

Prevention Care Manager Training – suggested outline

PRE-WORK

Distribute study publications and Prevention Care Manager Training Manual, for review in advance of training. Revise Prevention Care Manager Training manual as necessary to fit local circumstances and project goals.

1. Ogedegbe G, Cassells AN, Robinson CM, et al. Perceptions of barriers and facilitators of cancer early detection among low-income minority women in community health centers. *J Natl Med Assoc.* Feb 2005;97(2):162-170.
2. Dietrich AJ, Tobin JN, Cassells A, et al. Telephone care management to improve cancer screening among low-income women: a randomized, controlled trial. *Ann Intern Med.* Apr 18 2006;144(8):563-571.
3. Prevention Care Management: A Manual for Improving Breast, Cervical, and Colorectal Cancer Screening Rates for Women in Primary Care

TRAINING HANDOUTS:

1. United States Preventive Services Task Force recommendations for breast, cervical, and colorectal cancer screening
→ Find current recommendations at <http://www.ahrq.gov/clinic/uspstfix.htm>
2. American Cancer Society guidelines for the early detection of breast, cervical, and colorectal cancer
→ Find current Guidelines at
http://www.cancer.org/docroot/PED/content/PED_2_3X_ACS_Cancer_Detection_Guidelines_36.asp
3. Selected patient educational materials for all three types of cancer screening
4. Cancer Early Detection facilities for Breast, Cervical, and Colorectal Cancer Screening tests (List of local facilities which provide cancer screening tests – provide names, addresses, phone numbers, name of contact, and issues specific to each facility, such as waiting times, or referral requirements)

TRAINING AGENDA and OUTLINE:

Notes: * Allow time for questions and answers, and schedule breaks at least every two hours.

* Prevention Care Managers in the original study were provided with 7 hours of training, in two sessions

A. Introduction of participating staff

B. Background and Overview (Powerpoint or slides with handouts)

i. Cancer mortality and early detection rates

Background to the problem – review rates of cancer mortality and screening at the national and local level, and describe any disparities in mortality or screening rates present in your target population

Mortality rates

→ National breast, cervical and colorectal cancer mortality rates, and # of annual deaths, from most recent *Cancer Facts and Figures*, published annually by the American Cancer Society (www.cancer.org)

→ Local or state cancer mortality rates

Resources include: NCI Cancer Mortality Maps and Graphs (<http://cancercontrolplanet.cancer.gov/atlas/index.jsp>), State Department of Health, NCI State Cancer Profiles (<http://statecancerprofiles.cancer.gov/>)

Cancer early detection rates

→ National early detection rates. (Resources include the American Cancer Society's *Cancer Prevention and Early Detection Facts & Figures 2007*, http://www.cancer.org/docroot/stt/stt_0.asp)

→ National cancer screening goals (see Healthy People 2010 goals, <http://www.healthypeople.gov/Document/pdf/Volume1/03Cancer.pdf>)

→ Local or state cancer screening rates. (Resources include the American Cancer Society's *Cancer Prevention and Early Detection Facts & Figures 2007*, http://www.cancer.org/docroot/stt/stt_0.asp)

→ Practice specific target rates for breast, cervical, and colorectal cancer screening among patients receiving support from a Prevention Care Manager

ii. Review of Cancer Screening tests

Use selected patient educational materials as well as more clinical resources to provide clear descriptions of each screening test. Have clinical staff available to lead discussion and answer any questions.

Mammography

Pap Test

Home Fecal Occult Blood Test (contrast with office Fecal Occult Blood Test)

Flexible Sigmoidoscopy
Double Contrast Barium Enema
Colonoscopy

iii. United States Preventive Services Task Force recommendations and American Cancer Society guidelines: Provide hard copy of current recommendations and guidelines and provide links to check for updates (see links on previous page).

iv. Questions and Answers

C. How to be a Prevention Care Manager

1. Prevention Care Manager overview and approach (PCM Manual pp 4-7, figures 2 and 3)

- Determine patient support needs
- Provide support
 - Patient education
 - Patient activation
 - Reinforce screening recommendations
 - Schedule appointments (Switched patient reminders and appointments)
 - Patient reminders
 - Overcome access barriers
- Continue until patient is fully up-to-date on recommended cancer screenings

2. Identify women needing assistance:

- Overview of Eligibility Criteria
 - **Age** (to be determined by individual practice. Women 40 and older could be provided with PCM support for mammography and Pap testing, with colorectal cancer screening support added for women 50 and older, or PCMs could only work with women 50 and older, who are eligible to be screened for all three cancers. The upper age cut off in the New York Prevention Care Manager Project was 69)
 - **Screening status** (to be determined by individual practice – select women overdue on at least one screening, or focus on women overdue for 2 or more or all three screenings)
 - **Language** (to be determined by individual practice based upon patient population and languages available among staff who will provide Care Management services)
 - **Other exclusions determined by your practice** (eg women currently undergoing treatment for cancer, women with dementia or Alzheimer's disease, etc.)
- Identify patients (Manual p. 7-8)
 - Clinician / staff referral
 - Systematic chart checking
 - Patient self-referral

3. Prepare for the first contact (Manual p. 8-10)

- Chart check – provide site specific training on chart check protocol – how far back to look in charts, where in the charts to look and what constitutes evidence of a screening, etc.
- Patient Encouragement Letter (Appendix A)
- Begin to complete Initial Follow-up form (Appendix B)

- Abnormal results letter to provider (Appendix J)
4. Initiate Contact (Manual p. 10-14)
 - Initial Follow-up Script and Form (Appendix B)
 - Responses to barriers (Review Appendix E, pages 27-31)
 - Follow-up plan (Appendix D)
 5. Mail Materials to patients (Manual p. 14-15)
 - Patient Education Materials (selected by site)
 - Tools
 - Provider Recommendation Letter (Appendix F)
 - Patient Activation Card (Appendix G)
 - Patient Activation Letter (Appendix H)
 - Prevention Post-It Note (Appendix I)
 6. Conduct Subsequent follow-up calls (Manual p. 15-16)
Subsequent follow-up Script and Form (Appendix C)
 7. Share feedback with provider (Manual p. 16)
Abnormal Results Letter (Appendix J)
 8. Conduct periodic chart checks (Manual p. 16-17)
 9. Additional Resources
 - Cancer Early Detection facilities for Breast, Cervical, and Colorectal Cancer Screening tests (List of local facilities which provide cancer screening tests – provide names, addresses, phone numbers, name of contact, and issues specific to each facility, such as waiting times, or referral requirements)

D. Role play

Provide scripts for simulated patients to be used during role play, and have trainees pair off. Begin with a demonstration, then have each pair take turns playing patient and Prevention Care Manager. Follow-up with a discussion and address any questions that arise.

E. Questions and Answers