



minnesota cancer alliance summit

2026 | *the power of collaboration*

February 26, 2026

McNamara Alumni Center

Minneapolis, MN



Breakout Session #2

University Hall

February 25, 2026

McNamara Alumni Center



Community-Based Strategies to Expand Colorectal Cancer Screening

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Financial Disclosure Statement

- Amna Hussein, MBS received a grant from Exact Sciences
- Katie Verhulst, MPH received a grant from Exact Sciences and Boston Scientific
- There are no other relevant financial disclosures for this session.



Community-Based Strategies to Expand Colorectal Cancer Screening

Organizations:

Community-University Health Care Center (CUHCC), U of MN
Fairview
Masonic Cancer Center, University of Minnesota
MNGI Digestive Health



One Shared Mission



WELLNESS ON THE ROAD
MOBILE HEALTH INITIATIVE



Masonic Cancer Center
UNIVERSITY OF MINNESOTA



Objectives

1. Learn about four distinct programs in Minnesota that use community- and clinic-based approaches to address disparities in colorectal cancer screening.
2. Understand how partnerships, patient navigation, education, and supportive services are used to reduce barriers to colorectal cancer screening, particularly for underserved and uninsured populations.



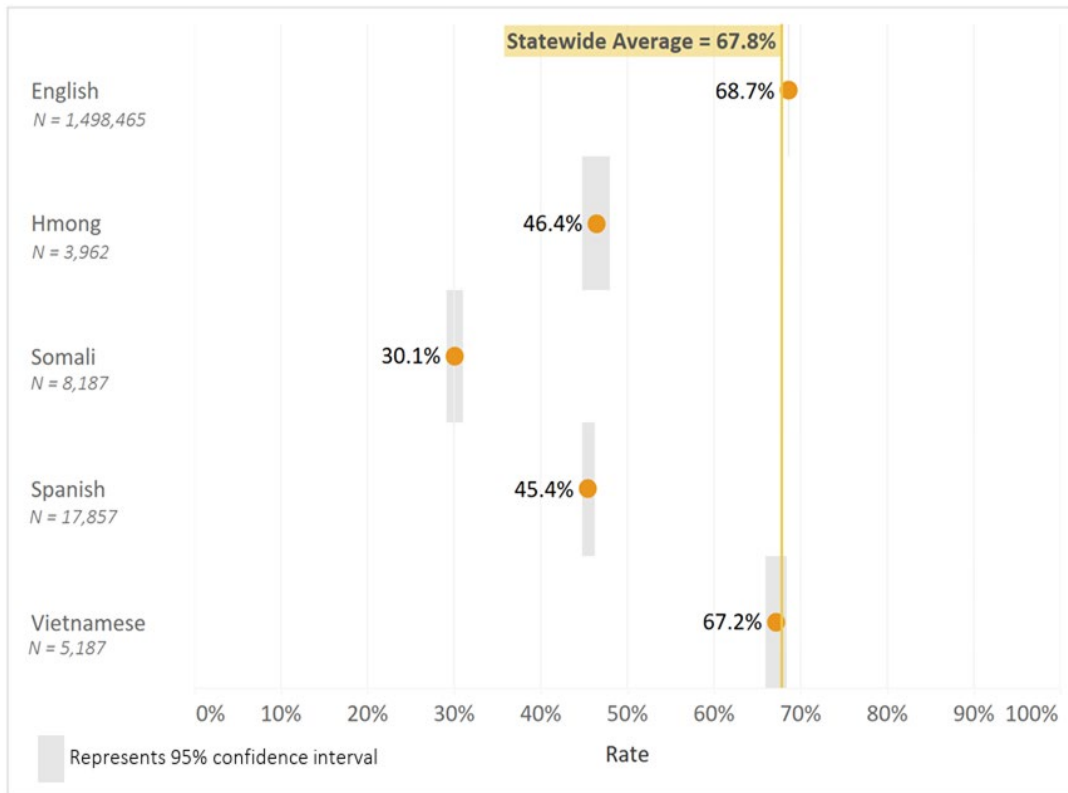
Colorectal Cancer in Minnesota

- Colorectal cancer (CRC) remains one of the most commonly diagnosed cancers in Minnesota.
- CRC is the **third** leading cause of cancer-related deaths in Minnesota.
- Screening can **prevent** CRC and **detect it early** when most treatable.
- Despite available screening options, not everyone has equal access.
- Barriers extend beyond awareness and include cost, navigation challenges, trust, and access to follow-up care.

