



CANCER PREVENTION & RESEARCH
INSTITUTE OF TEXAS

Strategies and Opportunities Around Colorectal Cancer



Moderator & Speakers



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UTSouthwestern

Colorectal Cancer Screening and Patient Navigation Program (CSPAN)

Stacie Miller, MSN, MPH, RN
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Colorectal Cancer in Texas

**Cancer Incidence Rates in Texas, 2016-2020
Leading Sites by Sex and Race/Ethnicity**

Male					
Rank	Cancer	Rate	Lower CI	Upper CI	Case Count
1	Prostate	103.4	102.6	104.1	73,528
2	Lung & Bronchus	55.1	54.5	55.7	35,987
3	Colon & Rectum	44.0	43.5	44.5	29,958
4	Kidney & Renal Pelvis	26.7	26.3	27.1	18,366
5	Urinary Bladder	25.8	25.4	26.2	16,224
6	Non-Hodgkin Lymphoma	20.7	20.4	21.1	13,687
7	Melanoma of the Skin	19.2	18.8	19.5	12,556
8	Liver & IHBD	18.3	18.0	18.7	13,409
9	Leukemia	17.7	17.4	18.0	11,584
10	Oral Cavity & Pharynx	17.3	17.0	17.7	12,326
Female					
Rank	Cancer	Rate	Lower CI	Upper CI	Case Count
1	Breast	116.3	115.5	117.1	89,447
2	Lung & Bronchus	39.7	39.3	40.2	31,355
3	Colon & Rectum	31.1	30.7	31.5	23,992
4	Corpus & Uterus, NOS	24.1	23.7	24.4	19,113
5	Thyroid	16.7	16.4	17.0	12,141
6	Non-Hodgkin Lymphoma	14.2	13.9	14.5	10,954
7	Kidney & Renal Pelvis	14.1	13.8	14.4	10,939
8	Pancreas	11.4	11.2	11.6	8,949
9	Leukemia	11.0	10.8	11.3	8,354
10	Melanoma of the Skin	10.3	10.1	10.6	7,781

- 3rd most commonly diagnosed cancer in Texan men and women
- Only 66.8% of Texans were up-to-date with screening in 2020, compared with a national screening adherence of 72.4%

Colorectal Cancer in Texas

Age-Adjusted Cancer Mortality in Texas, 2016-2020
Leading Causes by Sex and Race/Ethnicity

Male					
<i>Rank</i>	<i>Cancer</i>	<i>Rate</i>	<i>Lower CI</i>	<i>Upper CI</i>	<i>Death Count</i>
1	Lung & Bronchus	39.0	38.5	39.5	24,796
2	Prostate	17.6	17.2	17.9	9,893
3	Colon & Rectum	17.0	16.6	17.3	11,060
4	Liver & IHBD	12.0	11.7	12.2	8,400
5	Pancreas	11.9	11.6	12.2	7,720

Female					
<i>Rank</i>	<i>Cancer</i>	<i>Rate</i>	<i>Lower CI</i>	<i>Upper CI</i>	<i>Death Count</i>
1	Lung & Bronchus	25.0	24.6	25.4	19,543
2	Breast	19.6	19.2	19.9	15,131
3	Colon & Rectum	10.9	10.7	11.1	8,472
4	Pancreas	9.0	8.8	9.2	7,066
5	Ovary	5.9	5.7	6.1	4,633

