



CANCER PREVENTION & RESEARCH INSTITUTE OF TEXAS

Award ID:
PP150061

Project Title:
The C-SPAN Coalition: Colorectal Screening and Patient Navigation

Award Mechanism:
Evidence-Based Cancer Prevention Services - Colorectal Cancer Prevention Coalition

Principal Investigator:
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Entity:
The University of Texas Southwestern Medical Center

Lay Summary:

Need: Screening reduces colorectal cancer (CRC) incidence and mortality, but participation is low among the uninsured and underinsured, resulting in advanced stage at diagnosis and poor outcomes. As the third leading cause of cancer death in Texas, 9,000 cases will be diagnosed each year with treatment costs exceeding \$3.7 billion dollars annually. With a documented 21% screening adherence rate for Texas uninsured, there are approximately 200,000 men and women not up to date with CRC screening within the targeted twenty counties. Overall Project Strategy: A systematic CRC screening outreach strategy was developed and tested through two prior CPRIT Evidence Based Prevention Program awards (PP100039, PP120229) to increase screening completion among uninsured patients not up-to-date with screening at John Peter Smith Health System (JPS). The first grant supported the mailing of 2,080 screening invitations to complete either a home fecal immunochemical test (FIT) or a colonoscopy, with automated and personal phone reminders to promote screening and diagnostic follow up. Program results indicated: 1) 29% of patients receiving mailed outreach completed screening, and 2) Screening completion was twice as high for patients offered the simple, at home FIT compared to colonoscopy (33% vs. 14%). The second CPRIT grant underway at JPS offers eligible patients (N=8,565) CRC screening using identical mailed FIT invitation system and follow-up processes from the first grant. In the first program, UTSW-Moncrief Cancer Institute (UTSW-MCI) personnel managed the outreach for successful study completion, but to promote sustainability, program functions are now implemented by JPS staff. FIT response has been strong in the first year, 35% completing testing and a 13.5% FIT positivity rate. Results indicate that the systematic outreach FIT invitation strategy markedly increases screening completion among uninsured when applied to large, underserved populations. With the critical need in North Texas and building on the successful CRC screening programs, the proposed project will transition the current CRC screening program mail FIT screening invitation and provide follow-up to an estimated 174,000 underserved residents in 20 counties. A coalition for colorectal cancer screening and patient navigation (C-SPAN) will be developed by extending the current partnerships already in place with county leadership, hospitals and health care providers, a large number of whom participate in the UTSW-MCI breast cancer screening programs (PP100022, PP120097). New collaborative commitments from foundations and providers strengthen the ability to identify underserved patients and establish new provider partnerships assuring clinical follow-up care. All program

processes will be centralized at UTSW-MCI using new and current program staff, increasing the capacity to care for thousands of men and women needing services.

Specific Goals: Conduct an Evidence Based CRC Prevention Program among age-eligible uninsured and underinsured not up to date with screening across 20 counties with the following goals: Goal 1: Leveraging collaborative relationships established with current CPRIT Programs across 20 rural and underserved counties, expand a coalition of county partners to provide colorectal cancer screening services. Goal 2: Using successful, centralized cancer screening platforms already established at UTSW-MCI, invite (174,000) eligible patients to complete CRC screening using a home-based, fecal immunochemical test (FIT) with evidence-based follow-up. Goal 3: Provide a baseline evaluation of quality of colonoscopy services in rural areas by evaluating provider documentation compared to current standard of practice. Goal 4: Rigorously evaluate patient response to FIT testing by: a. determining the screening rate improvement after expanding screening outreach to target area, b. comparing rates of initial and repeat screening compliance, c. determining completion of diagnostic services for FIT positive screening, d. assessing increase in early stage cancer detection as well as system changes required to boost screening. Innovation: The outreach strategy and outcomes from two prior CPRIT programs will be utilized to serve nearly 174,000 adults across 20 counties, developing the knowledge and infrastructure needed to successfully impact CRC screening adherence, discovery of pre-cancerous polyps as well as cancers for a significant number of the Texas population. Significance and Impact: Potentially lifesaving screening invitations will be delivered to nearly 174,000 residents, and create a robust, sustainable CRC screening program to with the potential to markedly improve CRC outcomes for uninsured patients statewide. Statewide and nationally, the program will advance cancer prevention knowledge, and serve as a proven, replicable model for improving CRC screening for the uninsured.