

Contract Narrative: Cancer Questions

Survey of New Mexico Federally Qualified Health Centers regarding cancer screening, roles of Community Health Workers, and awareness of survivorship care plans.

Overview: Contract Narrative Cancer Question Survey

- Goals of the presentation:
 - Provide an overview of the partners and participants
 - Provide an overview of the survey
 - Review results of the survey

Project Overview

- State Offices of Rural Health and State Comprehensive Cancer Programs were encouraged to partner
 - Recommendation came from:
 - National Organization of State Offices of Rural Health
 - National Comprehensive Cancer Network & George Washington University Cancer Center
- Primary Partner: Office of Primary Care and Rural Health (OPCRH)
 - Office of Primary Care and Rural Health and Comprehensive Cancer Program are both Department of Health program; both within the same bureau
 - OPCRH statement:
 - The Office of Primary Care & Rural Health (OPCRH) advocates for quality health care delivery systems for all New Mexicans. The OPCRH provides information, referrals, education, health planning, grant opportunities, technical assistance, and financial assistance for health centers in New Mexico

Project Overview

- Office of Primary Care and Rural Health (OPCRH):
 - Partner with most Federally Qualified Health Centers in the state
 - Yearly contract requirement to fill out a survey regarding contract activities
 - Each year, OPCRH offers a supplemental section for other DOH programs
 - FY20, NMDOH Cancer Section was able to utilize the supplemental section
- Total of 8 questions were drafted to be included in the contract narrative
 - Questions were drafted by a team of members from the CCP and BCC program
 - 5 questions related to cancer screening
 - 2 questions related to roles of CHW/CHRs
 - 1 question related to survivorship care plans

Purpose of the Survey

- Evaluate certain goals and objectives of the 2020-2024 New Mexico Cancer Plan.
 - Possible objectives:
 - Objective 4.2: Increase the adoption of informed decision-making for screenable cancers
 - Objective 8.2: Increase survivorship care planning for newly diagnosed and long-term cancer survivors
 - Objective 9.1: Promote understanding and implementation of patient navigation programs
- Use results to improve technical assistance health systems receive from Comprehensive Cancer and Breast and Cervical Cancer programs.
 - Enhancing health systems to improve breast, cervical and colorectal cancer being a priority of the CCP and BCC programs.
- OPCRH shares the results with all their partners; clinics then use the information to inform change or to identify clinics to partner with

What is a Federally Qualified Health Center (FQHC)?

- Federally Qualified Health Centers are community-based health care providers that receive funds from the Health Resources & Services Administration (HRSA) Health Center Program to provide primary care services in underserved areas
 - Federally Qualified Health Centers may be Community Health Centers, Migrant Health Centers, Health Care for the Homeless, and Health Centers for Residents of Public Housing.
- Typically provide a sliding fee scale
- Qualify for enhanced reimbursement from Medicare and Medicaid
- Provide comprehensive services including:
 - Preventive health services
 - Dental services
 - Mental health and substance abuse services
 - Transportation services necessary for adequate patient care
 - Hospital and specialty care
- According to the New Mexico Primary Care Association, in 2019 FQHCs had a patient population of 350,973 and conducted over 1.6 million patient visits

Participating Clinics

19 organizations; 67 clinics located in 30 counties

- El Centro Family Health (14)
- Presbyterian Medical Center (13)
- First Choice Community Healthcare (8)
- Ben Archer Health Center (6)
- La Familia Medical Center (5)
- Nor-Lea Hospital District (4)
- La Casa de Buena Salud (3)
- Las Clinicas Del Norte (3)
- Albuquerque Healthcare for the Homeless
- Carrizozo Health Center
- De Baca Family Health
- El Pueblo Health Services
- First Nations Community Healthsource
- Hidalgo Medical Services
- La Clinica de Familia
- La Clinica del Pueblo de Rio Arriba
- Mountainair Family Health Center
- Mora Valley Community Health Services
- Quay County Family Health Center

Survey Questions

1. Do your providers have the ability to access online cancer risk assessment tools (e.g., for breast, colorectal, and/or lung cancer)? Check all that apply:

- In an exam room during the appointment
- In another protected space within the clinic at the time of the individual's appointment
- Other: _____

