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BACKGROUND

GO₂ Foundation for Lung Cancer's Screening Centers of Excellence (SCOE) network facilitates real-world knowledge sharing rooted in the firsthand experiences of healthcare professionals on the front lines of community level lung cancer screening implementation. This national network of over 700 screening centers demonstrates significant stage shift outcomes among community programs committed to best practices while also strengthening our understanding of relevant implementation challenges and lessons learned to ensure readiness for the necessary, rapid growth in patient volumes.

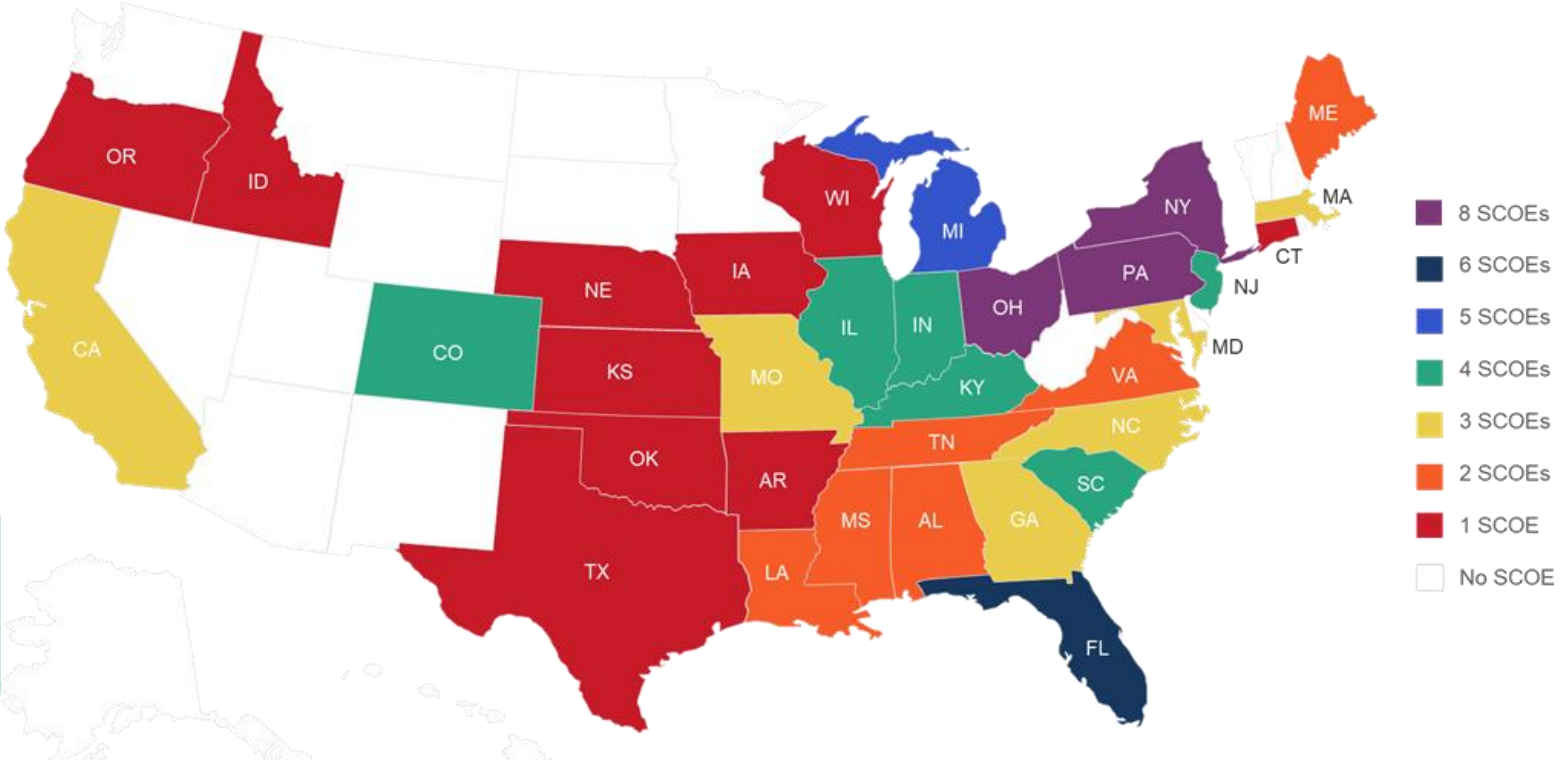
METHODS

GO₂ Foundation contracted with ZoomRx, a strategic healthcare consulting firm, to field a 50-minute survey to collect calendar year 2018 data on screening program outcomes and implementation processes. This survey was sent to 318 SCOE programs representing 677 total screening sites/facilities during summer/early fall 2019.