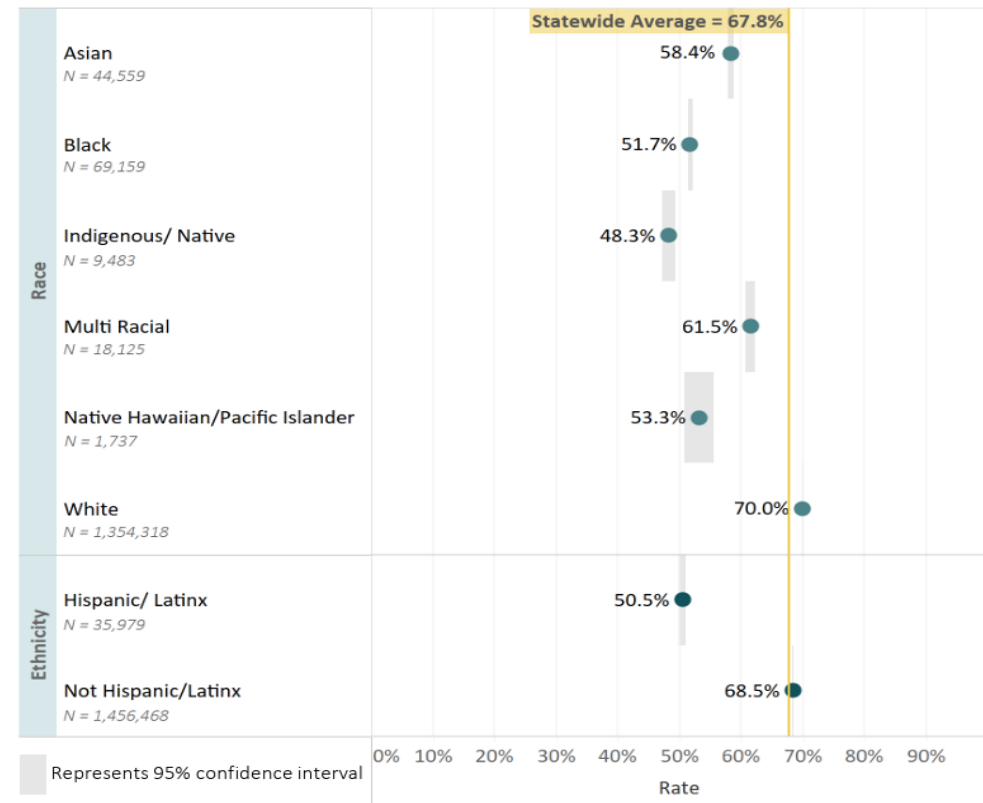


Colorectal Cancer (CRC) in Minnesota

CRC Screening Rates by Preferred Language



CRC Screening Rates by Race/Ethnicity





COMMUNITY-UNIVERSITY
HEALTH CARE CENTER

UNIVERSITY OF MINNESOTA

Strengthening Colorectal Cancer Screening in Community Health



Who We Are



Lan Luu, MD, MPH

Internal Medicine / Pediatrics, Medical Director, Lab Director CUHCC

Assistant Professor, Department of Medicine University of Minnesota



Natalie Marker, MARCH, CPHQ

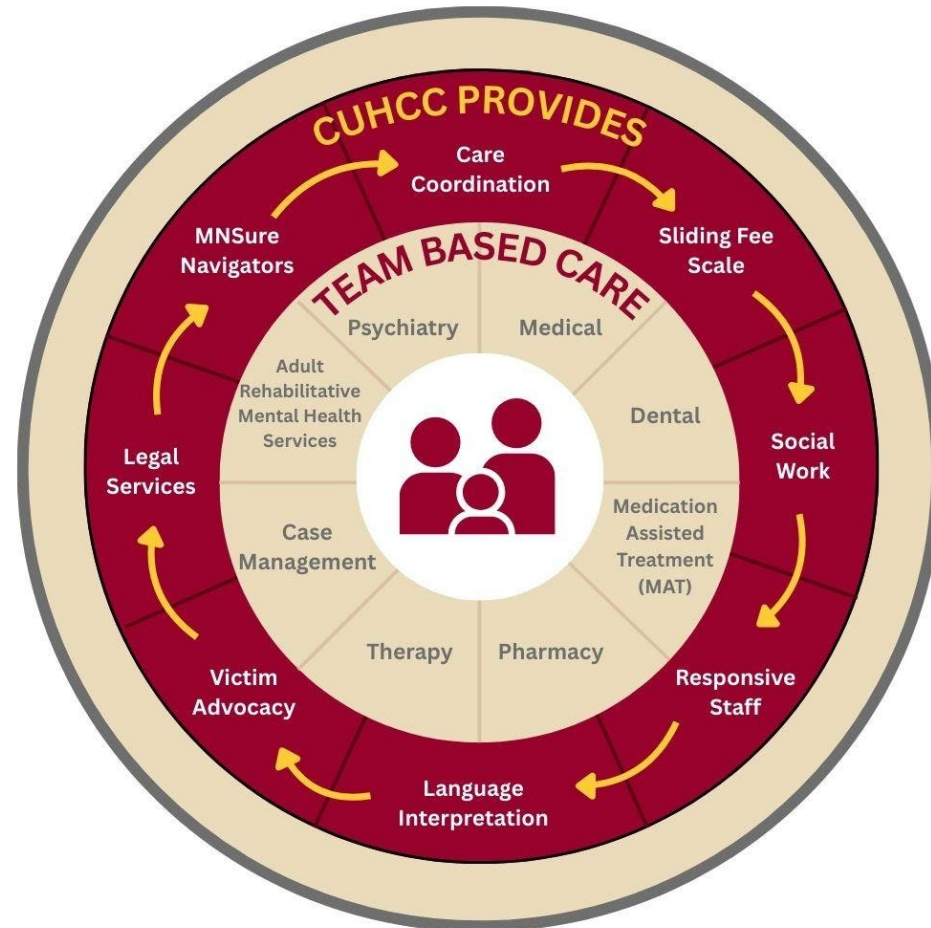
Quality Director CUHCC

We have no disclosures.



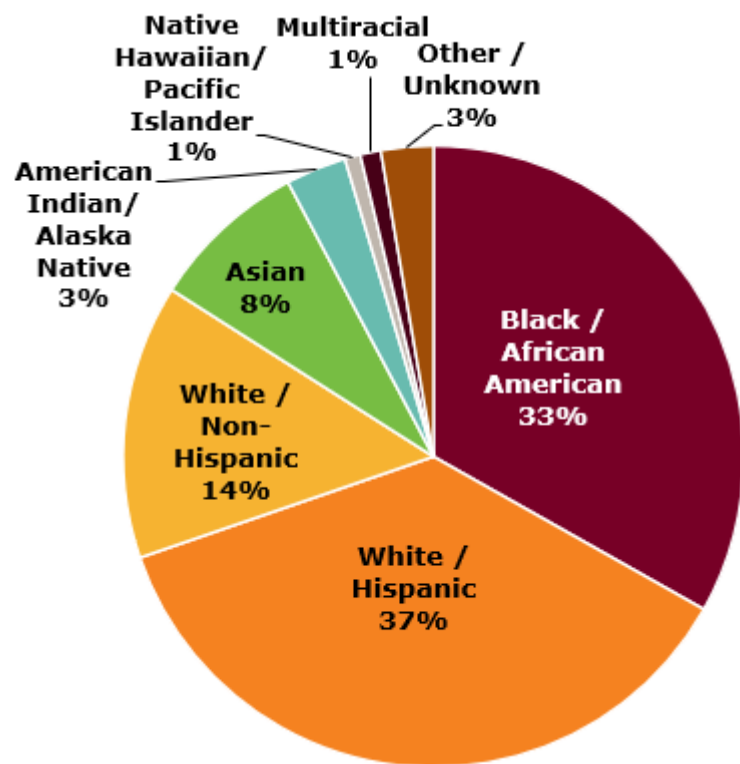
About CUHCC

- CUHCC = Community-University Health Care Center
- University of Minnesota
- A Federally Qualified Health Care Center (FQHC)
- Founded in 1966
- Phillips Neighborhood in Minneapolis
- Trained 185 students and residents in 2024.



CRC Risk for Who We Serve

Race and Ethnicity CUHCC Data UDS, 2024



Certain communities are at higher risk.

- American Indian and Alaska Native people have the highest rates of colorectal cancer in the US.
- Black individuals have the second-highest rates of colorectal cancer and are most likely to be diagnosed later, when the cancer has spread to other parts of the body.

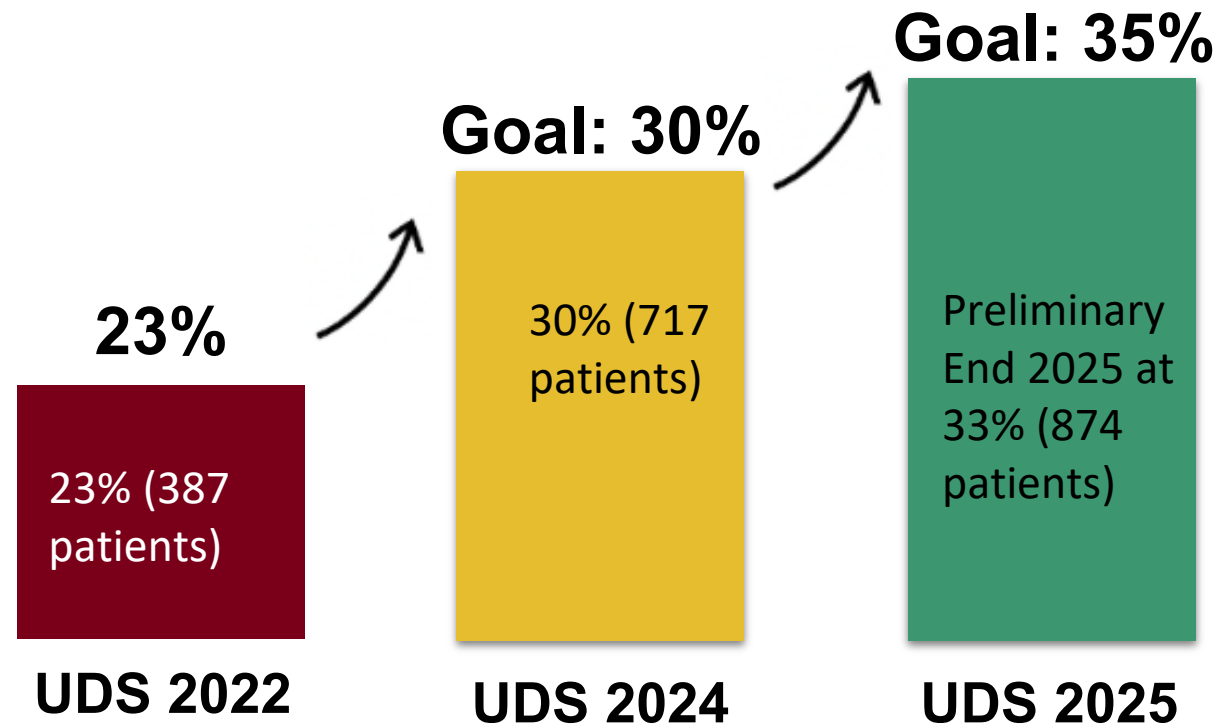
Uniform Data System (UDS)
Health Resources & Service Administration