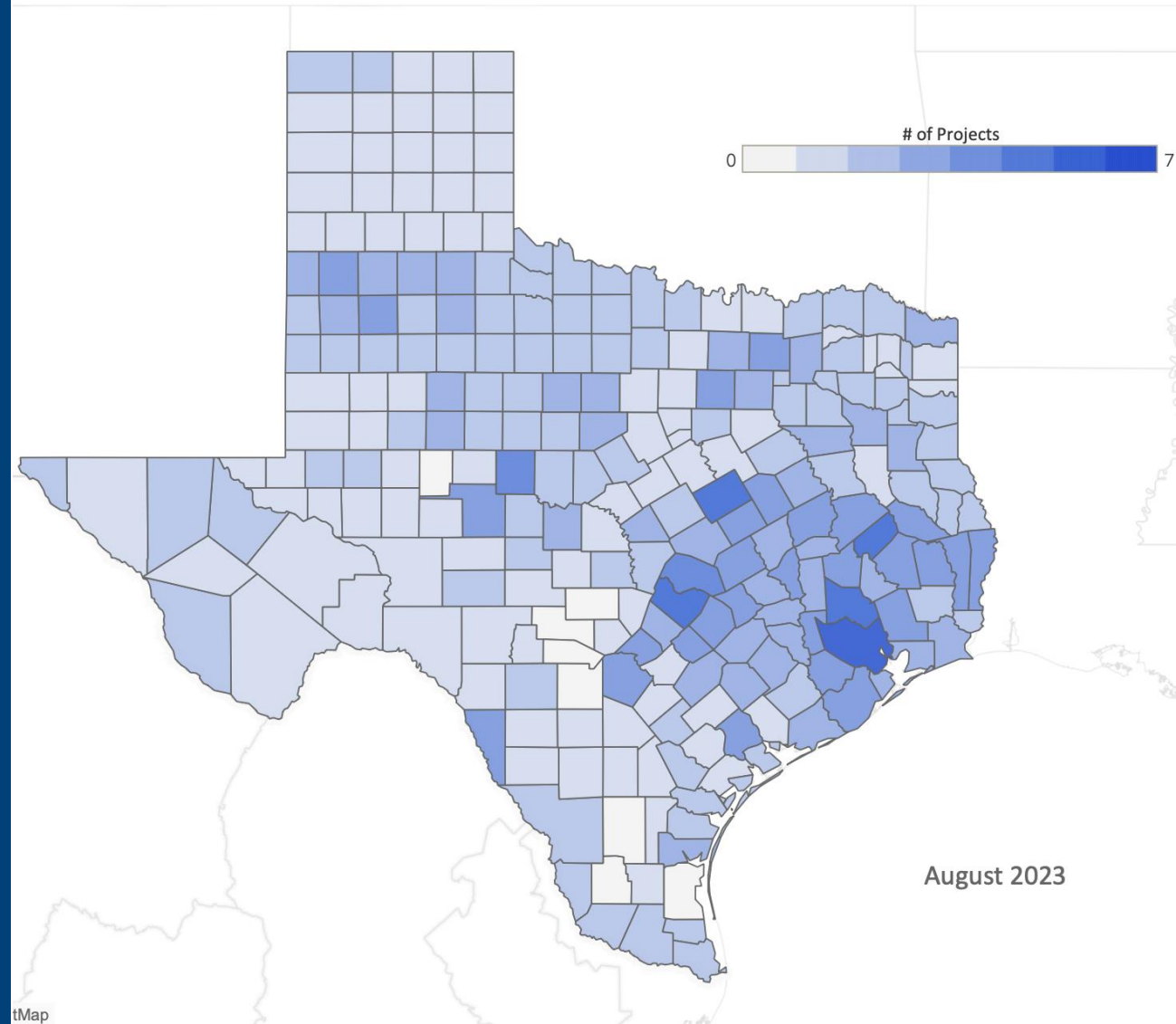
- 3rd most common cause of cancer-related death in Texan men and women

Counties Served by CPRIT Prevention Projects:

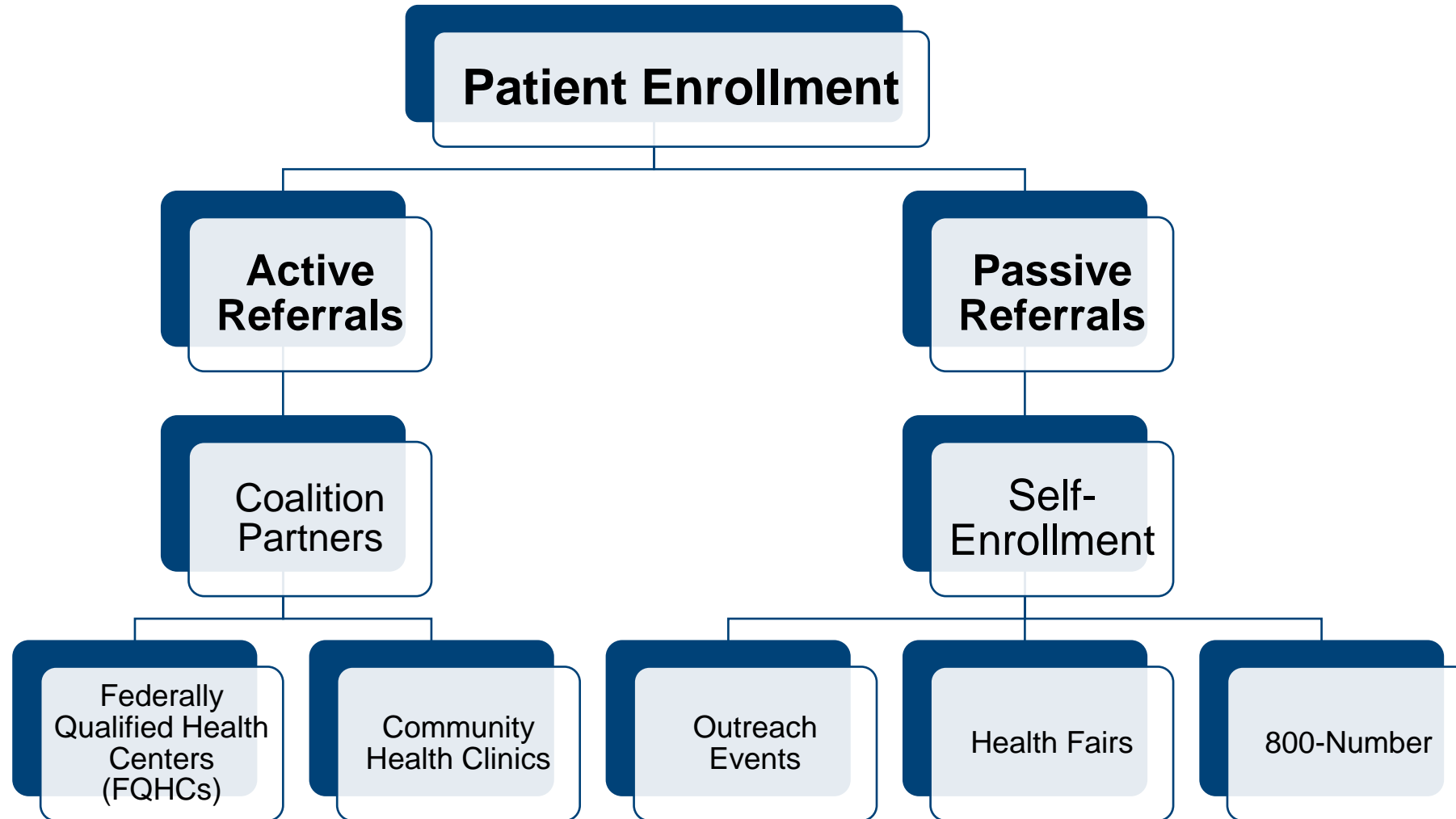
CRC Clinical Services (Screening & Early) Detection

