



Support the New York State Prevention Agenda by

Reducing Structural Barriers to Cancer Screening Through Policy and Environmental Interventions

Focus on: Colorectal Cancer

You can support the Prevention Agenda goal of **increasing screening rates for colorectal cancer** by implementing evidence-based activities that reduce barriers and increase access to colorectal cancer screening.

AIM:

Implement policy and environmental approaches to increase the number of community members with access to recommended colorectal cancer screening services

Why address colorectal cancer screening?

Colorectal cancer is the third leading cause of cancer death in New York State for both men and women, but it does not have to be:

- Screening can actually prevent some colorectal cancers by detecting and removing polyps before they become cancerous
- When colorectal cancer is found and treated early, it can often be cured
- All men and women ages 50 to 75 and at average risk for colorectal cancer should be screened
- There is a national push to increase colorectal cancer screening rates across the United States, and the New York State Department of Health - as well as many state and national organizations - are supporting this work.

To support this work, you can:

- Facilitate screening referrals and navigation to and through cancer screening
- Support the availability of screenings in locations other than doctor offices
- Support transportation to screening
- Co-sponsor screening events
- Promote the Patient Protection and Affordable Care Act and the New York State Cancer Services Program, which can reduce the out-of-pocket costs of cancer screening
- Promote the use of existing paid leave policies and/or work to enhance and expand paid time off or flextime policies for cancer screening in your organization

Reduce structural barriers to cancer screening.

Structural barriers are non-economic burdens or obstacles that make it difficult for people to access cancer screening services. Interventions designed to reduce these barriers may facilitate access to cancer screening services by:

- Reducing time or distance between service delivery settings and target populations
- Modifying hours of service to meet client needs
- Offering services in alternative or non-clinical settings (e.g., mobile mammography vans at worksites or in residential communities)
- Eliminating or simplifying administrative procedures and other obstacles (e.g., scheduling assistance, patient navigators, transportation, dependent care, translation, limiting the number of clinic visits)

Such interventions often include one or more secondary supporting efforts, such as:

- Printed or telephone reminders
- Education about cancer screening
- Information about screening availability (e.g., group education, pamphlets or brochures)
- Efforts to reduce out-of-pocket costs to the client (though interventions principally designed to reduce client costs are considered to be a separate class of approaches)

ACTIONS:

These actions can help to reduce structural barriers to colorectal cancer screening in your community

Recommended Action	Brief Description
Facilitate cancer screening referrals and assist in navigating community members to and through cancer screening	<p>Use New York State Cancer Services Program (CSP) and Centers for Disease Control and Prevention educational materials* to educate community members in the eligible population about colorectal cancer screening wherever your work already intersects with them.</p> <p>Educate community members about the screening process, what to expect, and direct them to existing resources.*</p>
Support the availability of screenings in locations other than health practitioner offices	<p>Promote the inclusion of colorectal cancer screening through mobile health vans.</p> <p>Offer fecal test kits to patients undergoing other screenings through mobile vans.</p> <ul style="list-style-type: none"> • Share sample screening algorithms* to help identify clients who should be referred to colonoscopy <p>Promote mobile vans that offer colorectal cancer screening in your community.</p>
Support transportation to screening	<p>For people undergoing colonoscopy, a ride home is necessary.</p> <ul style="list-style-type: none"> • Promote and provide transportation options, vouchers, etc. to support completion of this screening for those without transportation options
Co-sponsor screening events	<p>Work with local health systems and medical practices to include colorectal cancer screening options at screening events.</p> <ul style="list-style-type: none"> • Consider holding events outside of office hours or on weekends <p>Promote these events to community members.</p> <p style="text-align: right;">*See page 5 for available Resources</p>