RESULTS

Survey Respondents

- 99 SCOE programs
- Representing 389 screening sites/facilities.



Patient Volumes

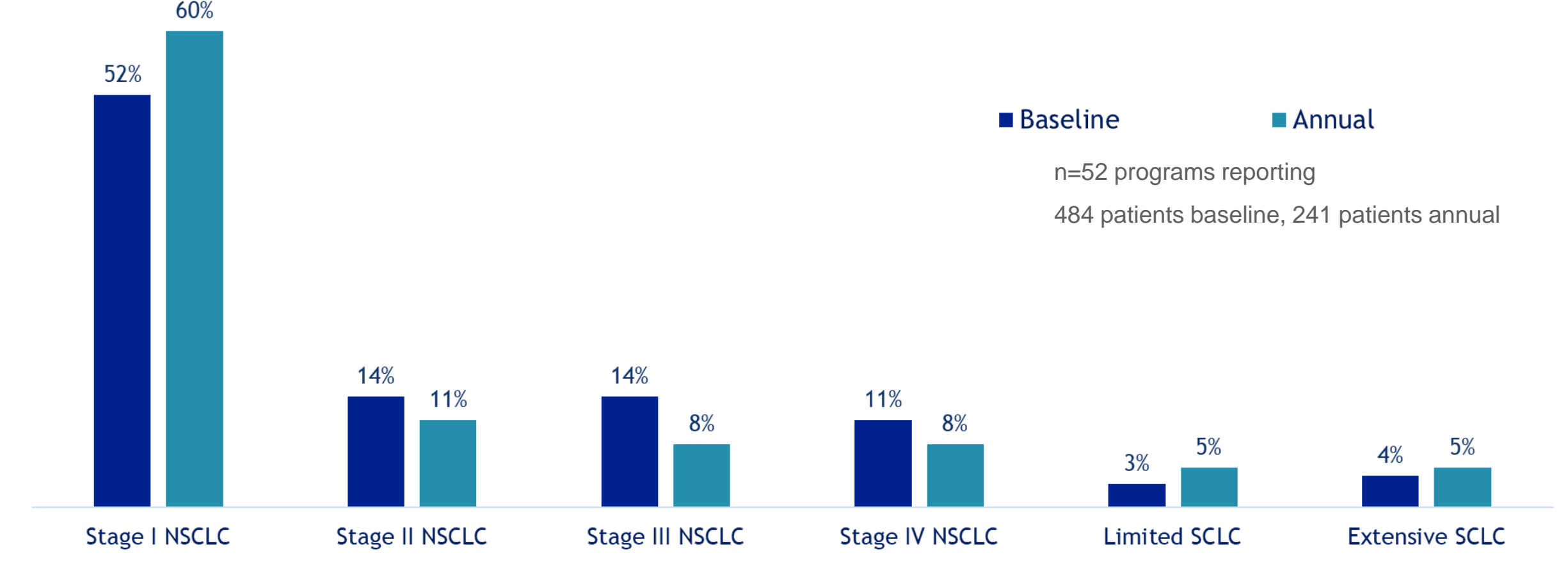
- 87,348 individual patients screened
- 878 average # patients per program

Patient Outcomes

- 1,501 total lung cancer diagnoses reported
- 1.7% detection rate among patients screened