14 Projects:

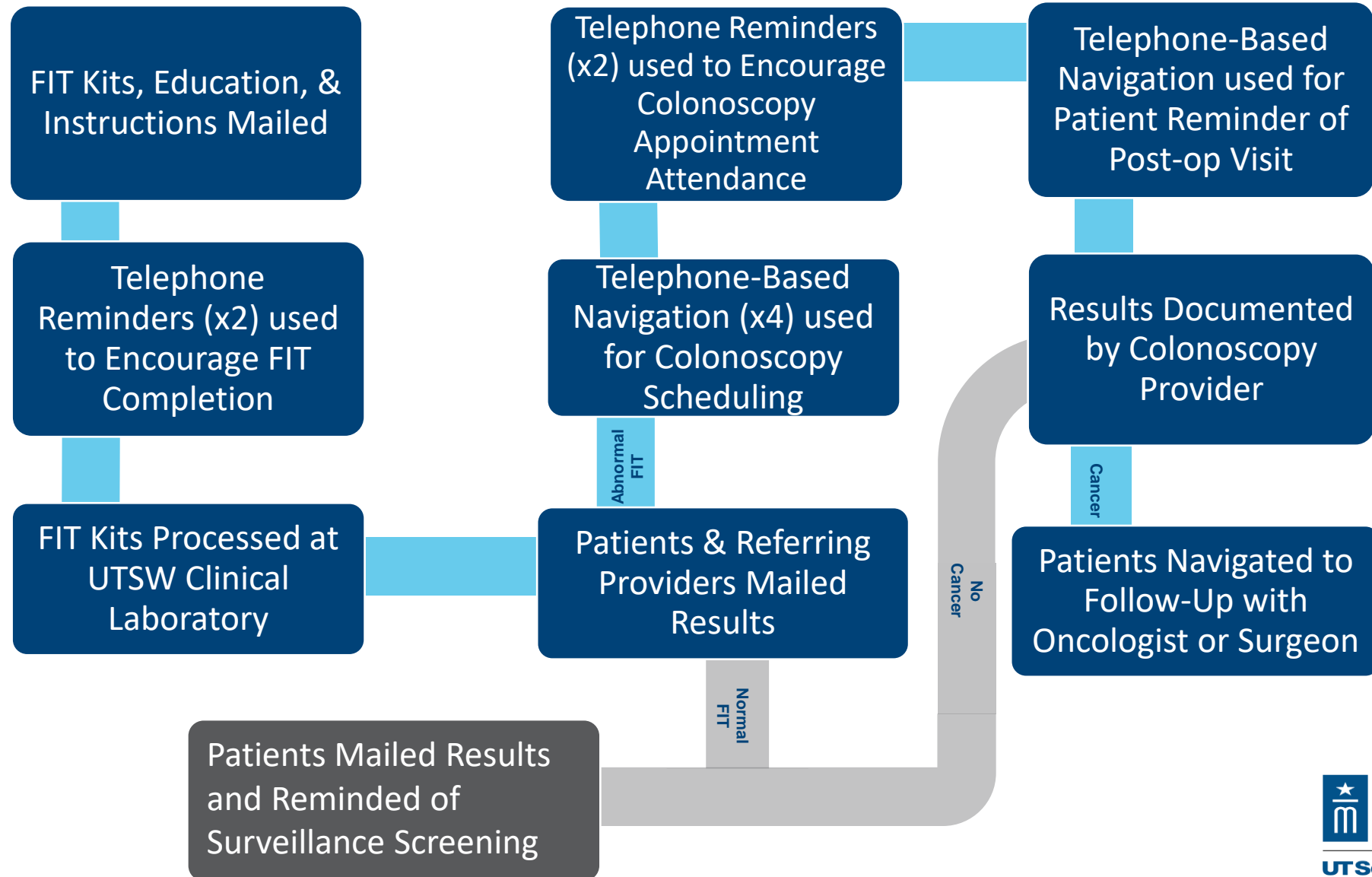
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PP210017 PP220005 PP220013 PP220034 PP220041 PP220051 PP230030



