



**MCA Cancer Plan Revision: Detection Workgroup**

**Topic:** final meeting to identify objectives and strategies recommendations  
**June 30, 2016 3:00 – 4:00 p.m.**

**Participants in person:** Matt Flory (co-chair), Anne Walaszek (co-chair), Brittany Dahlin, Michael Parks, Maggie Rothstein (staff liaison)

**Participants by phone:** Barb Kunz, Lisa Belak, Anne Snowden

<p><b>Agenda Topic</b></p>	<p><b>Key Points Raised</b></p>	<p><b>Next Steps</b></p>
<p><b>Welcome and Introductions</b></p>	<p>This meeting will focus on finalizing objectives/strategies to recommend to the steering committee.</p>	<p><b>Deliverables:</b> We will submit the final 4-6 objectives and strategies, of these we will be prioritizing the top 3 strategies for the Steering Committees review July 21.</p>
<p><b>Review Draft Objectives/ Strategies</b></p>	<p> <b>1) Alignment</b>  <b>2) Health Equity</b>  <b>3) Policy, Systems, and Environmental (PSE) Change</b> </p>	

	<p><b>Objective 1: Increase comprehensive screening across breast, cervical and colorectal cancer in alignment with existing evidence-based frameworks.</b></p> <ul style="list-style-type: none"> <li>● Strategy 1: Identify and disseminate tools and resources based on evidence-based resources (e.g. CDC Community Guide and National Comprehensive Cancer Network resources).</li> <li>● Strategy 2: Develop and disseminate case studies and share examples of effectively implemented evidence-based practices and strategies used by Minnesota stakeholders to increase cancer screening.</li> <li>● Strategy 3: Encourage Minnesota stakeholders to partner with community organizations to develop targeted and tailored cancer screening messaging to reduce disparities.</li> <li>● Strategy 4: Pursue opportunities to expand current data practices (e.g. Minnesota Community Measurement) to reflect colorectal cancer measure to include African Americans and American Indians starting screening age 45.</li> <li>● Strategy 5: Expand screening and diagnostic options for the uninsured and the underinsured.</li> </ul>	<p><b>Recommend to the Steering Committee July 21:</b></p> <ul style="list-style-type: none"> <li>● Strategy 3: Encourage Minnesota stakeholders to partner with community organizations to develop targeted and tailored cancer screening messaging to reduce disparities.</li> <li>Strategy 4: Pursue opportunities to expand current data</li> </ul>
	<p><b>Objective 2: Support the development of evidence-based lung cancer screening programs.</b></p> <ul style="list-style-type: none"> <li>● Strategy 1: Support appropriate risk stratification by seeking improvements to data collection to capture the number of pack years that individuals have smoked.</li> <li>● Strategy 2: Partner with Minnesota stakeholders (e.g. ICSI) to consider whether the current definition accurately reflects the risk level of African Americans and American Indians.</li> <li>● Strategy 3: Partner with Minnesota stakeholders (e.g. ICSI) to seek consensus on appropriate follow-up screening intervals after a positive test.</li> <li>● Strategy 4: Identify and partner with Minnesota lung cancer screening programs to ensure that existing cessation counseling resources are offered to all current smokers in conjunction with screening services.</li> </ul>	