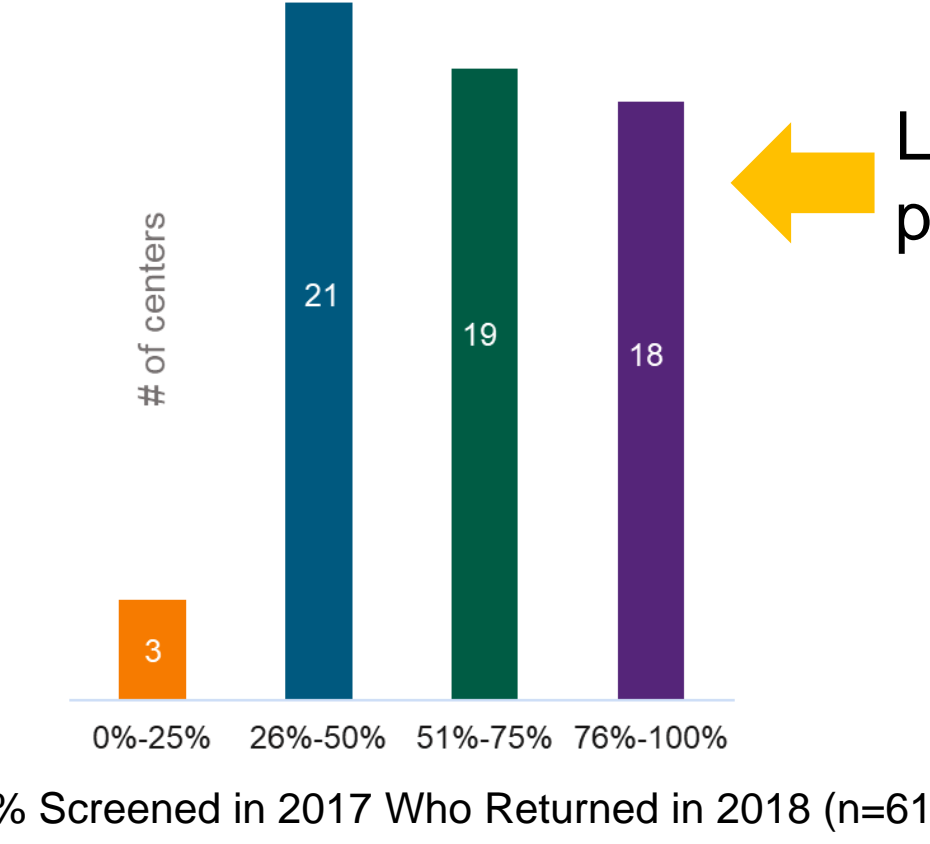
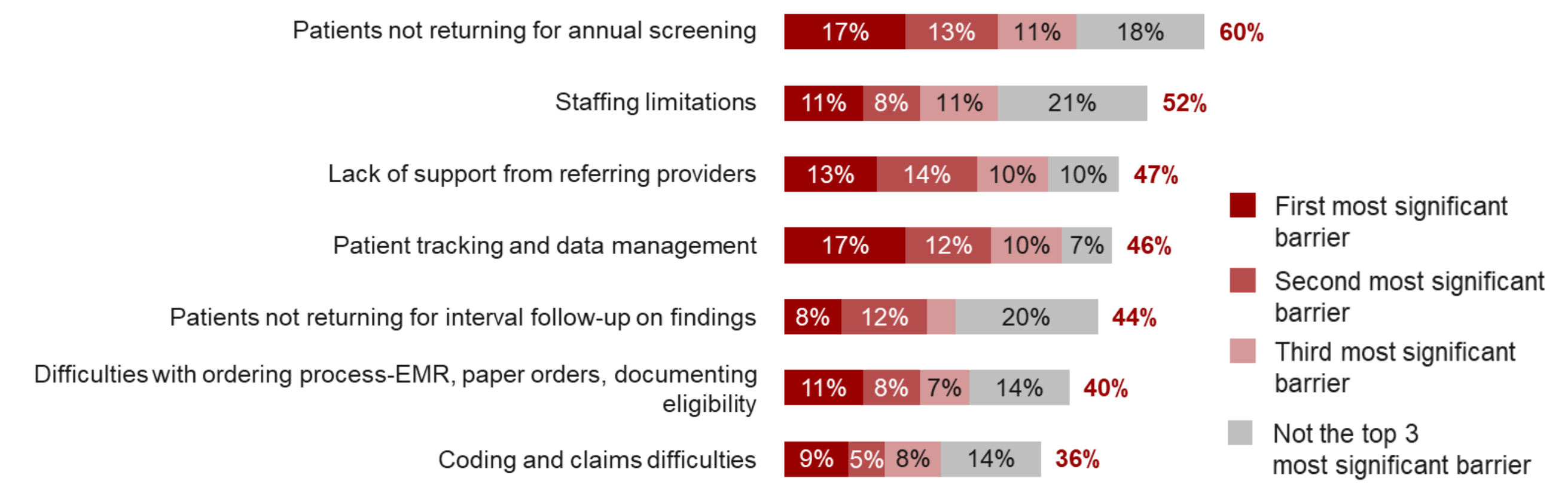
RESULTS

Life-Saving Stage Shift—More than 50% Found Early



The **increased rate of Stage I detection with repeat annual screening** demonstrates the importance of annual adherence for optimal patient benefit.

When asked to rank their implementation barriers by level of significance to them, programs most frequently cited **low annual adherence as a significant implementation barrier.** (n=99)



Less than one-third reported more than 75% of their patients screened in 2017 returned for screening in 2018.