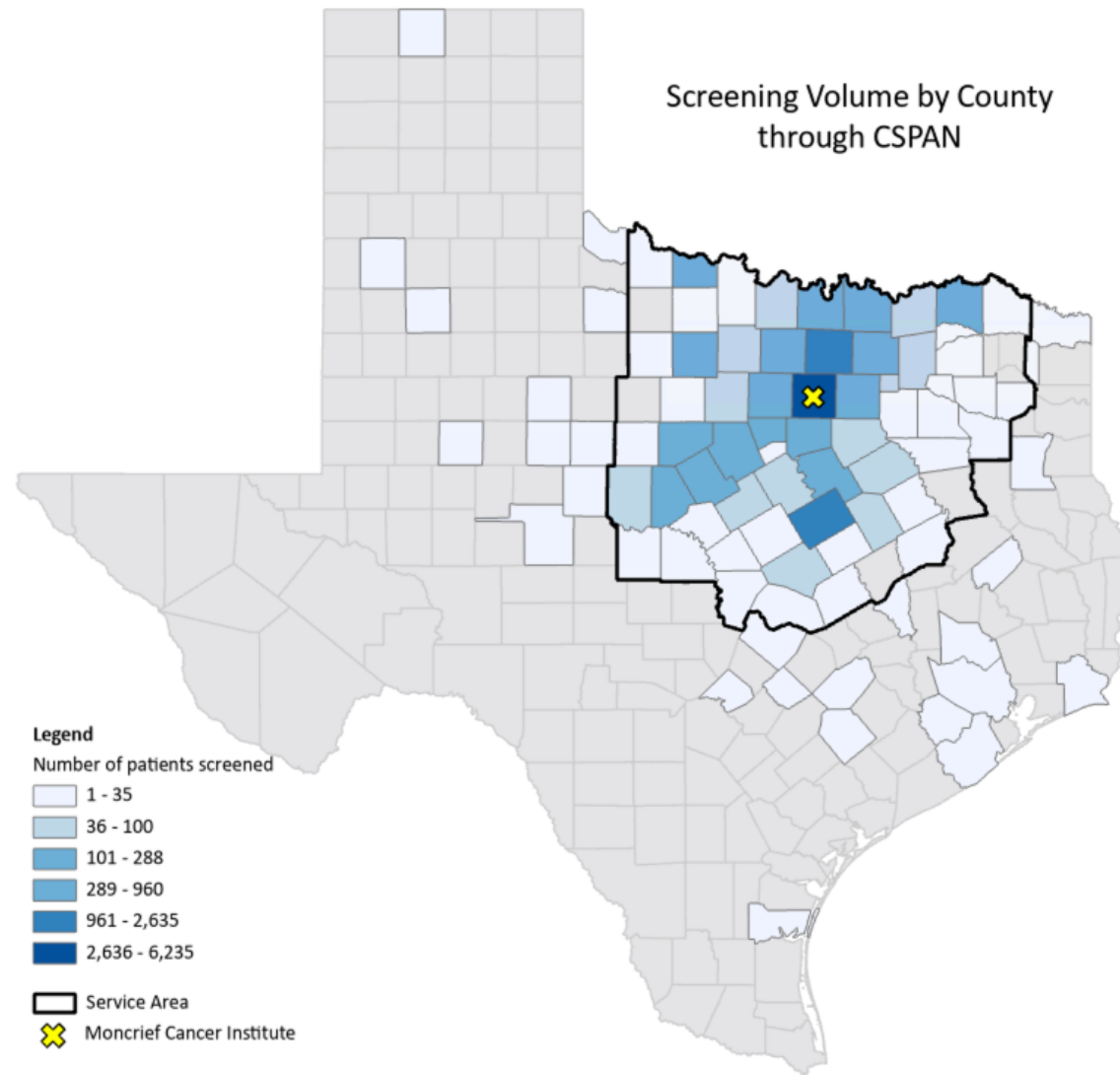
Outreach Delivery Model



Screening & Navigation Delivery Model



Map of Screening Density



SDoH Patient Demographics

	%
Age (Mean)	62
Sex	
Female	68.7%
Male	31.3%
Race	
White	43.3%
Black	16.4%
Other	7.5%
Unknown/Unavailable	32.8%
Ethnicity	
Hispanic/Latino	38.8%
Non-Hispanic/Latino	44.8%
Unknown/Unavailable	16.4%
Uninsured	13.4%
Underinsured	65.7%

Referring vs. Colonoscopy Providers

Referring Providers

- 867 Primary Care Providers (PCPs) in referral network
- Refer patients for program invitation on an episodic or periodic basis
- Provide patient's name, contact information, and demographic data to program team for invitation

Colonoscopy Providers

- 85 colonoscopy provider groups across the 67-county service area
- Provide follow-up colonoscopies to all patients with abnormal FIT results

Thank You!

