



Recommendations

Accelerating What We Know Works in Cancer Screening and Care



*Consensus Recommendations from the
American Cancer Society National Consortium
for Cancer Screening and Care*

September 2021



Introduction

The *American Cancer Society National Consortium for Cancer Screening and Care* aims to accelerate, strengthen, and mobilize around sensible but bold, cancer screening and care activities as a collective national response to the COVID-19 pandemic's detrimental impact. Through strategic planning forums in the summer of 2021, the ACS National Consortium collaborated to identify actionable recommendations to accelerate our responses to long-standing and emerging barriers to cancer screening and care. If adopted widely, these recommendations will minimize the negative effects of the COVID-19 pandemic and move us forward as the nation reprioritizes cancer screening and care. This document summarizes the recommendations from those forums.

Recommendation: National Partnerships

Accelerate the collective action of partnerships, coalitions, and roundtables to influence the adoption of evidence-based cancer screening interventions and policies.

Strategies

- **Connect organizations and catalog resources.** Review the list of national partners to ensure diverse representation and perspectives. Continue prioritization of health equity and further the identifying and sharing of evidence-based and promising practices, policies, and strategies in a coordinated way.
- **Facilitate implementation of best practices tailored to community needs.** Make implementation guidance available and accessible to all. Facilitate the uptake of evidence-based practices and new research findings in clinical and community contexts.
- **Ensure sustainability of and collaboration across national roundtables.** Improve buy-in from members, stakeholders, and decision-makers to increase and diversify membership and funding.
- **Evaluate Impact.** Use top-down and bottom-up feedback for evaluation and course correction. Strengthen the literature around short- and long-term impacts of roundtable/coalition work on adoption of best practices in cancer prevention, screening, and care. Validate the ability of roundtables to drive implementation and discover innovative intervention approaches.

Recommendation: Coordinated Messaging

Accelerate a coordinated, innovative campaign to promote cancer screening as a public health priority.

Strategies

- **Create a coordinated campaign.** Deliver precision messaging on contemporary platforms that most effectively inform populations highly affected by cancer. Invite customization from participating organizations to meet the needs of those they serve. Learn and build from practices that resonated during the COVID-19 pandemic.
- **Meet communities where they are.** Recognize that communities receive health information and media through a variety of channels and utilize established and trusted message delivery options. Improve characterization of social contexts and develop language that better addresses social determinants of health affecting cancer outcomes.
- **Strive for well-informed decisions.** Encourage organizations to address health literacy and develop cancer messaging that is not just understandable but meaningful and usable.

Recommendation: Proven Programs

Accelerate screening efforts by supporting and expanding proven programs that effectively reach communities that are underrepresented and underserved.

Strategies

- **Sustain and grow patient navigation and community health worker programming.** Advocate for financial reimbursement of patient navigation programs within health systems and community health worker programs within communities. Further, sustain the services via workforce training and advocacy for appropriate payment options.
- **Increase implementation of effective patient navigation and community health worker models across communities most in need.** Improve support for community health workers and patient navigators to work with people who are underserved and/or most likely to have poor outcomes for all cancer types.
- **Build linkages between health systems care coordination and community outreach.** Promote more partnerships among health systems/providers and community agencies to

increase access to clinical services. Utilize community health workers as well as patient navigators to support these linkages and enhance the collective impact on patient outcomes across the care continuum.

- **Utilize cancer screening risk assessment strategies.** Promote universal access to combined screening strategies for individuals based on risk, and incorporate processes for collection, documentation, tracking, and monitoring of individual risk-based information.

Recommendation: Quality Measures

Accelerate the adoption of improved quality measures, accountability measures, and institutional goal-setting that prioritize equitable outcomes.

Strategies

- **National measures:** Propose and advocate for quality measures that better monitor on-time screening and follow-up care equally across populations.
- **National accreditation:** Encourage national standards for accreditation of screening that hold institutions accountable.
- **Health systems reporting:** Require health systems to report outcomes by key demographic and disparity factors (insurance status, race/ethnicity, sexual orientation, gender identification, etc.).
- **Electronic health records:** Encourage/develop the capacity to look at screening longitudinally over time (e.g., enhanced EHR tools). (Current measures do not show who is cycling in/out of being up-to-date.) Seek to configure clinical care systems to address social determinants of health.

Recommendation: Pandemic-Related Innovations

Accelerate innovations and interventions that better expand equitable access to cancer screening and care.

Strategies

- **Reframe the screening conversation.** Identify both new and persisting fears that lead to reluctance (procrastination of screening) in patient populations, and then tailor the communications approach to combat misinformation and decrease fears.

- **Increase access points for preventive care and promote remote screening options.** Expand cancer screening services to include addressing structural barriers to access screening (e.g., expanded clinic hours) and offer cancer screening services in non-traditional settings (e.g., retail, mobile van, at-home tests). Provide seamless navigation to the most appropriate resource in terms of patient-centricity and cost. Assess and improve the workflow of remote-to-in-person to understand the reimbursement and policy implications so that providers are incentivized to use the most seamless route.
- **Modify community tracing technology and staffing.** Take best practices from contact tracing and technology, including utilization of lay community navigators for cancer screening purposes.
- **Avoid the pitfalls of improved technology and innovations (e.g., broadband access, digital literacy, etc.).** Ensure that innovations and technology do not exacerbate disparities. Identify methods to improve screening and care that will benefit and support populations with health disparity.