2. What are some strategies your clinic has implemented to increase breast, cervical and colorectal cancer screening, as well as HPV vaccination? Check all that apply:

- | | |
|---|--|
| <input type="checkbox"/> Patient reminders | <input type="checkbox"/> Patient navigation |
| <input type="checkbox"/> Provider reminders | <input type="checkbox"/> Public education (e.g., fact sheets, brochures, videos) |
| <input type="checkbox"/> Assessing provider-level screening rates | <input type="checkbox"/> Telehealth |
| <input type="checkbox"/> Reducing barriers to accessing care | <input type="checkbox"/> Other (please describe): |

a. Based on your evaluation, which of these strategies are most effective/successful in increasing cancer screening and HPV vaccination rates and why?

3. What are your clinic's greatest challenges to support individuals who need diagnostic follow-up after abnormal test results for breast, cervical and/or colorectal cancer screening, and what do you do to help mitigate those challenges?

Survey Question- contd.

- If your clinic utilizes tools or resources to engage patients and providers in conversation to support informed decision-making about cancer screening and/or HPV vaccination? Please complete table below:

Clinical service	Conversation? (Yes/No)	Use tools or resources? (Yes/No)	Description of tools or resources (if applicable)	Comments (e.g., challenges/successes)
Breast cancer screening				
Cervical cancer screening				
Colorectal cancer screening				
Prostate cancer screening				
Lung cancer screening				
HPV vaccination				

Survey Question- contd.

5. If your clinic employs Community Health Workers (CHWs), Community Health Representatives (CHRs), or Patient Navigators, which of the following functions or roles do they fulfill related to cancer? Check all that apply:

Community Health
Worker/Representative

Patient Navigator

Community outreach

In-clinic patient education

Navigation to screening including reminder calls
and tracking screening completion

Navigation to diagnostic services or cancer
treatment

Other (either cancer-related or non-cancer-related
functions): _____

a. For any of the above tasks that are not performed by CHRs/CHWs or PNs, what other clinic staff cover these roles/perform these tasks?

Survey Questions- contd.

6. Do providers within your clinic utilize cancer Survivorship Care Plans as a tool for guiding healthcare decisions for individuals who have been diagnosed with cancer?

Reference: A Survivorship Care Plan is a record of a person/individual cancer history and recommendations for follow-up care created by the facility where the person/individual received treatment.

- Yes
- Receive, but don't use
- Have not received

Question 1

Do your providers have the ability to access online cancer risk assessment tools (e.g., for breast, colorectal, and/or lung cancer)?

Cancer Risk Assessment location	Number of clinics reporting access to risk assessment tools (n=67)
In an exam room during the appointment	46
In other protected space in the clinic at time of appointment	44
Other location	0

- All clinics reported access to at least one location to access online cancer risk assessment tools
- 32 clinics reported access to cancer risk assessment tools in both the exam room during appointment and in other protected space at clinic during time of appointment

Question 2

What are some strategies your clinic has implemented to increase breast, cervical and colorectal cancer screening, as well as HPV vaccination?

Strategies	Number of clinics employing strategy (n=67)
Patient reminders	67
Provider reminders	67
Assessing provider level screening rates	62
Reducing barriers to accessing care	64
Patient navigation	53
Public education	65
Telehealth	38
Other*	2

*other responses: SBHC HPV vaccination QI project; mobile mammography van and inflatable colon with FIT kit distribution.

Question 2a.

Based on your evaluation, which of these strategies are most effective/successful in increasing cancer screening and HPV vaccination rates and why?

Strategies	Number of clinics selecting strategy (n=67)
Patient reminders	31
Public education	22
Provider reminder	21
Patient navigation	10
Reducing barriers to accessing care	8
Assessing provider level screening rates	1

- Clinics could report more than one strategy as most effective/successful
- Telehealth was a strategy list in question 2, but was not selected by any clinic
- One clinic mentioned morning huddle among medical staff was most effective/successful

Question 3

What are your clinic's greatest challenges to support individuals who need diagnostic follow-up after abnormal test results for breast, cervical and/or colorectal cancer screening?