REFERENCE: 2025 <https://www.cancer.org/cancer/types/colon-rectal-cancer/prevention-infographic.html>



Defining Project Scope

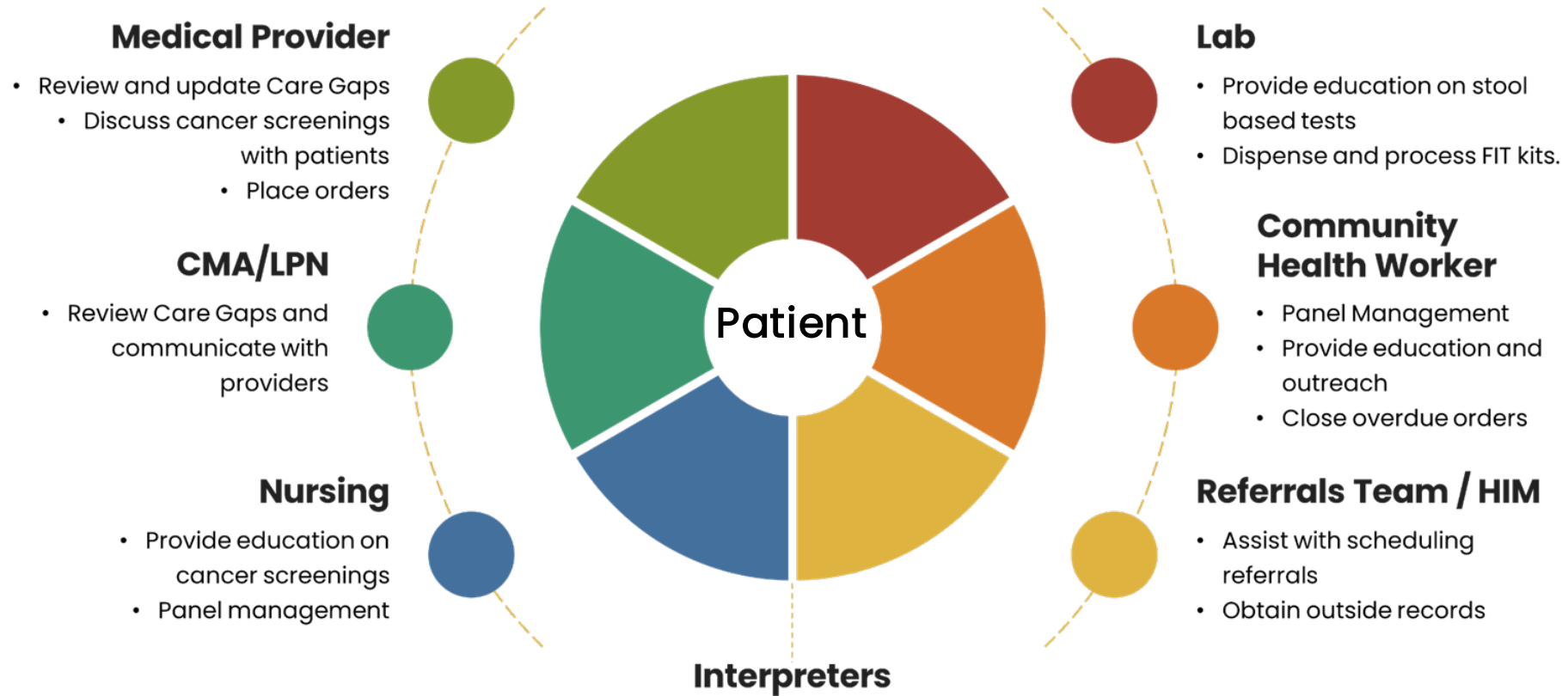
Original SMART Goal: CUHCC will increase colon cancer screening from 23% (UDS 2022) to 30% by 12/31/2024, in order to identify colon cancer in the early stages and enable timely treatment to reduce preventable deaths.



NOTE: change to 45+ denominator in 2023.



Clinical Team for Success



Learning More From Patients

GAPS



- Education of importance of screening
- Options for screening

INTERVENTIONS

March 2024

Communications team made a board for the CUHCC lobby

June 2024

Fecal Immunochemical Test (FIT) materials updated and launched 10/2024 through lab

October 2024

CHW Intern conducted lobby educational about cancer screenings

Ongoing

CHWs calling for referrals and stool kit return



Referrals

GAP



- **305** referrals for colonoscopies placed
- Only **28.5%** completed in 2023

INTERVENTIONS

July 2024

Referrals workflow revised to close the loop on colonoscopy orders

August 2024

CHWs started working a “closed” referral panel for mammograms and colonoscopies

September 2024

Referrals team will now close referrals after 3 months



Expanding Screening Options

GAP



- **Need** to expand colon cancer screening options to reach more patients

INTERVENTIONS

June 2024

Developed partnership with MNGI Digestive Health for free colonoscopies for uninsured

October 2024

Launched Cologuard

2025

Understanding and working through barriers of Cologuard to resolve with CUHCC staff and Exact Science.



Panel Management by CHWs

GAP



- **No** outreach to patient who are due for CRC screening

INTERVENTIONS

- Serve as panel manager for colorectal cancer screening
- Close out overdue referrals for colonoscopies
- Recall on cologuard
- Help patients with barriers to cancer screening
- Provide education on cancer screenings
- Assist providers outreach patients with barriers to completing cancer screenings



Team Communications

GAP



- **No routine** discussion about CRC screening

INTERVENTIONS

- Medical Directors CRC on the agenda for medical provider meetings / newsletters.
- Monthly Operations and Clinical meetings.
- Monthly quality newsletter updates on the measurement and improvement project.
- Started a physical board in the lunchroom hallway.
- Ongoing team training / reminders.



Patient Story

One patient was referred for a colonoscopy for the last several years.

We found out the patient never completed it, due to transportation issues.

The CHW helped troubleshoot options.

The patient was able to get the colonoscopy completed.



