PREVENTIVE HEALTH MEASURES
PRIORITY AREA

Program Evaluation of Projects
Awarded in 2008-2012

GOAL
To increase the number of individuals who are screened for breast, cervical, and colorectal cancer per screening guidelines and receive appropriate referral and follow-up services.

STRATEGIES

Increase awareness among underserved populations of the importance and availability of cancer screenings through targeted outreach and education.

Increase the capacity of providers to conduct screenings.

Increase adoption of system-level changes to enhance screening, tracking, and referral efforts.

INVESTMENT OVERVIEW

Total Amount Awarded $2,188,954
Cancer Prevention Amount $1,918,954
Amount Leveraged $5,017,269
Grants Awarded 37 TO Grantee Organizations 13
INVESTMENT BY STRATEGY

1ST STRATEGY:
Increase awareness among underserved populations of the importance and availability of cancer screenings through targeted outreach and education

Community Assessment:
$5,900
through 1 grant
- Interviews and surveys were conducted to
  (1) identify high-risk populations and/or geographic regions and
  (2) identify and assess community partners.

2ND STRATEGY:
Increase the capacity of providers to conduct screenings

Professional Training:
$34,093
through 2 grants

System Infrastructure and Screening Capacity:
$1,630,000
through 24 grants

Referral and Network System:
$66,133
through 3 grants

3RD STRATEGY:
Increase adoption of system-level changes to enhance screening, tracking, and referral efforts

Promote Research-Tested Interventions, Programs and Practices to Increase Adherence to Screening Guidelines:
$168,600
through 3 grants
OVERALL IMPACT

Service Reach (Education + Screening)

42,829 people

Environmental Reach (Outreach, Media, and Systems Change)

45,231 people

INDIVIDUAL LEVEL SCREENING & DIAGNOSIS

Breast Cancer
- 14,271 screening mammograms
- 148 BREAST CANCER DIAGNOSES

Cervical Cancer
- 10,627 pap tests
- 98 PRE-CANCER AND 16 CERVICAL CANCER DIAGNOSES

Colon Cancer
- 7,183 fecal occult blood tests
- 202 colonoscopies
- 11 COLON CANCER DIAGNOSES

ORGANIZATIONAL LEVEL- WHAT WORKED WELL

Increase screening capacity and reduce structural barriers (i.e., through mobile van, transportation vouchers and free screenings)

Investments in Electronic Patient/Provider Reminder Systems
**CHALLENGES**

- Some providers had limited data collection capabilities or lacked standardized tracking mechanisms, which made establishing baselines difficult.
- Implementation of preventive service guidelines was performed inconsistently and compliance with recommended screening guidelines was low among providers.
- Most of the grantees were referral agencies and not the provider of screening services which made it difficult to assess screening rates.
- Some providers were hesitant to expand screening for uninsured/underserved patients for cancer when there is limited or no access to treatment.

**LESSONS LEARNED**

- Helping organizations improve their reporting capabilities is an essential first step to evaluate program impact.
- Some local community partners needed support for direct services and did not have the infrastructure to appropriately implement and sustain evidence-based programs.
- The Foundation's funded analysis of late-stage cancer diagnoses conducted in 2010 has proven to be a valuable tool for community partners.
- Establishing relationships and building trust with community members were essential to support education and screening efforts.

**FUTURE DIRECTIONS**

- Health Foundation can continue to support projects to increase access to screening services in the most strategic and sustainable way.
- Health Foundation can explore standardizing reporting to include cancer stage diagnoses to assist with future evaluations of screening impact.
- Reducing barriers to increase provider compliance with recommended screening guidelines can have an impact on practice adoption.