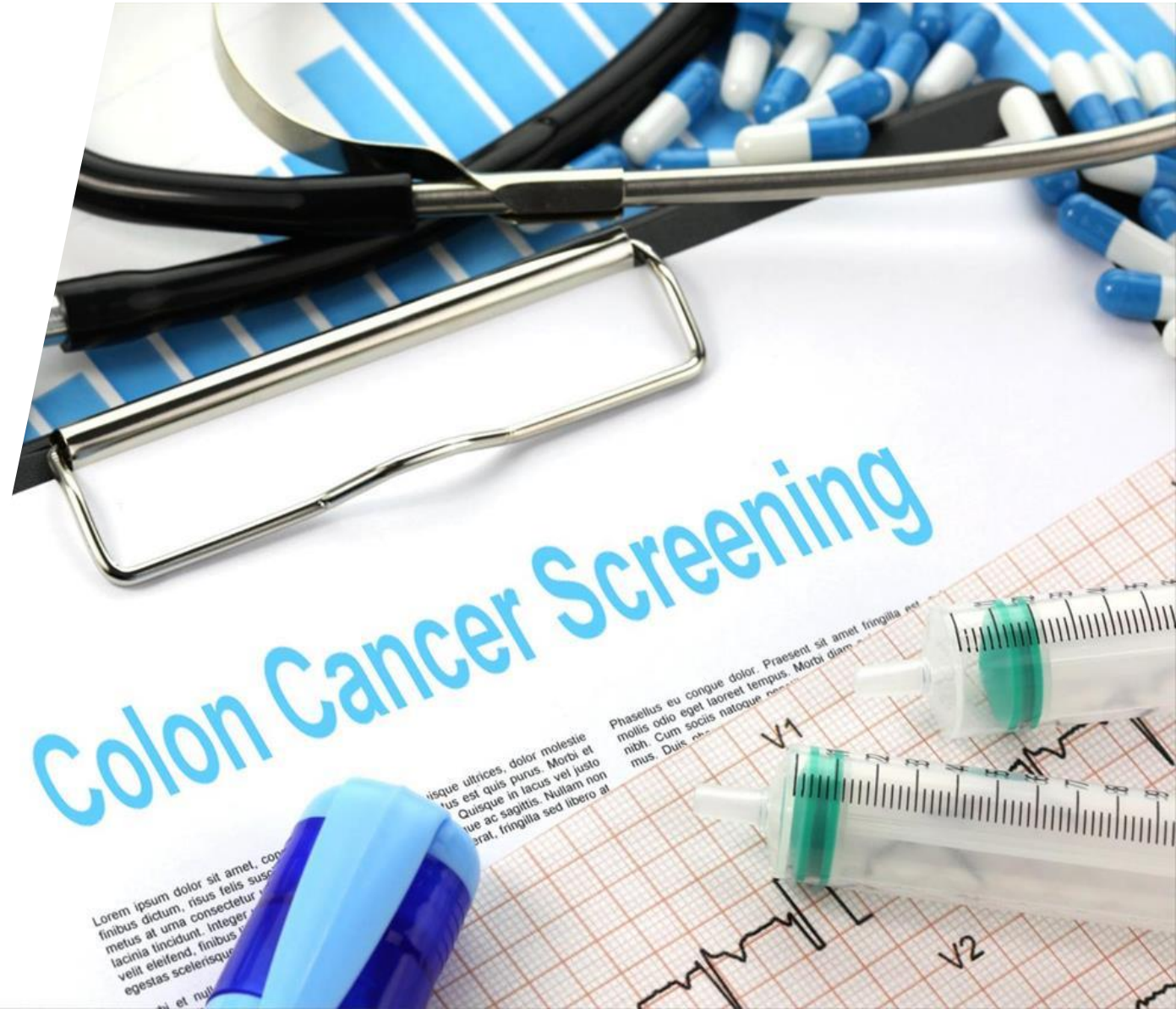


Welcome!

Before we begin...