Not patient, stock Image



Summary

CUHCC's Summary



- Centering patient voices
- Offering more colorectal cancer screening options to reduce barriers
- Closing the loop on referrals
- Leveraging trusted team members
- Continuous improvement through data and teamwork



Fairview Colonoscopy Screening Program

Elizabeth Francois

**Regional Nurse Manager Endoscopy Fairview Health Services M Health Fairview
Southdale and Ridges**

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Francisco Ramirez

**Supervisor of Community Education & Outreach
Fairview Community Advancement**

Francisco.Ramirez@fairview.org



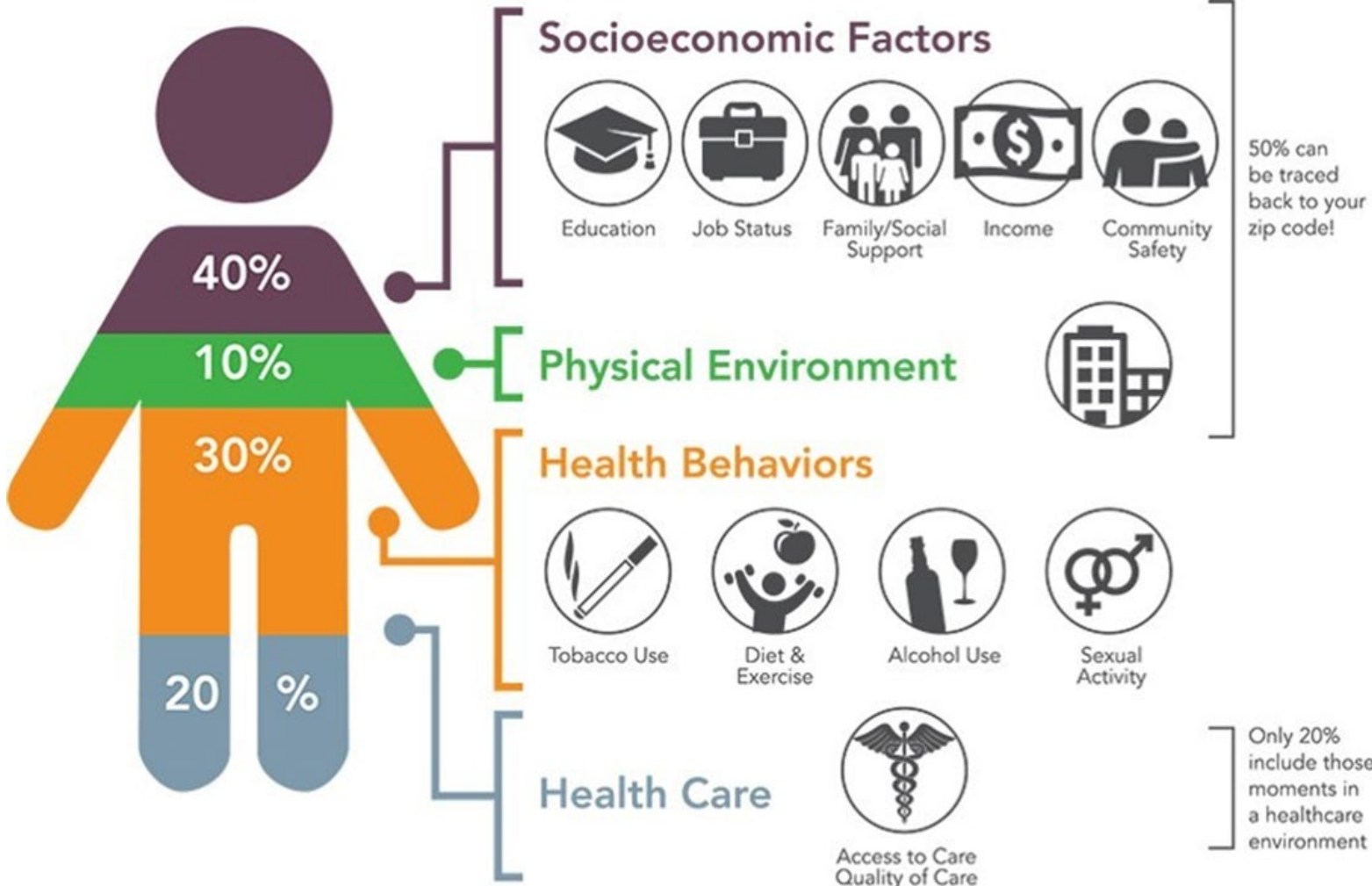
Using data to identify community needs

2012 Fairview Southdale Hospital Community Health Needs Assessment

- **Data collected and analyzed to determine top health needs**
 - FSH Service Area: Edina, Richfield, Bloomington, Eden Prairie
- **Assessment identified high level of need within Latino community**
 - Diabetes, heart disease, obesity
 - Lack of resources to maintain or improve health
 - Lack of trust in healthcare system
 - Felt disrespected based on cultural differences when seeking out care



Social Determinants of Health



Why Colorectal Cancer prevention in the BIPOC Community?

BIPOC Communities at risk:

- Obesity, diabetes
- More likely to have advanced stage colon cancer or larger tumor when disease is discovered
- Second most commonly diagnosed cancer in both men and women

Barriers:

- Embarrassment, pride and fear about cancer
- Uninsured, underinsured
- Fear of revealing undocumented immigration status
- Unable to take time off from work



GOAL: Increase community knowledge on colorectal cancer prevention and connect individuals to cancer screenings through culturally specific outreach, education, and support.

- Build relationships and trust with our diverse Communities and Fairview Health Services
- Conduct community education and outreach about colorectal cancer prevention
- Provide free colonoscopies to our Priority Communities



Program Criteria

- **Have limited or no medical insurance**
- **Live anywhere in Minnesota**
- **Age 45 +**
- **Screening**
- **Colonoscopy only**

*“Porque decir mañana puede afectar
su
salud, olvidemos el mañana y
hagamoslo
hoy.”*

*“Because waiting until tomorrow can
affect
your health, forget tomorrow and
let’s do it
today.”*



Key Partnerships

- **Fairview Southdale Hospital**

In spring 2014, Fairview Southdale Hospital's oncology service line partnered with community health to provide free colonoscopies for uninsured individuals.

- **Fairview Ridges and St. John's Hospitals**

The initiative was expanded to include Fairview Ridges oncology in 2015 and St. John's Hospital in 2023

- **Physicians**

More than three dozen physicians at those hospitals have donated their time for colonoscopy procedures.

- **UMP Physicians, American Cancer Society, St. Mary's Clinics, MDH, SAGE, MNGI, Community, Clinics and the Mexican Consulate**

We started with these great partnerships in 2014, and they remain an important part of our program.

- **Community Health Workers**



Results: 2014 - 2025

- **1000+** attended presentations every year
- **516** patients received Colonoscopies
 - 2014: **13**
 - 2015: **32**
 - 2016: **46**
 - 2017: **54**
 - 2018: **60**
 - 2019: **30**
 - 2022: **51**
 - 2023: **59**
 - 2024: **78**
 - 2025: **93**



Mobile Colorectal Cancer Community Screening Program

Amna Hussein, MBS

Community Outreach and Engagement Manager
Masonic Cancer Center, University of Minnesota

Katie Verhulst, MPH

Community Health and Engagement Coordinator
Masonic Cancer Center, University of Minnesota



Financial Disclosures

Grant/Research Support:

- Exact Sciences Funding Opportunities for CRC Screening Uptake Strategies (FOCUS) Grant, Awarded Fall 2024
- University of Minnesota Sustainable Development Grant (SDG), Awarded Spring 2025
- Boston Scientific Foundation Health Program Grant, Awarded Fall 2025



Mission Statements

Masonic Cancer Center, University of Minnesota

To reduce the burden of cancer in Minnesota by engaging communities and providing them access to knowledge and information about cancer prevention, treatment, survivorship, and clinical research opportunities.

University of Minnesota Mobile Health Initiative

To improve access to care and health outcomes for people affected by social injustice through mobile healthcare in partnership with Minnesota communities.