Barriers	Number of clinics reporting each barrier (n=62)
Cost*	27
Travel	23
Transportation	22
Patient compliance	19
Specialist capacity	15
EMR/EHR capability	1
Inconsistent providers	1
Contacting patients	1

- Five clinics did not provide a response
- Clinics could report more than one greatest challenge
- *cost responses include the following keywords: cost, insurance coverage, and financial

Question 4

Does your clinic utilize tools or resources to engage patients and providers in conversation to support informed decision-making about cancer screening and/or HPV vaccination?

Clinical Service	Number of clinic reporting yes to the following:	
	Engaging in a conversation on informed decision making (n=67)	Employing tools or resources to aid conversation (n=67)
Breast Cancer Screening	67	57
Cervical Cancer Screening	67	57
Colorectal Cancer Screening	67	57
Prostate Cancer Screening	62	31
Lung Cancer Screening	61	40
HPV vaccination	67	61

Question 4- Description of Tools and Resources

- Examples of tools and resources to aid in informed decision making conversations:
 - Up To Date
 - United States Preventative Services Task Force
 - In-clinic testing
 - Electronic Health Records/Electronic Medical Records features
 - Azara, MyChart, CDSS
 - Literature/pamphlets/printed materials
 - Vaccine For Children (VFC)
 - New Mexico Immunization Coalition (NMIC)
 - National Clinical Guidelines/American Society for Colposcopy and Cervical Pathology guidelines/American College of Obstetricians and Gynecologists
 - Motivational interviewing
 - Morning huddles

Question 4- Comments; i.e., Challenges, Successes

- Getting patients to return for results (challenge)
- Getting people to diagnostic appointments (challenge)
- Insurance coverage (challenge)
- Financial obligation (challenge)
- Getting results from outside providers/offices (challenge)
- Parental perception to HPV vaccination (challenge)
- Community culture; reluctant due to myth of side effects (HPV vaccine) (challenge)
- The importance of Breast/Cervical Cancer Screening has been out for a long time which makes it easy for the providers to remember to speak to patients especially during their yearly physicals. (success)
- Printed materials are the most successful; providers can use them and then patients can take them home (success)
- Example from one clinic:
 - Challenge: For many of our patients, health screenings are not a priority because of their needs to address their daily living needs including where they are going to stay for the night and how they will get food.
 - Success: Providing incentives in the form of bus passes has been somewhat effective in engaging patients to complete health screenings.

Question 5

If your clinic employs Community Health Workers (CHWs), Community Health Representatives (CHRs), or Patient Navigators, which of the following functions or roles do they fulfill related to cancer?		
	Community Health Worker/Representative (n=67)	Patient Navigator (n=67)
Community Outreach	42	33
In-clinic patient education	29	30
Navigation to screening including reminder calls and tracking screen completion	35	24
Navigation to diagnostic services or cancer treatment	27	33
Other*	9	7

*other duties listed include assisting patients with transportation and applying for Medicare/Medicaid on behalf of patients

Question 5a.

- For any of the above tasks that are not performed by CHR/CHWs or PNs, what other clinic staff cover these roles/perform these tasks?
 - 29 clinics responded; answers include:
 - Medical assistant
 - Support staff
 - Director of nursing
 - Providers
 - Nurse(s)
 - Outreach and enrollment coordinator
 - Records clerk
 - Case manager
 - Medical director

Question 6

Do providers within your clinic utilize cancer Survivorship Care Plans as a tool for guiding healthcare decisions for individuals who have been diagnosed with cancer?

Responses	Number of Clinics choosing response
Yes	28
Receive, but do not use	0
Have not received	39

Clinics chose only one response

The 28 clinics responding “Yes” represent 3 organization; remaining 16 organization have not received survivorship care plans

Survey Review

- Strength
 - 100% survey response
 - Statewide coverage; clinics represented/located within 30/33 counties
 - Counties not covered by clinics: Union, Guadalupe, and Los Alamos
 - Repeatability; partnership with OPCRH and the yearly occurrence of the contract narrative, enables these questions to be asked again
- Weakness:
 - Little variability among responses within organizations
 - If an organization had multiple clinics, responses were mostly the same
 - Unable to confirm geographical differences in some responses