

SCREEN **ND** FACT SHEET

Improving Breast and Cervical Cancer Screening Rates in North Dakota

Quality Health Associates of North Dakota (QHA) is partnering with North Dakota Health and Human Services (ND HHS) and North Dakota's primary care clinics to increase breast and cervical cancer screening rates with initial focus in primary care clinics or community health centers or areas of late-stage diagnosis.

Breast Cancer is the...

2nd most diagnosed cancer
AND
2nd leading cause of
CANCER-RELATED DEATHS
among women
in North Dakota.

Early detection and prevention saves lives...

BUT many women with breast cancer
DO NOT HAVE SYMPTOMS

HPV vaccines can prevent **2** known cervical cancer causing strains of HPV,
accounting for almost **90%** of cervical cancers

In Recent News

Data is trending towards increased incidences breast cancer in the 20-49 year age group, especially after 2016.

There have been in increasing incidences of stage 1 tumors due to the higher rates of young women getting tested sooner and being kept on close surveillance if high risk. This can be attributed to public health campaigns providing information about breast cancer risks and genetic testing.

Source: Xu S, Murtagh S, Han Y, Wan F, Toriola AT. Breast Cancer Incidence Among US Women Aged 20 to 49 Years by Race, Stage, and Hormone Receptor Status. *JAMA Netw Open.* 2024;7(1):e2353331. doi:10.1001/jamanetworkopen.2023.53331

QHA will assist participating clinics using the following strategies:



✓ Facilitate completion of a comprehensive readiness assessment



✓ Provide individual technical assistance
✓ Conduct site visits and coaching calls to assess progress, identify barriers, and develop mitigation strategies



✓ Guide the development of clinic-specific action plans for implementing at least two evidence-based interventions (EBIs) to address breast and cervical screening



✓ Advise clinic staff in leveraging their electronic health records (EHRs) to collect and report breast and cervical screening program measures



✓ Share resources, tools and materials

Why
SCREEN **ND**
matters



Often times, early cancers do not cause signs or symptoms








Nationally, cervical cancer is most prevalent in the 30-59 age group



Strong evidence suggests physical activity reduces risk of several cancers including breast cancer in post menopausal women

QHA is pleased to extend the milestone program developed under the ScreeND Colorectal Cancer Screening program and our ScreeND Breast and Cervical partners to recognize your facility's improvement efforts in breast and cervical screening. As a member of ScreeND, YOU get to decide how your facility makes improvement while gaining recognition in the process. We will provide education, technical assistance, and networking opportunities to support these efforts. Use this checklist to track your progress as you move through the program. These milestones are dependent on each other such that you cannot advance unless all requirements in previous milestone are met and current.

COPPER		<ul style="list-style-type: none"> <input type="checkbox"/> Signed commitment letter <input type="checkbox"/> Formed multidisciplinary innovation team <input type="checkbox"/> Completed Clinic Readiness Assessment <input type="checkbox"/> Completed introductory meeting <input type="checkbox"/> Submitted Action Plan and set goal for year 1 <input type="checkbox"/> Submitted baseline data
BRONZE		<ul style="list-style-type: none"> <input type="checkbox"/> Data submission is current, minimum 6 months of data <input type="checkbox"/> Initiated two (2) evidence-based interventions as defined in Action Plan <input type="checkbox"/> Submitted current clinic policy for Breast and Cervical Screening
SILVER		<ul style="list-style-type: none"> <input type="checkbox"/> Team members participated in scheduled coaching calls <input type="checkbox"/> Implemented at least two (2) evidence-based interventions specific to improving Breast and Cervical screening rates <input type="checkbox"/> Achieved 1st year goal for improving breast and cervical screening rate, minimum one year of data <input type="checkbox"/> Shared SCREEEND performance with Clinic Board or Leadership
GOLD		<ul style="list-style-type: none"> <input type="checkbox"/> Reviewed and updated Action Plan annually <input type="checkbox"/> Submitted at least one success story or lesson learned related to the interventions selected <input type="checkbox"/> Achieved 2nd year goal for improving breast and cervical screening rate, minimum 18 months of data <input type="checkbox"/> Distributed clinician level data to medical staff
PLATINUM		<ul style="list-style-type: none"> <input type="checkbox"/> Achieved 3rd year goal for improving breast and cervical screening rate, minimum 24 months of data <input type="checkbox"/> Used EHR to fullest potential to sustain EBIs such as flagging for follow-up, tracking screening results, pulling reports, generating and sending reminders to both providers and patients

Helpful Tips...

- Small change may yield significant results. In fact, beginning with small steps is the best way to make lasting improvements.
- Evidence-based interventions, such as using informatics within your EHR, developing a tracking system, and pre-visit prep have proven to have maximum impact.
- Don't wait to share your final success with us. We want to acknowledge the small cycles of change your team is working on to achieve the ultimate goal.

REMEMBER THAT QUALITY IS EVERYONE'S RESPONSIBILITY.