Recommended Action	Brief Description
<p>Promote Patient Protection and Affordable Care Act benefits and the CSP screening services to help reduce the out-of-pocket cost of screening</p>	<p>Colorectal cancer screening is a covered benefit under the Patient Protection and Affordable Care Act, so screening costs are covered for those with health insurance with no co-pay or co-insurance.*</p> <p>For those without insurance who are otherwise eligible, the CSP* is available for screening tests.</p>
<p>Enhance existing paid time off or flextime policies for cancer screening to include colorectal cancer screening (or create a policy if no such policy exists)</p> <p>Promote existing paid time off or flextime policies for cancer screening OR existing health plan benefits regarding cancer screening</p> <p>Promote existence of paid leave policies externally to encourage other businesses to adopt them</p>	<p>Review your organization’s current leave policies for cancer screening, determine how much time would be reasonable to accommodate additional screenings being added to the current benefit.</p> <ul style="list-style-type: none"> • e.g., colonoscopy = full day; breast and cervical = three hours (some policies allow for up to four hours for mammography) <p>Review a sample policy* that can be adapted to your organization.</p> <p>Determine how many employees would be affected by this policy related to breast, cervical and colorectal cancer screening based on age, gender and the United States Preventive Services Task Force (USPSTF) screening guidelines.*</p> <p>Engage organizational decision makers (i.e., find a champion); present them with sample policy,* the number of employees who would be affected, and supporting information.*</p> <p>Educate employees about the importance of cancer screening and what screening services are covered in the current health plan policy OR existing cancer screening leave policy.</p> <ul style="list-style-type: none"> • Engage decision makers in human resources and/or worksite management to gain support for education of current and future employees about cancer screening, including what the health plan(s) benefit covers, and systematize this education into new employee orientation • For employees without health insurance, work with a local CSP* to obtain a CSP referral form • Implement awareness activities in January (cervical cancer), March (colorectal cancer)* and October (breast cancer) • Promote and implement evidence-based activities such as small media,* educational activities, and reduction of structural barriers (e.g., bring mobile screenings to worksite) • Invite local CSP* or other cancer education/advocacy group to provide educational session to employees <p>Expand efforts through community mobilization and empowerment activities.</p> <ul style="list-style-type: none"> • Promote successful implementation of policies through press releases, articles in local newspapers, and other news opportunities • Highlight achievement and use your success to promote similar initiatives in worksites across your community <p style="text-align: right;">*See page 5 for available Resources</p>

ACHIEVEMENT:

Reduction in barriers and increase in access to completing colorectal cancer screening

Promoting cancer screening supports the following Prevention Agenda objectives:

Goal #3.1:

Increase screening rates for cardiovascular disease, diabetes, and breast, cervical and colorectal cancers, especially among disparate populations.

Objective 3.1.3:

By December 31, 2017, increase the percentage of adults (50-75 years) who receive a colorectal cancer screening based on the most recent guidelines (blood stool test in the past year; or sigmoidoscopy in the past five years and a blood stool test in the past three years; or a colonoscopy in the past 10 years):

- By 5% from 68.0% (2010) to 71.4% for all adults.
- By 10% from 59.4% to 65.4% for adults with an income <\$25,000.
(Data Source: NYS BRFSS) (PA Tracking Indicator; Health Disparities Indicator)

Local Health Departments and their partners can include the above objectives in the Community Health Assessment (CHA), Community Health Improvement Plan (CHIP), and related initiatives.

Tracking performance/process measures can be important for reporting progress to stakeholders. Here are measures that may be used track progress:

Short-Term Performance Measure

- Number of patients navigated to and/or through screening
- Number of mobile vans offering colorectal cancer screening through take home fecal test kits
- Number of screening events held in partnership with providers
- Number of transit vouchers provided
- Number of employers participating in employee education about cancer screening
- Number of media alerts/press releases sent out and number of earned media stories about your activities to reduce structural barriers to cancer screening
- Number of worksites in your county implementing paid time off or flex time policies for cancer screening

Long-Term Performance Measure

- Percentage of adults who report being up-to-date with colorectal cancer screening

Ready to get started? These resources can help:

*RESOURCES

- NYS Prevention Agenda https://www.health.ny.gov/prevention/prevention_agenda/2013-2017/
- NYS Department of Health Cancer Services Program <https://www.health.ny.gov/diseases/cancer/services/>
- NYS Department of Health free Educational Materials
https://www.health.ny.gov/forms/order_forms/cancer.pdf
- Guide to Community Preventive Services <http://www.thecommunityguide.org/cancer/index.html>
- Centers for Disease Control Vital Signs <http://www.cdc.gov/VitalSigns/colorectalancerscreening/index.html>
- Centers for Disease Control Worksite Health
www.cdc.gov/workplacehealthpromotion/implementation/topics/colorectal-cancer.html
- National Colorectal Cancer Roundtable 80% by 2018 nccrt.org/about/80-percent-by-2018/
- United States Preventive Services Task Force colorectal cancer screening recommendation
www.uspreventiveservicestaskforce.org/uspstf08/colocancer/colcancs.pdf
- Patient Protection and Affordable Care Act Preventive Care www.healthcare.gov/what-are-my-preventive-care-benefits/
- American Cancer Society Sample Screening Algorithm
www.cancer.org/acs/groups/content/@editorial/documents/document/acspc-028281.pdf