**Today's session will
be recorded**

**Please add your name
and organization in
the chat**





Thursday, December 7, 2023, • 12:00 pm MST/1:15 pm MST

Improving Colorectal Cancer Screening Rates in AZ – The Community Health Worker's Role ECHO

Session 0: Orientation

Welcome to the Orientation Session of the Improving CRC Screening Rates in AZ – The CHW's Role ECHO



Each ECHO session will be recorded and **may** be posted to a publicly-facing website



You will be muted with your video turned off when you join the call. Use the buttons in the *black* menu bar to unmute your line and to turn on your video. **If you do not wish to have your image recorded, please turn OFF the video option.**



Today's materials will be made available on our ACS ECHO website.



Please type your full name, the full name of your organization, and e-mail in the chat box



This ECHO session takes place on the Zoom platform. To review Zoom's privacy policy, please visit zoom.us/privacy



Questions about Zoom? Type in the chat box [@Mindi Odom](#)

This project is funded by



CEOs Against Cancer®
Arizona Chapter



Have a question? Don't wait to ask! Feel free to enter in the Chat at any time.

Today's Agenda

- 1 Welcome & Housekeeping**
5 minutes
- 2 ECHO Subject Matter Expert (SME) & Participant Site Introductions**
15 minutes
- 3 Project Goals & Introduction to this ECHO**
10 minutes
- 4 Introduction to the ECHO Model**
15 minutes
- 5 Open Discussion/Q&A**
10 minutes
- 6 Wrap Up**
5 minutes



Improving CRC Screening in AZ – The CHW's Role ECHO FACILITATOR

Anna Alonzo
Co-Chair, University of Arizona
Cancer Center Community
Outreach

Your ECHO Support Team



Veronica Venturini, MPH
ECHO Lead
Associate Director, Cancer Center
Partnerships



Anna Alonzo
ECHO Facilitator
Co-Chair, University of Arizona
Cancer Center Community
Outreach



Mindi Odom
Director, Project ECHO
Your ECHO Co-Lead



Beth Graham, MPH, CHES
Program Manager, Project ECHO



Jennifer McBride, PhD
Senior Data & Evaluation Manager



Sarah Wienke, MPH
Associate Director, Community
Partnerships

Introductions

Meet Our Improving CRC Screening Rates in AZ – The CHW’s Role ECHO HUB Subject Matter Experts (SMEs)



John Molina, MD

Director

Arizona Advisory Council on Indian Health Care



Patty B Molina, MPH

Senior Director of Community Health Services

Mariposa Community Health Center



Kristin Burns, LPC

Clinical Provider Trainer

Arizona Complete Health

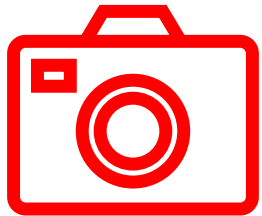


Lorena Verdugo

Community Health Advisor

El Rio Community Health Center

Introduction of Participants



We would love to “see” you!
Please come on camera (if you can) and...



Say your **name** and **organization**



Goal: Empower CHW's within their role to help increase colorectal cancer screening rates in AZ

Objective: Knowledge and confidence gain

- Colorectal cancer prevention and early detection
- Screening modalities
- Recognizing the unique role of a CHW in CRC screening recommendations
- Emphasis on cultural humility and social determinants of health
- The importance of effective communication and motivational interviewing

SCHEDULE



All Sessions are 12:00–1:15 PM

Date	Session	Topic	Didactic Presenter
Dec 7	Session 0	Orientation/Program Introduction:	No didactic presenter
JAN 18	Session 1	Part I: Colorectal Cancer 101	<i>Dr. John Molina</i> <i>Director, Arizona Advisory Council on Indian Health Care</i>
FEB 15	Session 2	Part II: Colorectal Cancer 101, Risk Factors & Early Detection	<i>Dr. John Molina</i> <i>Director, Arizona Advisory Council on Indian Health Care</i>
MAR 28	Session 3	CRC Screening Modalities	<i>Patty Molina, MPH</i> <i>Sr Director of Community Health Services, Mariposa Community Health Center</i>
APR 18	Session 4	The Role of a CHW in CRC Screening	<i>Patty Molina, MPH</i> <i>Sr Director of Community Health Services, Mariposa Community Health Center</i>
MAY 16	Session 5	Cultural Humility and Social Determinants of Health	<i>Lorena Verdugo</i> <i>Community Health Advisor</i> <i>El Rio Community Health Center</i>
JUN 20	Session 6	Effective Communication/Motivational Interviewing	<i>Kristin Burns</i> <i>Clinical Provider Trainer</i> <i>Arizona Complete Health</i>