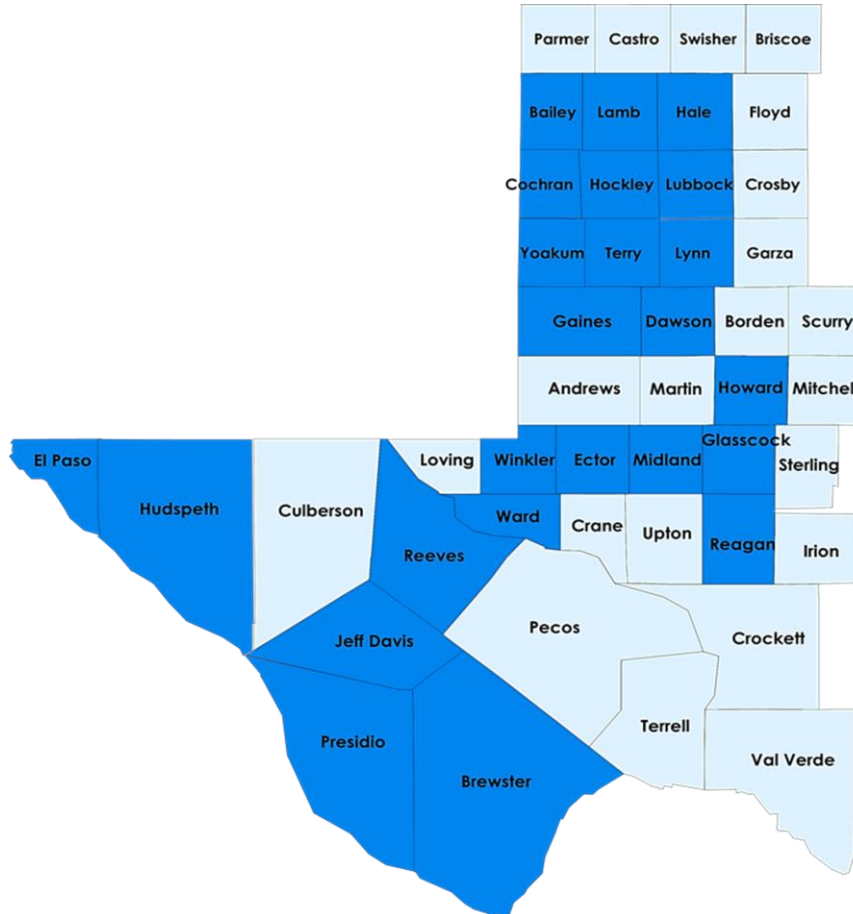
Stacie Miller, MSN, MPH, RN

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Colorectal Cancer Screening and Patient Navigation Program

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ACCION /SuCCCeS program

Who are We and Where We Serve



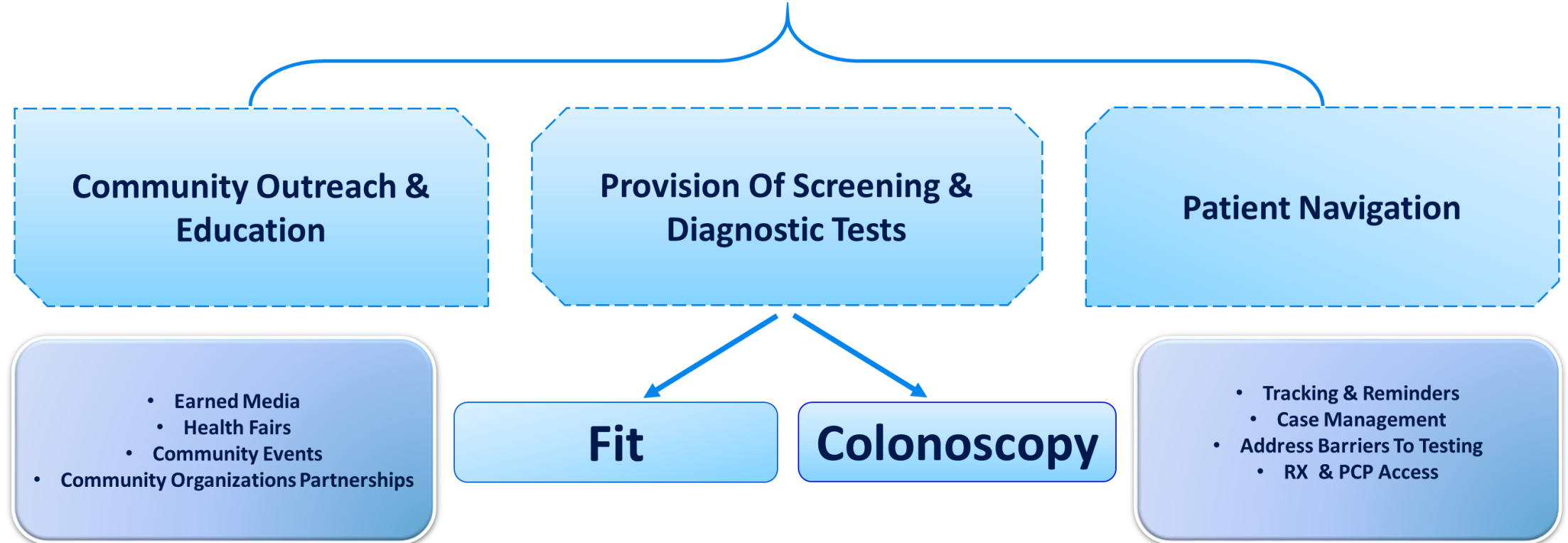
- Initially developed in 2011 with funding from CPRIT.
- The ACCION /SuCCCeS program is a well-established, theory-based, culturally tailored, bilingual, evidence-based screening program.
- Developed to address specific disparities and barriers in the communities we serve.

