**SCREENOUTCANCER**
Advancing Cancer Prevention Nationwide

# Evidence-Based Interventions to Increase Cancer Screening: PROVIDER REMINDERS

## PROVIDERS NEED REMINDERS, TOO

Your clinic can develop systems to alert providers that patients are due for cancer screenings. This practice can increase screening and testing uptake by more than 7%.[1]

## PROVIDER REMINDER OPTIONS

**Manual** — Flagging of medical charts using stickers or notations to highlight patients due for a cancer screening.

**Electronic** — Some electronic health record systems can send screening alerts to providers based on criteria selected.

### STEPS TO DEVELOP A PROVIDER REMINDER SYSTEM

- Gain provider and staff buy-in by including them in the planning and implementation process.
- Create a process with proper workflow to ensure:
  - Records are properly flagged.
  - Providers recommend appropriate screenings.
  - Screening tests are ordered.
  - Screening is completed or refused.
  - Refusal or results are documented.

### CRITERIA THAT CAN BE USED TO DETERMINE WHICH RECORDS ARE FLAGGED

- Age.
- Sex.
- Date of last screening.
- Risk factors.
- United States Preventative Services Task Force screening guidelines.[2,3,4]
- Upcoming appointments.

# Appendix 4: One Page Guides Continued



## DON'T FORGET TO MONITOR AND ADJUST

■ Establish a plan for regular evaluation and tweaking of the system.

■ Make sure providers are receiving the reminders.

■ Make sure providers are making the referrals or ordering the tests.

■ Document and train on any changes in protocol.

Contact your ScreenOutCancer affiliated state, regional, tribal, or territorial cancer prevention program for partnership opportunities including technical assistance on implementing evidence-based interventions:

www.cdc.gov/cancer/nbccedp

www.cdc.gov/cancer/crccp

1 - Baron RC, Melillo S, Rimer BK, Coates RJ, Kerner J, Habarta N, Chattopadhyay S, Sabatino SA, Elder R, Leeks KJ; Task Force on Community Preventive Services. Intervention to increase recommendation and delivery of screening for breast, cervical, and colorectal cancers by healthcare providers a systematic review of provider reminders. American Journal of Preventive Medicine 2010;38(1):110-7. 2 - Final Update Summary: Colorectal Cancer: Screening. U.S. Preventive Services Task Force. June 2016. 3 - Final Update Summary: Cervical Cancer: Screening. U.S. Preventive Services Task Force. August 2018. 4 - Final Recommendation Statement: Breast Cancer: Screening. U.S. Preventive Services Task Force. May 2019.

## Appendix 4: One Page Guides Continued

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# Evidence-Based Interventions to Increase Cancer Screening: PROVIDER ASSESSMENT

## CONSTRUCTIVE PROVIDER FEEDBACK CAN BOOST CANCER SCREENINGS

Research shows that giving feedback to your providers can increase screenings by 13% for many cancers.[1] Take a close look at provider practices related to referring patients for screening. Provide constructive suggestions to increase appropriate conversations with patients and ordering of tests.

### THE BASICS OF ASSESSMENT AND EVALUATION

- **Decide how to assess current screening practices** by examining individual providers or groups and comparing screening performance to national standards or clinic screening rates.

- **Gather data** through an electronic health record query, a chart review tool, or a pilot assessment.

- **Provide feedback** by presenting data in an easy-to-understand graphic or report, summarizing and analyzing results for the clinic as a whole and for individual providers.

- **Use findings for improvement**, including a written plan for screening rate increases and additional educational opportunities.

### ENGAGING YOUR PROVIDERS IN THE PROCESS

An evaluation of how either a provider or a group of providers recommend and refer patients for screening can be a sensitive topic. Some ways to lay the groundwork for success:

- **GET BUY-IN AHEAD OF TIME:** Do an in-service session to remind providers of the health system's policies, including screening eligibility and applicable guidelines, and get input on the assessment and feedback approach. Emphasize the positives around increased appropriate screenings for patients.

- **MOTIVATE PROVIDERS:** Feedback collected during the assessment phase should be presented in a way that encourages providers to take ownership of improving their rates.

- **OFFER CHOICES:** Let providers and staff determine whether they want one-on-one or group feedback. But, only release name-identified results to a provider for the aggregate and for that specific provider, or for his or her clinic compared to others in the health system.

- **MAKE TIME:** Allow time for providers to learn and implement any new processes.

- **PROVIDE RESOURCES:** Find out from your providers what resources or training they need to improve their screening rates. Provider reminders, screening guideline refreshers, updates on new testing procedures, pocket guides, and key messages could be helpful to use with their patients.

# Appendix 4: One Page Guides Continued



## THINK ABOUT…

- Identifying someone who will communicate with providers and staff, take ownership of the process, and encourage staff to buy in.
- Possible financial investments to upgrade electronic systems or pay for any needed training.
- Conducting a pilot assessment to see how the process works.
- How often the assessment and feedback should be conducted.
- Monitoring new activities over time and making adjustments as needed.
- Documenting improvements.