Mobile CRC Community Screening Program Team

Medical/Administrative Leaders

Kiara Ellis, MSW
Administrative Director

Shahnaz Sultan, MD,
MHS, AGAF
GI Champion

Shahid Jaffer, MD
Mobile Research
Director

Jonathan Kirsch, MD,
SFHM
Mobile Clinical Director

Program Management

Amna Hussein, MBS
Program Lead

Katie Verhulst, MPH
Navigation Lead

Operations/Mobile Clinic Coordination

Erin Nakagaki, BS
Coordinator

Maggie Eckerstorfer, BA
Operations Lead

Patient Navigation

Patty Beckmann, RN
Nurse Navigator

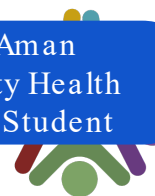
Niya Basha, BS
Community Health
Worker

Trainees

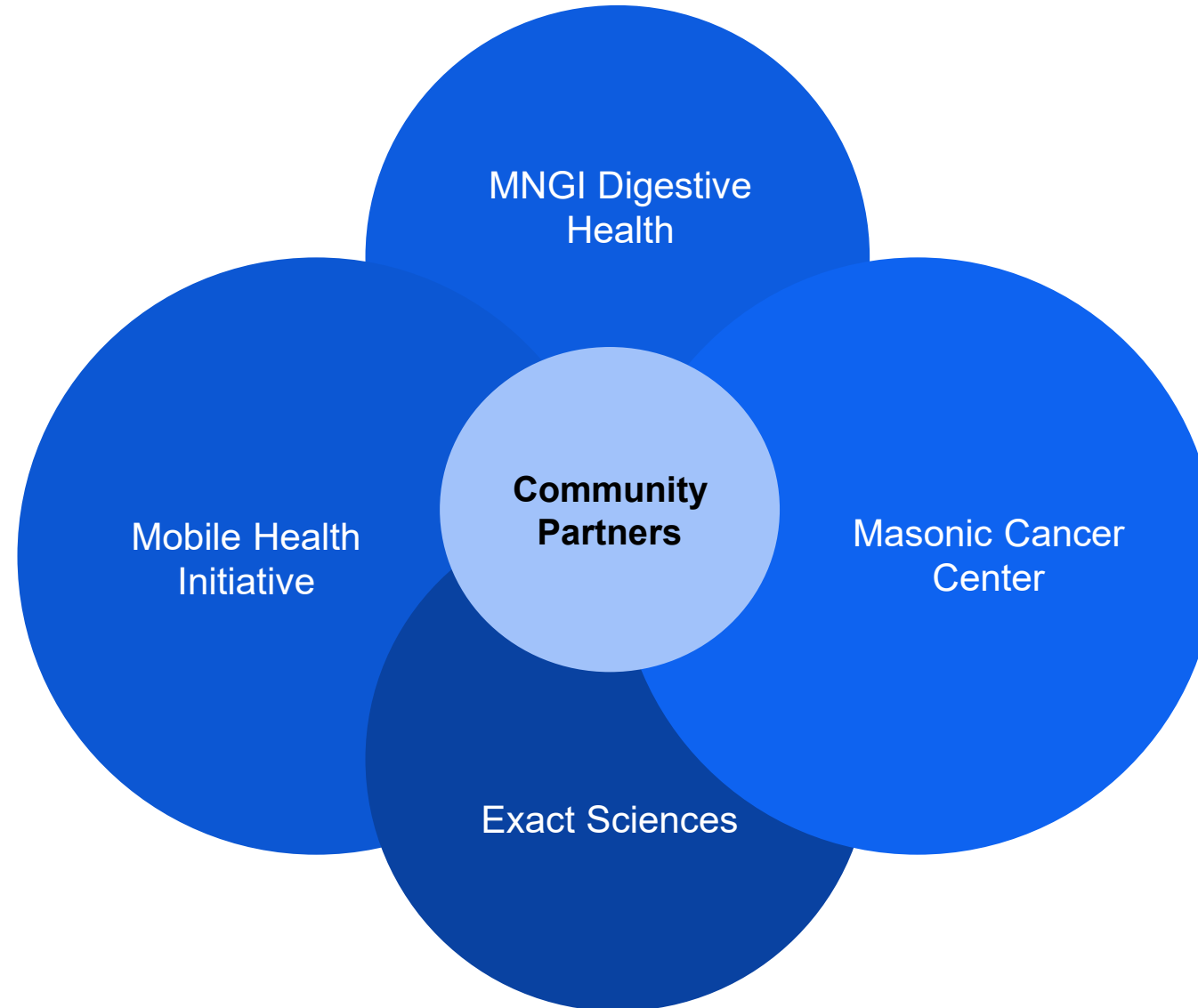
Ericka Lara Ovares, MD,
MPH, CPPM
Resident

Alexandra Wolner, BA
Medical Student

Ariam Aman
Community Health
Outreach Student



Power of Partnerships in Expanding Access



Strategic Industry and Clinical Partners

Exact Sciences

- Provides Cologuard kits
 - Donates Cologuard kits to uninsured patients
 - Offers financial assistance for underinsured patients
- Built-in patient navigation (240+ languages, reminders, follow-up)
- Handles logistics (kit mailing, pickup, lab processing)
- Reduces burden on patients and staff

**EXACT
SCIENCES**

MNGI Digestive Health

- Donates up to 10 colonoscopies/month for uninsured patients
- Provides prep kits and colonoscopy scheduling support
- Ensures follow-up care after positive Cologuard tests



Foundational Community Partners

Power of People Leadership Institute (POPLI)

- Serves a predominantly African American community
 - African Americans have disproportionately low CRC screening rates in Minnesota
- Founders Brother Shane and Dr. Verna help shape our engagement strategies and build trust



Islamic Association of North America (IANA)

- Serves a predominantly Somali community
 - The Somali community has among the lowest CRC screening rates in Minnesota
- Executive Director Sheikh Yusuf helps guide culturally appropriate CRC messaging