Barriers To Screening

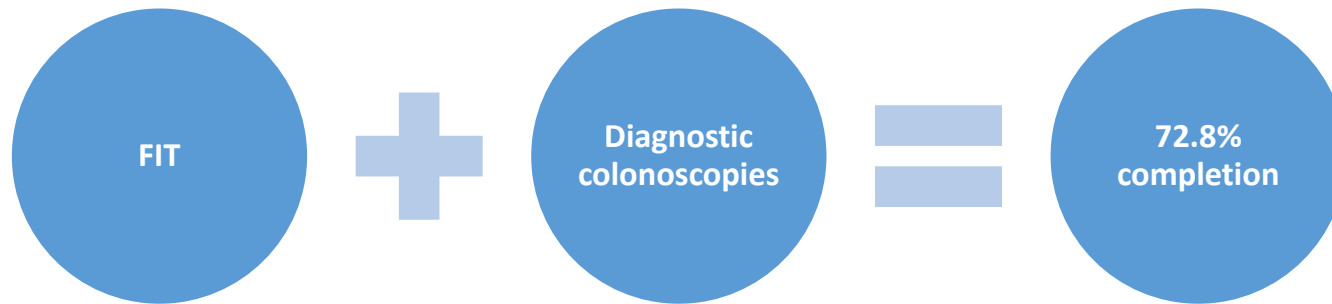
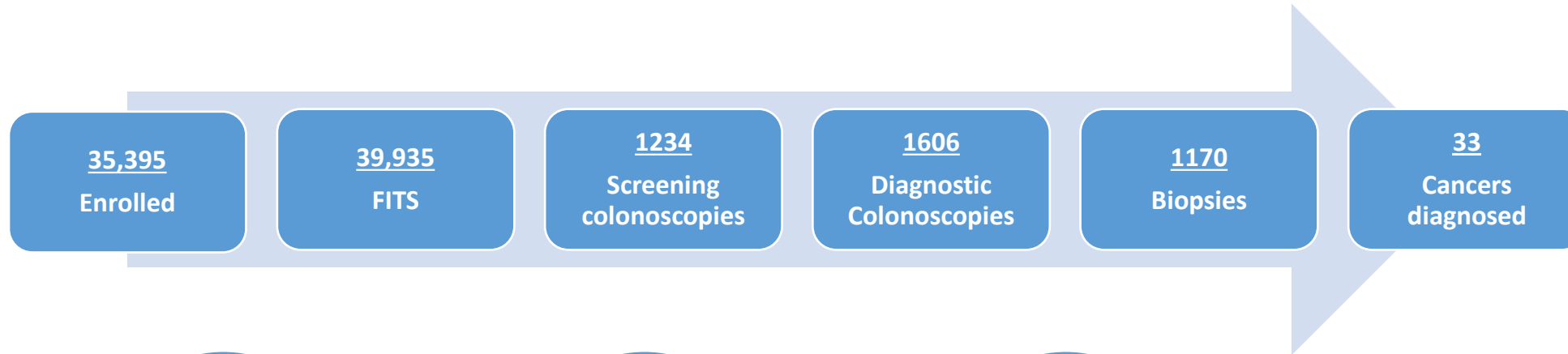
<ul style="list-style-type: none"> ▪ Fear & Embarrassment 	<p>Fear of a cancer diagnosis & embarrassment are common themes due to testing being invasive and performed on a part of the body that is taboo to discuss.</p>
<ul style="list-style-type: none"> ▪ Unpleasantness Of Tests 	<p>There are different types of screening tests; many individuals are not aware of the alternate screening methods.</p>
<ul style="list-style-type: none"> ▪ Transportation 	<p>There are many individuals who do not have a way in getting to the testing site.</p>
<ul style="list-style-type: none"> ▪ Lack Of Insurance/Cost 	<p>The cost of screening being expensive and possibly inaccessible due to lack of health insurance.</p>
<ul style="list-style-type: none"> ▪ Physician Recommendation 	<p>Lack of provider recommendations play a significant role in screening barriers, which is more likely seen among ethnic minorities.</p>
<ul style="list-style-type: none"> ▪ Lack Of Symptoms 	<p>Symptoms of CRC may not always be present at first and the individual may be feeling perfectly well.</p>
<ul style="list-style-type: none"> ▪ Health Education 	<p>Lack education about CRC and other health topics, particular insufficient education regarding CRC screening, the causes of CRC, symptoms and how to prevent it.</p>