	<p><b>Objective 3: Develop effective communication tools and resources to support shared decision-making opportunities on cancer screening.</b></p> <ul style="list-style-type: none"> <li>● Strategy 1: Engage Minnesota stakeholders to develop and/or provide feedback on effective, culturally tailored resources and/or tools to be utilized within community and health systems.</li> <li>● Strategy 2: Encourage providers to recommend more than one approved colorectal cancer screening option.</li> <li>● Strategy 3: Encourage consistent messaging on appropriate age for women to begin breast cancer screening based on personal, family history, genetic-risk and/or relevant risk factors.</li> <li>● Strategy 4: Encourage consistent messaging about the benefits and risks of lung cancer screening.</li> <li>● Strategy 5: Encourage patients and clinicians to discuss and capture family history at each clinic visit including to determine if genetic testing could provide clinical value in cancer screening decisions.</li> </ul>	<p><b>Recommend to the Steering Committee July 21:</b></p> <ul style="list-style-type: none"> <li>● Strategy 3: Encourage consistent messaging on appropriate age for women to begin breast cancer screening based on personal, family history, genetic-risk and/or relevant risk factors.</li> </ul>
	<p><b>Objective 4: Increase/strengthen partnerships to integrate community health workers (CHW) within community-based organizations to educate and engage individuals who are less likely to be screened.</b></p> <ul style="list-style-type: none"> <li>● Strategy 1: Increase accessibility, affordability and availability for community members to receive CHW certification by strengthening partnerships (e.g. MN Community Health Worker Alliance; MCTC; tribal colleges; MNSCU).</li> <li>● Strategy 2: Increase the consistency and quality of cancer-specific knowledge of CHW and other allied community leaders through the delivery of the Cancer In Your Community curriculum.</li> <li>● Strategy 3: Support payment reform (i.e. third party billing) and reinforce public policies to increase training opportunities, compensation and effective deployment of community health workers.</li> </ul>	<p><b>Recommend to the Steering Committee July 21:</b></p> <ul style="list-style-type: none"> <li>● Strategy 3: Support payment reform (i.e. third party billing) and reinforce public policies to increase training opportunities, compensation and effective deployment of community health workers.</li> </ul>

	<ul style="list-style-type: none"> <li>Strategy 4: Develop strategies to build community partnerships to reduce structural barriers to cancer screening (e.g. mobile mammography; evidence-based stool test distribution programs).</li> </ul>																																																	
	<p><b>Objective 5: Implement evidence-based HPV vaccination and screening program within at-risk populations.</b></p> <ul style="list-style-type: none"> <li>Strategy 1: Implement evidence-based HPV vaccination and screening program within correctional populations including: <ul style="list-style-type: none"> <li>implement a HPV vaccination program within adolescents with correctional system contact, and</li> <li>implement cancer screening programs within correctional facilities.</li> </ul> </li> <li>Strategy 2: Encourage consistent messaging on appropriate age to begin HPV vaccination and cervical cancer screening.</li> </ul>																																																	
<p><b>Vote on top 3 strategies</b></p>	<table border="1" data-bbox="420 816 1207 1118"> <thead> <tr> <th colspan="6">Votes</th> </tr> <tr> <th></th> <th colspan="5">Strategy</th> </tr> <tr> <th>Objective</th> <th>1.</th> <th>2.</th> <th>3.</th> <th>4.</th> <th>5.</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>1</td> <td>1</td> <td>4</td> <td>2</td> <td>3</td> </tr> <tr> <td>2</td> <td>2</td> <td>0</td> <td>0</td> <td>2</td> <td>n/a</td> </tr> <tr> <td>3</td> <td>3</td> <td>4</td> <td>4</td> <td>1</td> <td>2</td> </tr> <tr> <td>4</td> <td>2</td> <td>2</td> <td>4</td> <td>0</td> <td>n/a</td> </tr> <tr> <td>5</td> <td>3</td> <td>0</td> <td>n/a</td> <td>n/a</td> <td>n/a</td> </tr> </tbody> </table>	Votes							Strategy					Objective	1.	2.	3.	4.	5.	1	1	1	4	2	3	2	2	0	0	2	n/a	3	3	4	4	1	2	4	2	2	4	0	n/a	5	3	0	n/a	n/a	n/a	<p><b>Agreement was made to submit:</b></p> <ul style="list-style-type: none"> <li>Objective 1, strategy 3</li> <li>Objective 3, strategy 3</li> <li>Objective 4, strategy 3</li> </ul> <p>With a 4-way tie; Objective 3, strategy 2 was decided to not be prioritize for the July 21 meeting due to its current high engagement with stakeholders.</p>
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<p><b>Cross-cutting issues</b></p>	<ul style="list-style-type: none"> <li>Genetics/Genomics services</li> <li>Transportation</li> <li>Shared Decision Making</li> </ul>																																																	
<p><b>Wrap-up</b></p>	<p><b>Thank you everyone for your active participation in this process.</b></p>	<p><b>The 3 top priorities will be presented to the Steering Committee July 21 and the other objectives and strategies will be put into the revolving 10 year-year plan.</b></p>																																																