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www.cdc.gov/cancer/nbccedp

www.cdc.gov/cancer/crccp

1 - The Community Guide: Cancer  www.thecommunityguide.org/topic/cancer

# Appendix 4: One Page Guides Continued

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# Evidence-Based Interventions to Increase Cancer Screening: CLIENT REMINDERS

## REMINDERS INCREASE UPTAKE OF CANCER SCREENINGS

**A gentle prompt can make the difference between getting a screening on the books or a delay in care.**

Health systems can boost cancer screenings just by reminding clients that it's time to schedule a screening. Studies show that client reminders increased breast cancer screenings by 12%, and cervical and colorectal screenings by 10%.[1]

To set up a written and/or telephone outreach system for clients who are due for a cancer screening, health care providers should consider their options and choose the ones best suited for the clinic and for the clients:

### WRITTEN REMINDERS
- Letters.[2]
- Postcards.
- Email.
- Patient portal messages.

### TELEPHONE MESSAGES
- Direct calls.[3]
- Text messages.
- Automated messages.[4]

Tailor reminders to your audience (see Colon Cancer Screening Communications Guidebook).[5] Establish criteria for timing and outreach based on U.S. Preventive Services Task Force[6] screening guidelines as well as:

- Age.
- Sex.
- Date of last screening.
- Active patient status.
- Risk factors.

## STEPS TO DEVELOP A CLIENT REMINDER SYSTEM

- Increase buy-in from staff by seeking input through planning and implementation.
- Assess whether your electronic health record system can generate reports on screenings and link them to reminders. Upgrades may be needed.
- Develop the client reminder system and screening referral protocol.
- Develop messages.

- Identify staff who will generate and send client reminders.
- Integrate the reminder protocol into daily workflow.
- Provide training.
- Decide how patient responses will be documented and how to handle undeliverable reminders.

### THINK ABOUT…

- Tailoring method of delivery and the message to your clients.
- Whether patient navigation to address patient barriers can enhance efforts.
- Looking into bulk mailing to decrease cost.
- Tracking undeliverable messages and updating the reminder lists.

### DON'T FORGET TO MONITOR AND ADJUST

- Establish a plan for regular evaluation and tweaking of the system.
- Make sure patients were identified appropriately and reminders were generated successfully.
- Document and train on any changes in protocol.

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1 - Sabatino SA, Lawrence B, Elder R, Mercer SL, Wilson KM, DeVinney B, Melillo S, Carvalho M, Taplin S, Bastani R, Rimer BK, Vernon SW, Melvin CL, Taylor V, Fernandez M, Glanz K; Community Preventive Services Task Force. Effectiveness of interventions to increase screening for breast, cervical, and colorectal cancers: nine updated systematic reviews for the guide to community preventive services. American Journal of Preventive Medicine 2012;43(1):97-118. 2 - To see sample letter visit: rtips.cancer.gov/rtips/uploads/RTIPS/-=RT=-/WHE/DoHHS/NIH/NCI/DCCPS/7488.pdf.  3 - To see sample phone script visit: www.cancer.org/content/dam/cancer-org/cancer-control/en/worksheets/fobt-fit-follow-up-phone-script-average-risk-individuals.pdf.  4 - To see sample transcript of automated telephone message visit: rtips.cancer.gov/rtips/uploads/RTIPS/-=RT=-/WHE/DoHHS/NIH/NCI/DCCPS/6405.pdf  5 - Colon Cancer Screening Communications Guidebook, visit: nccrt.org/resource/2017-80-2018-communications-guidebook-recommended-messaging-reach-unscreened  6 - U.S. Preventive Services Task Force screening guidelines, visit: www.uspreventiveservicestaskforce.org/Page/Name/recommendations

## Appendix 4: One Page Guides Continued

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# Evidence-Based Interventions to Increase Cancer Screening:
# REDUCING STRUCTURAL BARRIERS



## OVERCOME OBSTACLES TO CANCER SCREENING

**Interventions that remove barriers are proven to increase the number of people who get screened.**

Reducing barriers increased breast cancer screenings by 18% and colorectal cancer screenings by 37%.[1]

### 5 WAYS TO MAKE CANCER SCREENING EASIER FOR YOUR CLIENTS

**1 TRANSPORTATION HELP:** Provide gas cards, bus passes, or taxi or ride-sharing service to clinics. Partner with local organizations that may provide transportation already.

- **Think about:** Providing a range of options. Pursue low-cost strategies first to improve chances of sustainability.

**2 FLEXIBLE HOURS:** Open clinics earlier, close later, and provide appointments during lunch hours for patient convenience.

- **Think about:** Recruiting volunteers to staff extended clinic hours, rotating providers to reduce burnout, and providing funding for longer clinic hours.

**3 MORE LOCATIONS:** Provide screening at worksites or through mobile mammography vans. Offer neighborhood pick-up locations for stool samples.

- **Think about:** Developing new partnerships and new resources that may be needed.

**4 SIMPLIFY PAPERWORK:** Eliminate unnecessary and confusing forms and provide scheduling help, translation services, and patient navigators.

- **Think about:** Sharing translation staff with other departments or using language phone lines.

**5 PATIENT NAVIGATION:** Provide support to help patients identify and overcome barriers to cancer screening.

- **Think about:** Investing resources to operate a successful patient navigation system.

# Appendix 4: One Page Guides Continued



## HOW TO START?

**Find out what your community needs** by talking to your target audience and connecting with local organizations. Reserve resources for individuals who are facing the identified barrier. Use data to determine the level of need for the identified intervention.

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**Try a pilot project:** Start out by implementing a small-scale change designed to boost cancer screenings, using limited resources. Observe and document the changes and tweak the strategy. Document costs to estimate funding to scale up.

**SUSTAINABILITY IS KEY,** SO IDENTIFY COST-SAVING OPPORTUNITIES, PARTNER WITH LOCAL GROUPS, AND MAKE SURE TO SECURE AND MAINTAIN SUPPORT FROM PUBLIC HEALTH AND COMMUNITY LEADERS.

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www.cdc.gov/cancer/nbccedp
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1 - Community Guide Systematic Review, visit: www.thecommunityguide.org/topic/cancer.