How we Serve

Core Community Program Services



Outcomes



Effective CRC Screening Programs

✓ Across settings

✓ Multilevel

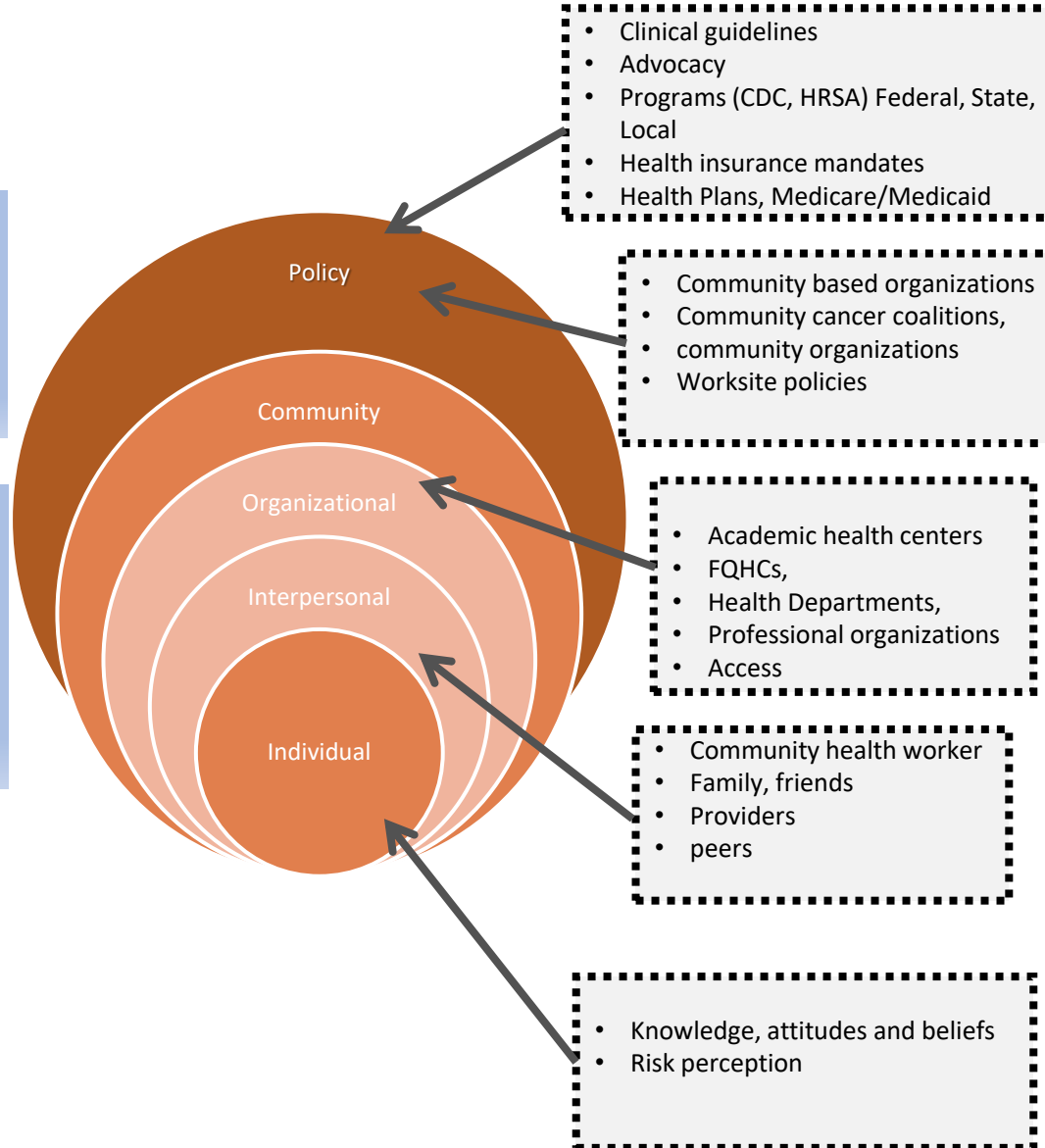
✓ Multicomponent

Health system based

- opportunistic
- visit-based
- non visit based

Population based

- community-based
- non traditional settings



Outreach

- Expansion to new health care organizations, e.g. hospitals, Public Health Dept, Health plan, etc.
- Expansion to new counties

Education

- In person -offered by trained staff
- Video in clinical areas
- Social media/website
- Large group presentations

Clinical Test Delivery

System changes

- Addition of new settings: -ERs, Endoscopy units, urgent cares
- Practice-based strategies
 - New workflows
 - Team-based delivery
 - FLU-FIT
 - Direct provision by team
 - Mailed reminders
 - Mailed FIT
- Staff training
- Resource list

Navigation

- integrated into practice

Evaluation

- Tracking system in each practice
- Advanced analytic capability HIE
- RE-AIM framework

Features of successful CRC screening programs

Locally adaptive, responsive, creative, resourceful

High level champions

Stakeholder engagement

Convening entity

Data driven approaches

Clear goals

Understanding of assets and resources

Identifying synergies across organizations

Collaborative

Learning system

Opportunities: Coordinating Center for Colorectal Cancer Screening Across Texas

- - - - ► *[connect]* ► -

>10yrs of expertise and experience across Texas with CPRIT CRC screening programs

Synthesize, share and scale best practices across Texas

Goal 1: Create a comprehensive stakeholder network representing all regions and communities in Texas to inform development, implementation & dissemination of a Texas CRC screening strategic plan.