CEOs AGAINST CANCER



COLORECTAL CANCER SCREENING AND HEALTH EQUITY IN ARIZONA

Colorectal cancer is one of the few cancers that can be prevented through screening. Higher death rates among certain Arizona communities may, in part, be attributed to disparities in the screening process.

- CRC second leading cause of cancer mortality
- CRC fourth most common cancer (7.8%)
- <30% of patients received a recommendation for screening during wellness visit ⁽¹⁾

“Colorectal cancer is often considered the most preventable, yet least prevented, cancer.”

– Steven H. Itzkowitz, MD,
NCCRT Chair¹

(1) <https://www.hcplive.com/view/study-finds-only-1-in-4-get-colorectal-cancer-screening-recommendation>

Most colorectal deaths in Arizona are attributable to not getting screened.

Who in Arizona is unscreened?



ARIZONANS AGED 45-54

Younger Arizonans are less likely to be screened for colorectal cancer.



ARIZONANS WITH LESS THAN A HIGH SCHOOL DIPLOMA & EXPERIENCING POVERTY

Arizonans with incomes below the federal poverty level, and less education are more likely to be unscreened



ARIZONANS WHO ARE UNINSURED OR UNDERINSURED

Most unscreened in AZ have limited access to services that are accessible, acceptable, and affordable, including healthcare.

23% of Arizonans aged 50-75 report they have NEVER received CRC screening.

Only **30.58%** of Arizona Community Health Center patients aged 50-75 were up-to-date with their CRC screenings in 2021 (compared to 41.9% of in the US).



CEOs AGAINST CANCER



COLORECTAL CANCER

SCREENING GUIDELINES

for people at average risk

AGES

45 to 75

AGES

76 to 85

OVER AGE

85

YOUR AGE IN YEARS

Get screened.

Several types of tests can be used. Talk to your doctor about which option is best for you.

No matter which test you choose, the most important thing is to get screened regularly.

Talk to your doctor

about whether you should continue screening. When deciding, take into account your own preferences, overall health, and past screening history.

No longer screen.

People over age 85 should no longer get colorectal cancer screening.

TESTING OPTIONS

- Visual exams such as colonoscopy or CT colonography look at the inside of the colon and rectum for polyps (growths) or cancer.
- Stool-based tests look for signs of cancer in stool and can be done at home. These tests include the fecal immunochemical test (FIT), fecal occult blood test (FOBT), and multi-target stool DNA test.
- All abnormal results on non-colonoscopy screening tests should be followed up with a timely colonoscopy.
- People with a family history of polyps or colorectal cancer, or who have other risk factors, might need to start screening before age 45, be screened more often, and/or get specific tests.



CANCER SCREENING SAVES LIVES. GET SCREENED.

Talk to your doctor about screening, and contact your insurance provider about insurance coverage for screening. To learn more, visit [cancer.org/get-screened](https://www.cancer.org/get-screened) or call 1-800-227-2345.



Session 0

Introduction to the ECHO Model

Mindi Odom

Director, Project ECHO
American Cancer Society

Today's Session will **NOT** serve as a typical ECHO session but instead will function more like a traditional interactive webinar.