Program Development Roadmap



Community Need Identified



EXACT
SCIENCES



Cologuard Partnership



Patient Navigation



MASONIC CANCER CENTER
WELLNESS ON THE ROAD
MOBILE HEALTH INITIATIVE

Founding Partners



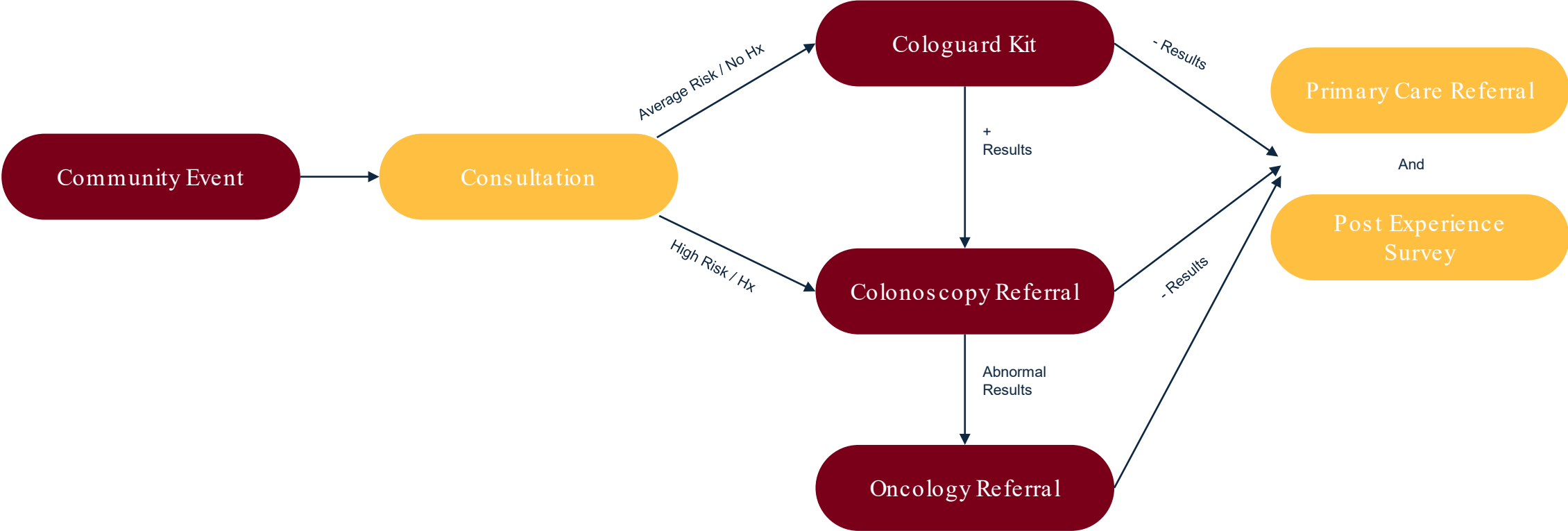
Clinical Champions



Colonoscopy
Provider

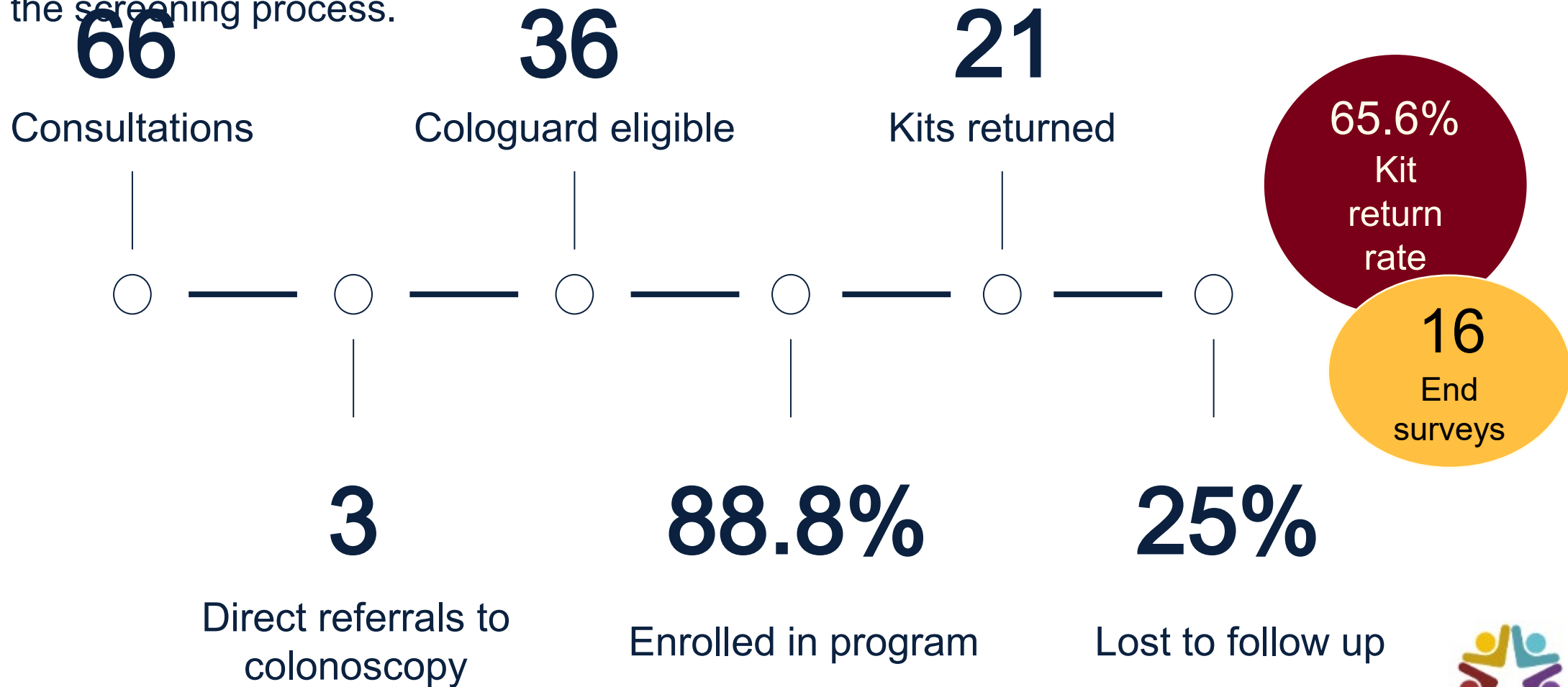


Screening Workflow



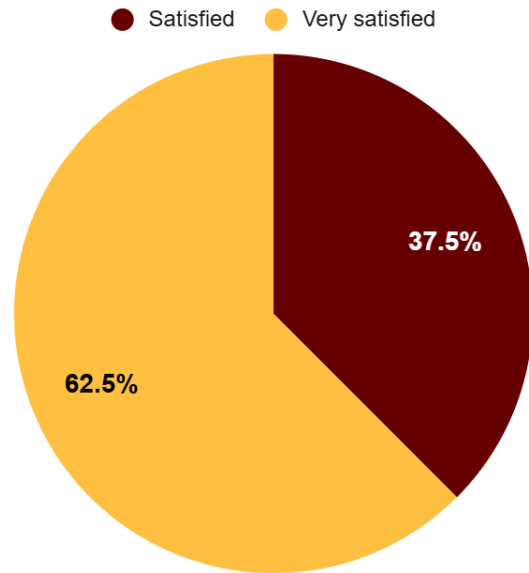
Early Program Data

Initial results demonstrate strong engagement, with the majority of participants successfully completing the screening process.

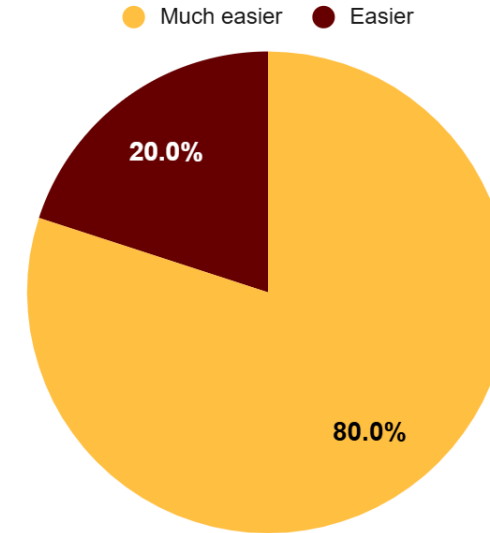


End Survey (N=16)