Goal 2: Develop infrastructure and resources to support expansion of evidence-based CRC screening statewide.

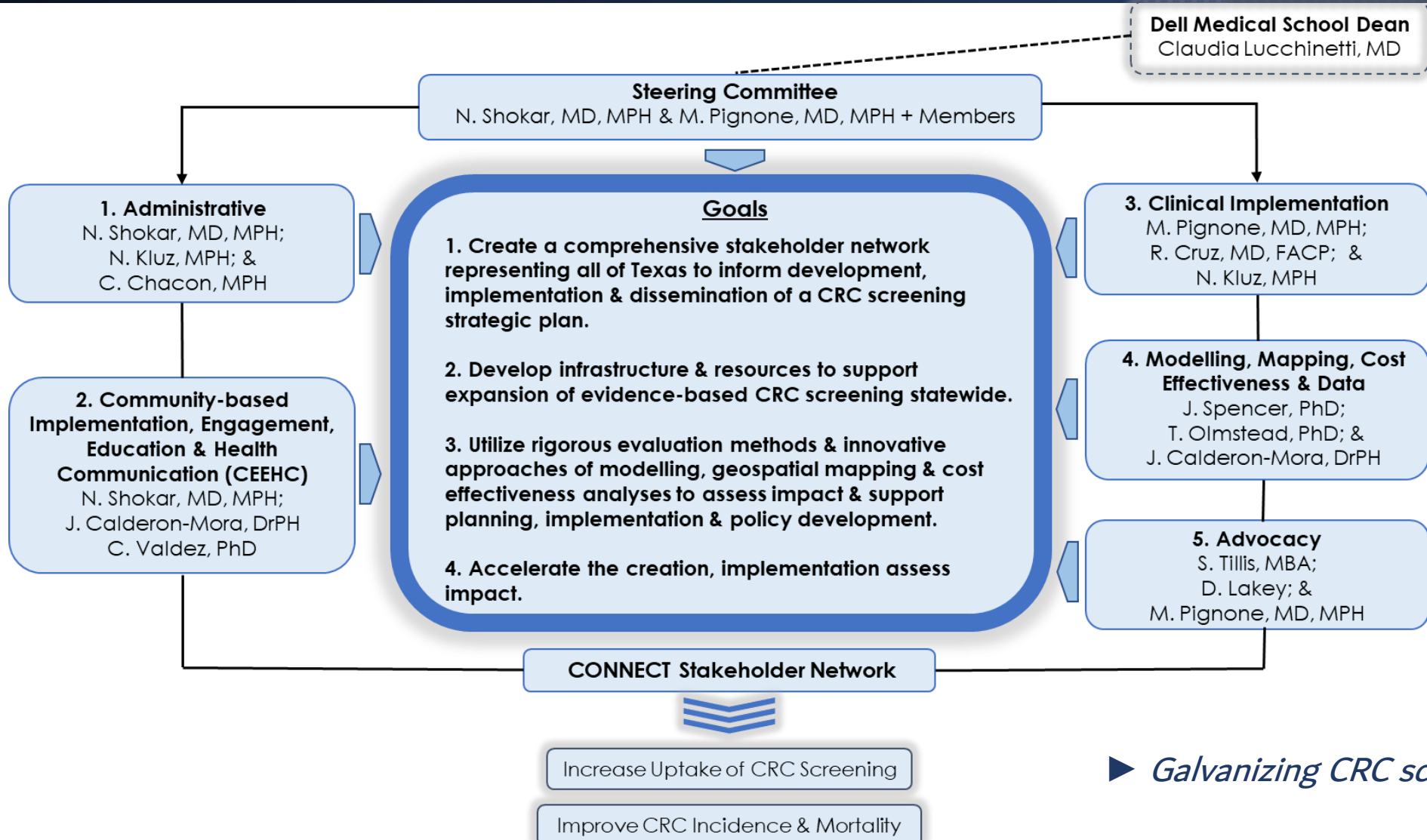
Goal 3: Utilize rigorous methods and innovative approaches of modelling, geospatial mapping and cost effectiveness analyses to assess impact and support planning, implementation, and policy development.

Goal 4: Accelerate the creation, implementation and dissemination of CRC screening best practices for priority populations

► *Galvanizing CRC screening across Texas*

Opportunities: Coordinating Center for Colorectal Cancer Screening Across Texas

- - - - ► [connect] ► - -



Multiple opportunities to engage; learning community

► *Galvanizing CRC screening across Texas*



Questions?



THANK YOU



INNOVATIONS
In Cancer Prevention and Research Conference



CANCER PREVENTION & RESEARCH
INSTITUTE OF TEXAS

Coming up after the break:

- **Company Showcase**
Floral Hall B
- **Texas Cancer Plan Town Hall**
Floral Hall A

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