About Project ECHO

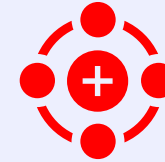
- **Moving Knowledge, Not People**
- Empowering people to make a difference in their communities with the **right knowledge**, at the **right place**, at the **right time**
- Builds **communities of practice** through **virtual mentoring & learning**
- **One-to-many** intervention proven effective to reduce disparities, strengthen health systems, & drive collaborative solutions for local priorities
- **Effective/Efficient** vehicle for dissemination of evidence-based strategies to improve cancer outcomes
- Participants **attend virtual case-based sessions** with subject-matter experts
- The participants and subject-matter experts all learn from each other: knowledge is generated, refined and tested by local experience. This **“all teach, all learn”** method **democratizes expertise** and makes it relevant to local cultural contexts.

The American Cancer Society serves as a **Project ECHO** (Extension for Community Healthcare Outcomes) Hub

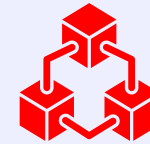
ECHO is all teach, all learn



Interactive



Co-management of cases



Peer-to-peer learning



Collaborative problem solving

What to Expect: The Anatomy of an ECHO Session

- **Welcome & introductions** (5 minutes)
- **Announcements & session overview** (5 minutes)
- **Brief Didactic Lecture/Presentation** (10-15 minutes at most)
- **Didactic Q/A** (5 minutes)
- **Scenario Presentation(s)** (25 minutes total)
 - **Scenario Presentation** (3 -5 minutes)
 - **Clarifying Questions** – (5 minutes)
 - **Recommendations** – (15 minutes)
- **Closing remarks, Wrap-Up & Post-Session Survey Poll** (5 min)

What is a Scenario Presentation?

Scenario presentations are based on a real-life experiences as a CHW and is an opportunity for to request advice and recommendations from other CHWs and the Hub Team.

These scenarios are challenges or perceived barriers that can be either system-level or patient-level.

Subject matter experts (SMEs) and CHWs will offer their guidance. This section of each ECHO session is **vital** to the success of the program and serves as an interactive learning for all attendees.

! For more about the **ECHO Model™** or **Project ECHO**, please visit <https://hsc.unm.edu/echo/>

Expectations of Participating Learning Sites

During the ECHO Program



- Join each monthly, 75-minute ECHO session (participate in discussion with video on)
- We need at least **six (6)** volunteers, each willing to present one **3-5-minute** scenario
- Complete surveys



CHWs are the **heart** of this ECHO. Your experiences, questions, and engagement are essential for the success of the program.

PLEASE be **on camera**, **ask questions**, and **offer suggestions**.

Scenario Presentation Overview

scenarios can be patient-related, experience-related, or system-related



Improving Colorectal Cancer Screening Rates in AZ – The Community Health Worker’s Role ECHO Scenario Presentation Overview

Presenting a Scenario

- Submission of a scenario for presentation and discussion is a key component in the Project [ECHO model](#)
- It is the essential for knowledge-building and sharing for all ECHO participants
- CHWs are encouraged to present a scenario involving a patient, client, or event/experience. This may include successes or challenges with social determinants of health, motivational interviewing, cultural humility, screening modalities, etc.
- For proper preparation, please submit the following 2 weeks prior to your presentation:
 - 1). [THIS form](#)
 - 2). A picture of the presenter
 - 3). A brief bio of the presenter

Screening Rates in AZ - The CHW's Role ECHO

Welcome CHW's! Thank you for sharing a scenario you've encountered while serving your community. Please identify a patient, client, or event where you had success or challenge recommending a health screening (preferably colorectal cancer screening).

This form includes 3 sections: **Presenter Information**, **Scenario**, and **Questions**. Please complete the sections thoroughly so the ECHO team has enough information to create a PowerPoint slide for your presentation. We will share the slide with you prior to your scheduled session. We approximate each scenario presentation will take 5 minutes.

Please remember, do not include patient identifiers on this form or use any identifiers during the presentation.

Please note, for patient-level scenario presentations, the subject matter experts will provide guidance that should NOT be interpreted as direct medical advice.

Please submit this form **two weeks** prior to the ECHO session. A picture of the presenter can be emailed to, Veronica.Venturini@cancer.org

Project ECHO Data Usage Statement:

Project ECHO collects registration, participation, questions/answers, chat comments and poll responses for some teleECHO programs. Your individual data will be kept confidential. These data may be used for reports, maps, communications, surveys, quality assurance, evaluation, research, and to inform new initiatives.