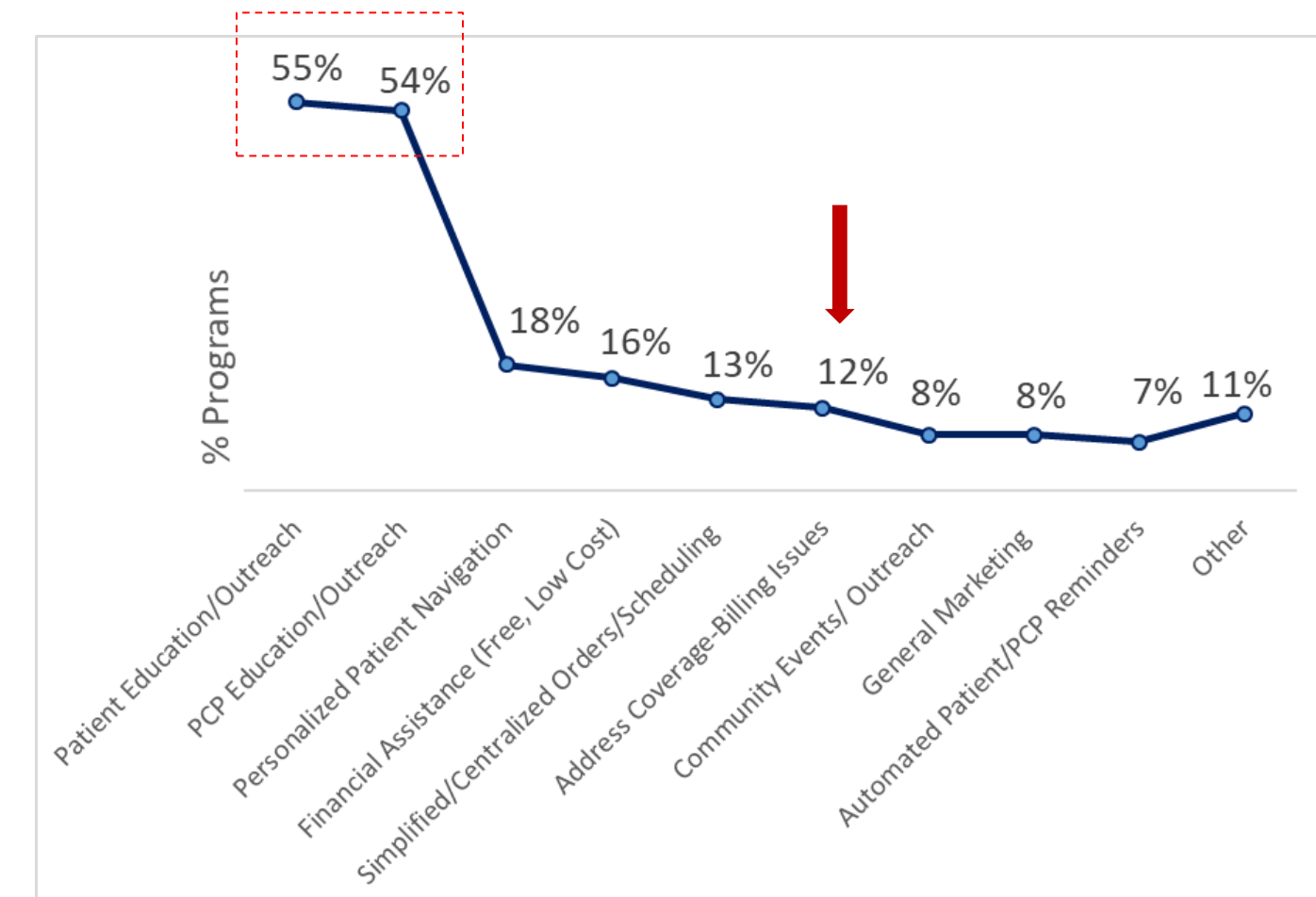
Factors influencing their patients' annual adherence:

Factor	PCP Reminders	Patient Reminders (Basic)	Patient Education / Process Understanding
Personal Patient Contact (Moderate to Intense)	40%	22%	19%
PCP Buy-In / Recommend to Patients	12%	10%	6%
Simple / Centralized Orders / Scheduling	49%	22%	19%
Automated Tracking / Reminders	18%	10%	6%
Certified Letters (alone or in combo)			

(n=67 programs responding)

RESULTS

Program strategies to address patient barriers to uptake and adherence: (n=85)



The primary strategies programs rely on to drive initial patient uptake and encourage their return for repeat annual screenings are patient and PCP outreach and education.

Nearly one-fifth also use personalized patient navigation.

While only 12% overall report specific attention to **addressing patient coverage barriers**, this strategy **ranks third among programs reporting over 75% adherence rates**, with 22% utilizing this strategy.

CONCLUSIONS

Coordination of the screening process is high-touch, even with software automation. Meaningful stage shift depends on high rates of adherence, which often requires personalized patient outreach—education to ensure their understanding and buy-in and attention to unique patient circumstances such as coverage barriers and cost. These efforts are time and resource intensive. With almost three-quarters of programs indicating that they currently operate at or above capacity, there is particular need to focus on challenges around capacity building in order to ensure continued program quality while meeting growing patient volumes.

ACKNOWLEDGEMENTS

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