The COVID-19 Pandemic: identifying adaptive solutions for colorectal cancer screening in underserved communities

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Average Daily Clinical Visits at Beginning of CV-19 Pandemic
Overview

• Community health centers (CHC) and CRC screening
• Early impacts of COVID pandemic on CHCs & CRC screening
• Key CRC screening challenges for San Diego CHCs
• CHC CRC screening opportunities that are adaptive to the COVID-19 pandemic

Low Income US Populations Receive Primary Care in Community Health Centers (CHC)*

- In 2021, CHCs served over 28M US patients
  - 91% are low-income
  - 81% of health center patients are publicly insured or uninsured
  - 58% of health center patients are racial/ethnic minorities

San Diego Community Health Center (CHC) CRC Screening Rates 2019, 2020*

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<tbody>
<tr>
<td>Borrego Health</td>
<td>229,473</td>
<td>260,483</td>
<td>41.48%</td>
<td>34.44%</td>
</tr>
<tr>
<td>Family Health Centers of SD</td>
<td>149,000</td>
<td>160,902</td>
<td>45.09%</td>
<td>38.06%</td>
</tr>
<tr>
<td>Centro de Salud (San Ysidro)</td>
<td>97,516</td>
<td>96,140</td>
<td>61.11%</td>
<td>53.82%</td>
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<tr>
<td>Neighborhood Health Care</td>
<td>76,630</td>
<td>77,789</td>
<td>59.87%</td>
<td>46.25%</td>
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<tr>
<td>Vista Community Clinic</td>
<td>69,701</td>
<td>61,930</td>
<td>51.72%</td>
<td>36.90%</td>
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<tr>
<td>North County Health Project</td>
<td>66,325</td>
<td>57,781</td>
<td>53.30%</td>
<td>39.63%</td>
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<tr>
<td>La Maestra Family Clinic</td>
<td>45,716</td>
<td>37,398</td>
<td>62.21%</td>
<td>60.62%</td>
</tr>
<tr>
<td>San Diego Family Care</td>
<td>27,451</td>
<td>24,033</td>
<td>50.68%</td>
<td>45.80%</td>
</tr>
<tr>
<td>Operation Samahan</td>
<td>14,311</td>
<td>11,485</td>
<td>42.86%</td>
<td>42.91%</td>
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*Source: Health Resources Service Administration (HRSA)-Uniform Data System (UDS)
https://data.hrsa.gov/tools/data-reporting/program-data?type=AWARDEE&state=CA

CRC screening rates are much lower than the pre-pandemic US national average of 67%
Impact of Covid-19 Pandemic on CHCs

• Quick shift to telehealth
• CHCs did not offer elective or preventive services
• Staff reductions
• Changes in workflows
• On-site staff face anxiety and fear related to infection
• All staff face stress and burnout
Key CRC screening challenges for San Diego CHCs

• Colonoscopy (GI referrals) only for symptomatic/emergency patients

• Delayed diagnosis, a shift to later stage disease, and as a result, increase in CRC deaths, further exacerbating existing health disparities

• Recent literature based on modeling estimates predicts approximately 4,500 excess CRC deaths between 2020 and 2030

CHC CRC screening opportunities that are adaptive to the COVID-19 pandemic

- Establish COVID-adapted Best Practices for Implementing Mailed FIT Programs in CHCs
- Implement Grassroots Advocacy to Identify Community Gastroenterologists who Commit to Performing Colonoscopies for CHC Patients
- Assess Cancer Prevention Priorities Among Individuals in Underserved Communities
- Assess Regional CRC Screening and Follow-up Barriers and Solutions
CHC CRC screening call to action

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Thank You!

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