Hi, . When you submit this form, the owner will see your name and email address.

* Required

Presenter Information

1. Preferred ECHO session to present: *

Scenario Presentation Process



CHWs will submit their scenario presentation form at **least two weeks** prior to the ECHO session.



Subject Matter Experts (SMEs) will receive the case scenario at **least 48 hours in advance** and can provide advance written feedback and/or verbal feedback during the ECHO session



The scenario presentation should aim to be thematic to the didactic presentation to ensure strong session flow and reinforce the learning.

Scenario presentations are the heart of the ECHO model, ensuring that “all teach, all learn”



Jayme Blackrock
Program Coordinator
North Country Healthcare

Session 1

Scenario Presentation

Session 0 Scenario Example

Provided by: Jayme Blackrock

Focus: Patient-Related

Patient Hx

- Navajo (American Indian) patient
- Age 70
- Lives in rural part of Navajo Nation
- Commutes 2 hours round trip with family for healthcare, food, and supplies
- Brother diagnosed with colon cancer at age 65
- Pt never screened for colorectal cancer

Barriers/Challenges

- Distance to/from clinic
- Cultural: Navajo belief of talking/discussing cancer is taboo
- Language: Understanding screening test; what it is and how to complete
- Infrastructures: no indoor plumbing and/or running water
- Mistrust and hesitancy towards the healthcare system

Lessons Learned

- Culturally appropriate outreach materials
- Video aids
- Introduce oneself, in person, in the native language of patient
- Identify the best screening modality for patient
- Provide a gas card to return the kit and discuss results the same day
- Discuss family history and the importance of screening

Session 0 Scenario Example

Provided by: Jayme Blackrock

Focus: Patient-Related

Discussion & Question

What culturally relevant questions do you ask patients to help them feel more comfortable completing the test?

Examples of Culturally Appropriate Questions:

1. Are you afraid of doing the test or of the outcome of the test?
2. Do you feel like if you prayed before the test, you would be willing to complete it?
3. Do you have support for a ceremony after the test if it does become abnormal?
4. Should we call someone else in your family to discuss the test that would better help you understand it or someone who helps make decisions for the family?