Overall, were you satisfied with your experience? N=16



How does using the Cologuard kit compare to a colonoscopy? (if applicable) n= 10

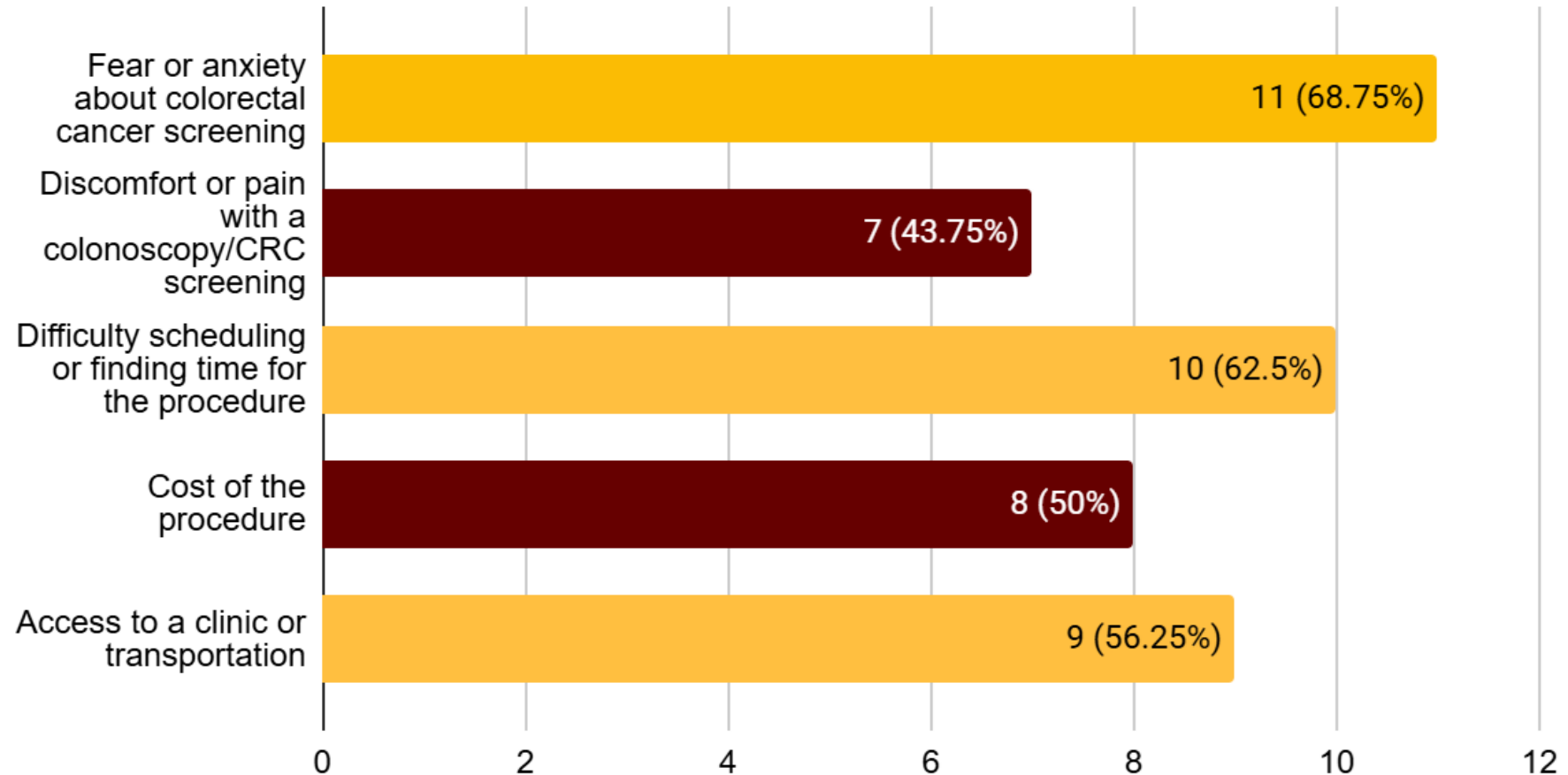


100% of End Survey participants would complete the screening program again **and** recommend this screening process to a family member/friend

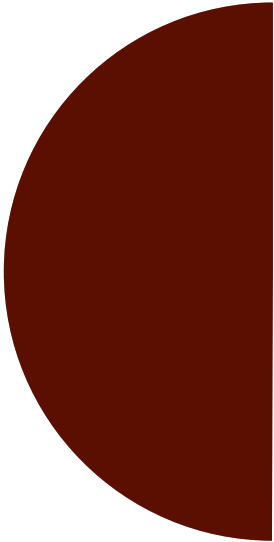


Barriers Addressed (N=16)

What barriers to screening did using the Cologuard kit help you overcome? (Select all that apply)

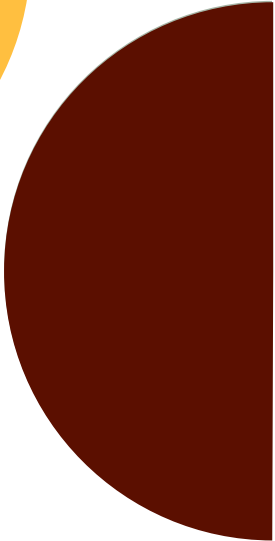



Quotes from Participants



“Very private, easy to do and it was smooth...very satisfying”

Participant



“Thank you so much for all you do. I very much appreciate your program”

Participant



Lessons Learned

Patient navigation is key: patients need active follow-up for both stool tests and colonoscopies

Education matters: reduces fear and misconceptions

Community trust is essential and must be earned: show up consistently and respectfully

Obtain as much patient information in-person: insurance details, contact information, consent forms → reduces delays and loss to follow-up

Financial barriers are real: need fee assistance programs and participant incentives to address other social drivers of health

Event type matters: mobile clinic events yield higher engagement than larger health fairs

Provider access to Electronic Medical Record: verifying eligibility and reviewing prior test results improves accuracy, QI metrics for primary care clinics, and avoids duplication



*“Consistency
grants authority”*

Brother Shane
Co-Founder of the Power of People
Leadership Institute



Impact

Community Impact

- Increased community awareness of CRC and early detection
- Removing barriers to screening (cost, accessibility, navigation)
- Positive community response and growing trust
- Successful screenings completed and referrals made
- Growing interest from new community partners

Internal Impact

- More efficient workflows and streamlined patient tracking
- Improved CHW-RN collaboration for navigation and follow-up
- Clearer coordination across MCC, MHI, and clinical partners (Exact Sciences & MNGI)
- Real-time learning to adapt workflows
- Strengthened evaluation and data collection systems





Links to Care Program

Nachia Larson (she/her)

