

Strategies for Successful Implementation of Colon Cancer Screening in Kentucky

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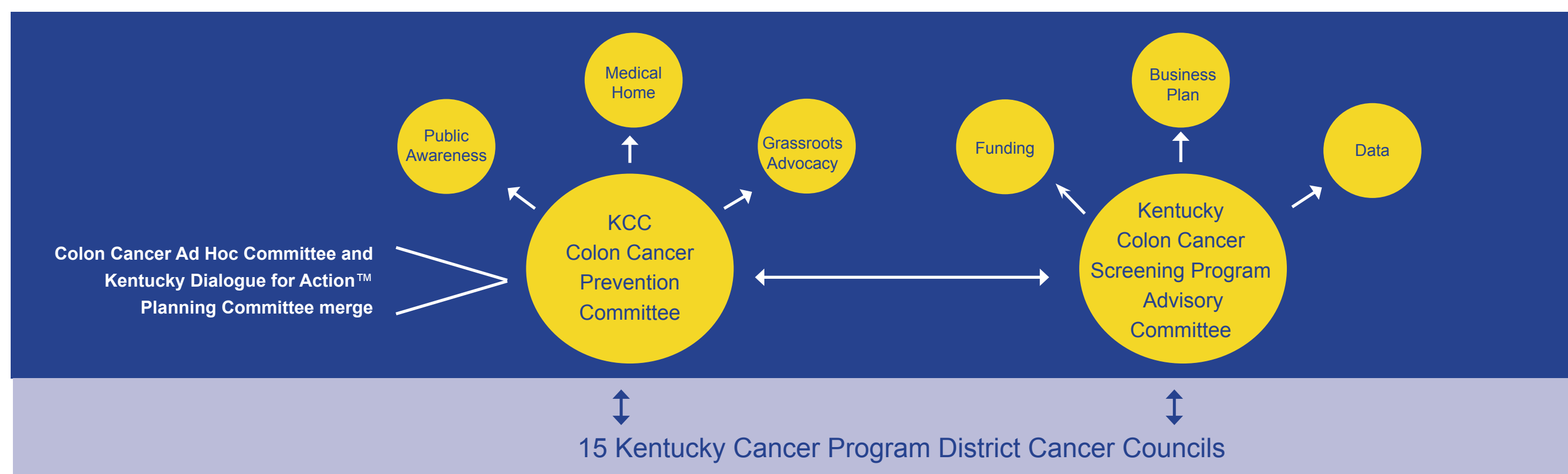


INTRODUCTION

Kentucky has made great strides and had several successes with collaborative efforts to increase colon cancer screening. KRS (Kentucky Revised Statute) 214.540-544 established a colon cancer screening program for uninsured people age 50 to 64. KRS 304.17A-257 required insurance companies to cover colon cancer screening. The Kentucky Colon Cancer Screening Program Advisory Committee was formed as part of KRS 214.540-544.

METHODS

- ▶ Merged the Kentucky Cancer Consortium (KCC) Colon Cancer Ad Hoc Committee and the Kentucky Dialogue for Action™ Planning Committee into ONE entity: the KCC Colon Cancer Prevention Committee.
- ▶ Facilitated consensus to consolidate priority recommendations from Kentucky's Dialogue for Action™ into the following:
 - ▶ Create a statewide awareness campaign with a consistent, simple message on colon cancer screening.
 - ▶ Develop a grassroots advocacy campaign on colon cancer screening to fund the state program. Campaign directed at policymakers.
 - ▶ Develop a strategy to encourage medical homes to implement colon cancer screening recommendations as part of office policies.
- ▶ Developed subcommittees within the Colon Cancer Prevention Committee based on Kentucky Dialogue for Action™ priority recommendations.



- ▶ Met with key leadership from the Kentucky Colon Cancer Screening Program Advisory Committee and the Colon Cancer Prevention Committee to facilitate defining the roles of each committee, thereby ensuring coordination and reducing duplication of efforts.
- ▶ Communicated regularly with the Kentucky Cancer Program (regional comprehensive cancer control organization) to enhance regional and state collaboration through the Kentucky Cancer Program's existing 15 District Cancer Councils.

RESULTS

- ▶ Leadership of the Colon Cancer Prevention Committee and the Kentucky Colon Cancer Screening Program Advisory Committee embraced the value of coordinating efforts. Each committee focused on specific objectives and communicated them to the other committee.

- ▶ Colon Cancer Prevention Committee maintains more than 30 active members who meet monthly.
- ▶ Each subcommittee of the Colon Cancer Prevention Committee has its own action plan and timeline.
- ▶ Colon Cancer Prevention Committee revised the colon cancer early detection section of the Kentucky Cancer Action Plan.
- ▶ Kentucky Cancer Program District Cancer Councils adopted colon cancer prevention and early detection as a priority and developed education and outreach plans. The plans will be implemented beginning in Fall 2009.
- ▶ New partners were welcomed to the table and quickly found key roles to play to achieve win-win outcomes.

▶ Collaborative and in-kind efforts necessitated by establishment of the unfunded screening program deepened partners' investments and commitments. This process set a foundation for continued collaboration once funding opportunities became available.

▶ Sigmoidoscopy/colonoscopy screening rates have increased from 43.9% in 2002 to 58.6% in 2006 (BRFSS).

CONCLUSIONS

A strong network of entities sharing similar goals is key to increasing colon cancer screening. Comprehensive Cancer Control staff can play a crucial role in maintaining this network by facilitating mutually productive interactions and clear communication on multiple levels among partners. This can be done through one-on-one conversations, small meetings with committee leadership, and large committee meetings.

KEYS TO SUCCESS

Successful efforts have effective committees behind them. Effective committees:

- ▶ Form around a specific project.
- ▶ Fill an identified gap.
- ▶ LISTEN more than TALK to partners.
- ▶ Employ group discussion over lecture.
- ▶ Connect key partner organizations that are working individually on the same vision.
- ▶ Bring partners together regularly in a neutral location.
- ▶ Clearly define roles and expectations early in the formation of the group.
- ▶ Address conflicts head on. This may be uncomfortable initially but it builds long-term trust among partners.

TIMELINE

2005-2006 16 colon cancer regional projects. Statewide primary care provider toolkit distributed.	July 2007-June 2008 KCC Colon Cancer Ad Hoc Committee formed. Physician leader trainings. Awareness TV show. Developed infrastructure for state screening program.	April 2008 KRS 214.540-544 and KRS 304.17A-257 signed into law.	June 2008 Get Behind Colon Cancer Screening for Kentuckians: A Dialogue for Action™	August 2008 KCC Colon Cancer Ad Hoc Committee and the Kentucky Dialogue for Action™ Planning Committee merged into the KCC Colon Cancer Prevention Committee.
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