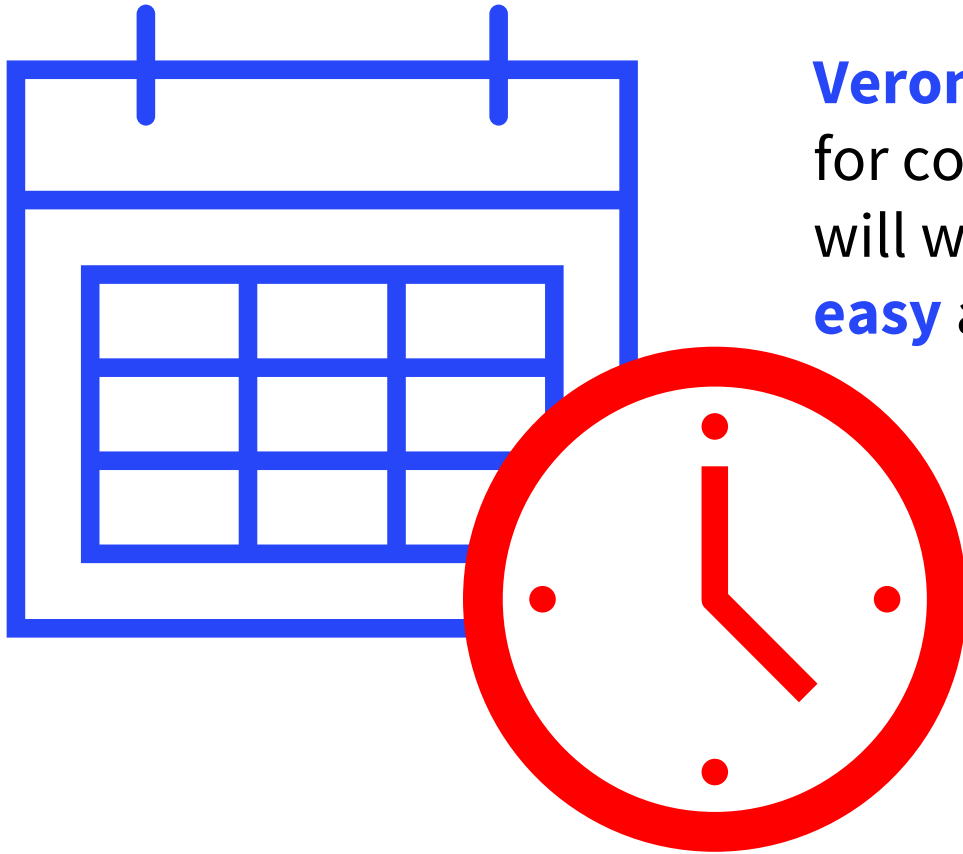
SCHEDULE



All Session are 12:00–1:15 PM

Date	Session	Topic	Scenario Presenter Needed
Dec 7	Session 0	Orientation/Program Introduction:	Jayne Blackrock gives example
JAN 18	Session 1	Part I: Colorectal Cancer 101	Rosa Maria Vogel
FEB 15	Session 2	Part II: Colorectal Cancer 101, Risk Factors & Early Detection	NEED VOLUNTEER
MAR 28	Session 3	CRC Screening Modalities	Chrissy Pope
APR 18	Session 4	The Role of a CHW in CRC Screening	Terri Garcia
MAY 16	Session 5	Cultural Humility and Social Determinants of Health	Jayne Blackrock Program Coordinator North Country Healthcare
JUN 20	Session 6	Effective Communication/Motivational Interviewing	NEED VOLUNTEER

Thank You for Volunteering to Share a Scenario Presentation!



Veronica Venturini will email you with a [link](#) for completing your scenario presentation. We will work with you to ensure your experience is **easy** and **valuable**.

All meeting materials will be available within one week of the session.

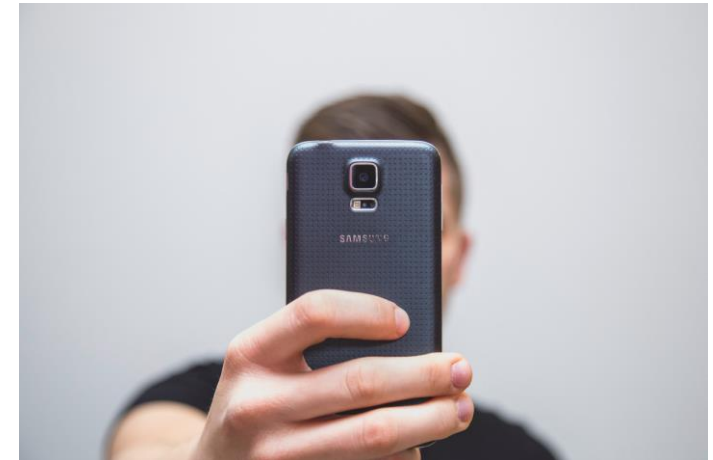
www.echo.cancer.org

ECHO Participation Pre-Program Survey

Pre-Program Survey



How to Use a QR Code



1. **Turn on** your phone camera
2. **Aim** the camera at the code
3. A link will show up
4. **Tap** the link to go to the survey



Wrap up

A Few Reminders



Next ECHO Session: January 18, 2024 @12:00 noon



Next Didactic Presenter: John Molina, MD - Director, Arizona Advisory Council on Indian Health Care, **Part I: Colorectal Cancer 101**



Slides, Recordings, & Resources will be made available within one week. All resources will be available on the [ACS ECHO Website](#).



Scenario Presentations: Ready to schedule your presentation? Let us know ASAP, please!



Additional Feedback on Today's Session? **Let us know at echo@cancer.org**



Questions? Contact Veronica Venturini– Veronica.Venturini@cancer.org



Look for a calendar invitation from the American Cancer Society for **Session 1** (1-18-24)



Thank You