Diversity, Equity & Inclusion Program Manager



Donated Care Programs at MNGI

UMN Mobile
CRC Comm
Screening
Prgm

MFV
Colon
Screening
Prgm

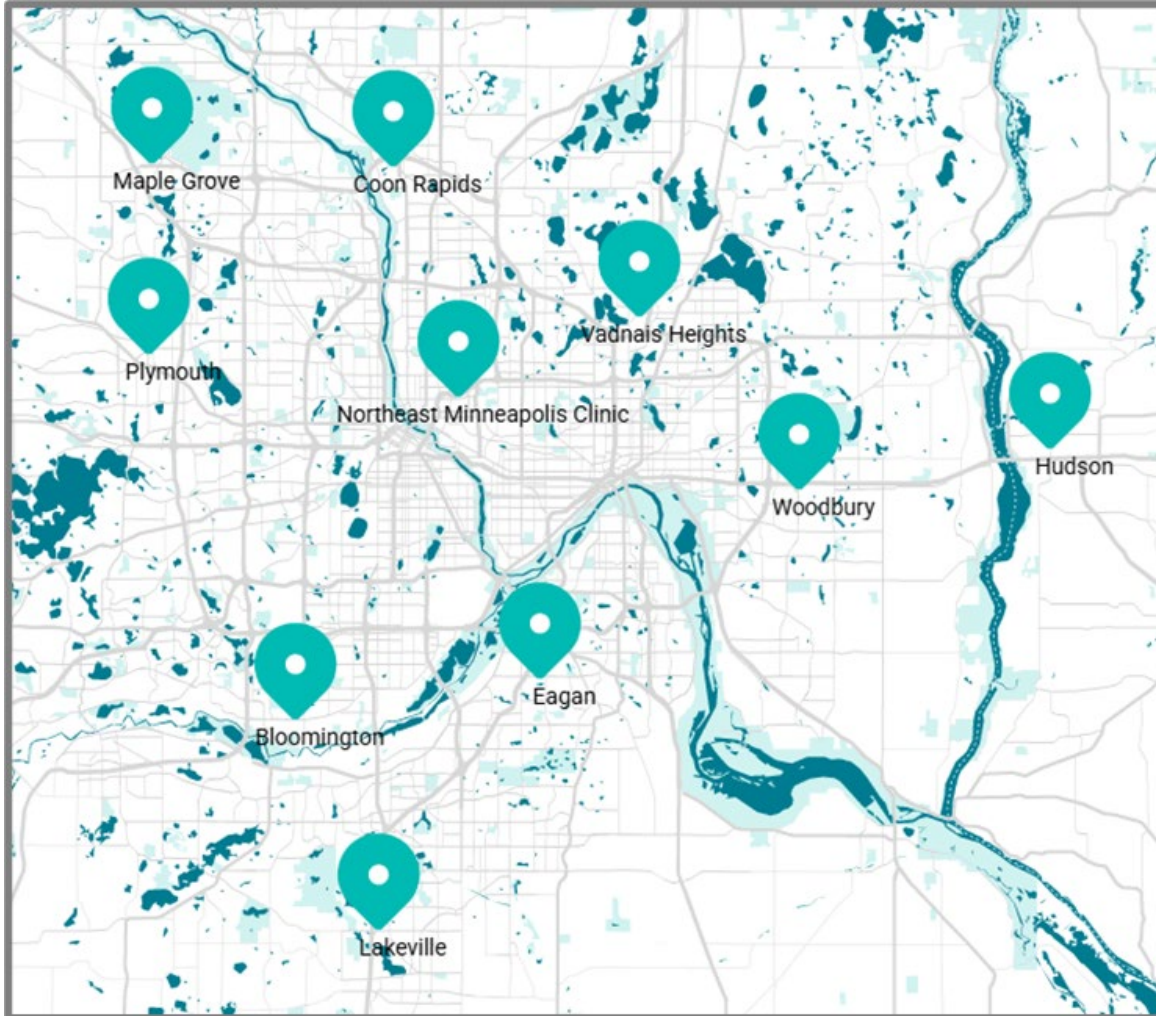
Links to
Care

Allina
Partners
Care

St. Mary's
Health
Clinic



About MNGI Digestive Health



- Nationally recognized leader in gastroenterology diagnosis, quality and care.
- Serve the Twin Cities Metro area
 - Clinical services & subspecialty programs
 - Ambulatory Surgery Centers
 - Hospital services
 - Pediatric clinic



Links to Care Program

History

- 2015 partnership with the ACS & La Clinica
- Free colonoscopies for uninsured pts with + stool test
- 1 partner clinic

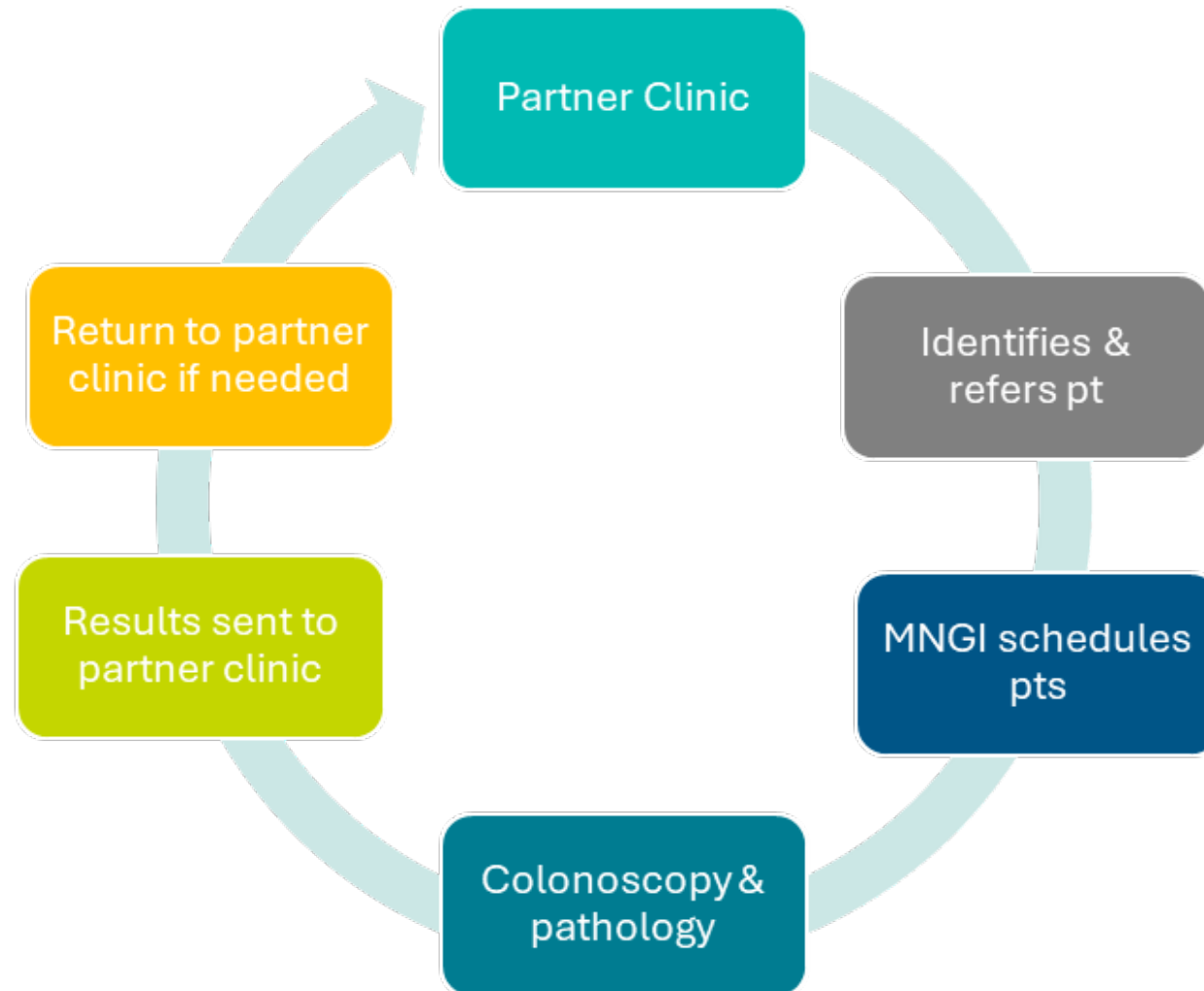
Today

- Expanded qualifications
 - + stool test
 - Family history
- 11 partner clinics

Community-University Health Care Center



Patient Flow



Community Impact

2015 - 2025

Donated
Colons

888

Pathology
Count

479

Adenoma
Count

431

Cancers
Found

10



Current Barriers

Transportation

Responsible
Person

Prep
Difficulty

Screening
Awareness

Fear



Final Message

To organizations that perform colonoscopies:

We invite you to join this mission.

To clinics looking for a partnership:

Start the conversation.



Strategies to Increase CRC Screening Uptake

Patient navigation

Personalized support and guidance

Assist with logistic barriers

Low-barrier testing

“The best screening test is the one people use”

Offering screening options that are affordable and accessible

Targeted Outreach

Patient reminders (calls, texts, emails, letters)

Appointment and follow-up facilitation

Dougherty MK, Brenner AT, Crockett SD, Gupta S, Wheeler SB, Coker-Schwimmer M, Cubillos L, Malo T, Reuland DS. Evaluation of Interventions Intended to Increase Colorectal Cancer Screening Rates in the United States: A Systematic Review and Meta-analysis. JAMA Intern Med. 2018 Dec 1;178(12):1645-1658. doi: 10.1001/jamainternmed.2018.4637. PMID: 30326005; PMCID: PMC6583619.



Questions?

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