



A quick look at tips, tools<mark>, a</mark>nd updates for CRC screening improvement

June 2021

Kudos to Standing Rock Service Unit...

for recognizing a need and developing a patient education tool with culturally-appropriate artwork and messaging for their target population!





QUOTE OF NOTE

from Michael Sapienza, Colorectal Cancer Alliance CEO, in his statement on the updated USPSTF Guidelines for CRC Screening: "This change will save thousands of lives. Lives of people who are just reaching the pinnacle of their careers, families and contributions to society. These are, in many cases, moms and dads of young children. The impact cannot be overstated."

Featured Resource

The world has changed.

Colorectal cancer risk has not.

At the start of the COVID-19 pandemic, colorectal cancer screenings dropped roughly 90% and diagnoses fell by 32%. By June 2020, this decline in screening put 18,000 people at risk for delayed or missed diagnoses and will lead to additional deaths from this preventable disease.

Your patients are waiting to hear from you NOW. Screening is safe, important and there are options.

- Sample CRC Risk Patient Letter
- Sample MyChart Message Copy

(https://www.ccalliance.org/colorectal-cancerinformation/resources-for-healthcare-professionals)

Milestones

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COPPER MILESTONE ACHIEVED

Cohort I (Tribal)

- ~Standing Rock Service Unit | Fort Yates
- ~Quentin Burdick Memorial Health Care Facility | Belcourt

Cohort 2

- ~Towner County Medical Center | Cando
- ~UND Family Practice | Bismarck

Upcoming Events

Provider Education

 June 25, 12 noon CT | Current Guidelines for Colorectal Cancer Screening
 Presenter: Jeff Hostetter, MD

News, etc.

New guidelines for colorectal cancer (CRC) screening were released on May 18, 2021, by the United States Preventive Services Task Force (USPSTF). The new guidelines lower the age to start colorectal cancer screening from 50 to 45. This will mean an additional 15 million people in the US will be eligible for screening.

This change to expand screening to persons ages 45-49 has implications for ScreeND participating clinics:

- Adjustments will be needed to CRC policies, standing orders, algorithms used to assess risk, provider reminder systems, patient reminder systems, patient education tools, report templates and more.
- CDC will be updating the program manuals to reflect the change in screening guidelines. Until that occurs, clinics
 participating in ScreeND will continue to follow the existing guidance in calculating clinic-level screening rates.
 Once the appropriate organizations issue new measurement specifications for the various CRC screening rate
 measures (UDS, HEDIS, GPRA, NQF, etc.), CDC will update its guidance as well.

ScreeND Contacts

Nikki Medalen, MS, BSN Quality Improvement Specialist nmedalen@qualityhealthnd.org 701.989.6236 Jon Gardner
Network Administrator
jgardner@qualityhealthnd.org
701.989.6237



41 36th Avenue NW | Minot, ND 58703 www.screend.org