellness Partnership



- Worksite wellness program for health education and referral
- Maintain their health and cancer screenings through providing patient navigation at worksite
- Allowing time off for screenings (requires documentation)
- Addressing multiple diseases and physical activity at worksite navigation and fitness center
- Employer estimates saving \$30M in one year

Expand Remote Care

- Telehealth in isolated areas
- Mobile clinics
- Makeshift clinics
- Artificial Intelligence/Machine Learning



Thank you!

Go to the official federal source of cancer prevention information: www.cdc.gov/cancer





Division of Cancer Prevention and Control

Reliable. Trusted. Scientific.