

DP17-1701 National Breast and Cervical Cancer Early Detection Program (NBCCEDP) Logic Model

Grantee Strategies and Activities	Short-Term Outcomes	Intermediate Outcomes	Long-Term Outcomes
<p>Strategy 1: Program Collaboration</p> <ul style="list-style-type: none"> Collaborate with NCCCP, NPCR, and other chronic disease programs that serve the priority population or communities. Collaborate with NCCCP to establish a programmatic advisory board. 	<ul style="list-style-type: none"> Established health system and community partnerships that support increased breast and cervical cancer screening Knowledge and capacity for breast and cervical cancer prevention and screening among priority populations Access to health care and preventive services among priority populations Policies and systems that promote healthy lifestyle behaviors and support high-quality breast and cervical cancer screening Multiple evidence-based interventions in place that support improved provider practices and health systems to support high-quality breast and cervical cancer screening Data systems for measurement and use of patient and health system data High quality staff, clinical consultants, and providers 	<ul style="list-style-type: none"> Increased appropriate breast and cervical cancer screening, rescreening, and surveillance among priority populations Increased use of evidence-based lifestyle programs, clinical preventive services, and cancer care Improved delivery of clinical preventive services and cancer care Increased health-seeking and healthy lifestyle behaviors to reduce cancer risk Enhanced data-based decision-making regarding B/C cancer screening 	<ul style="list-style-type: none"> Reduced breast and cervical cancer morbidity and mortality Reduced disparities in breast and cervical cancer incidence and mortality
<p>Strategy 2: External Partnerships</p> <ul style="list-style-type: none"> Establish formal agreements with health systems/clinics to provide patient support services, health system changes, and/or provider-focused activities. Establish formal agreements with community-based and faith-based organizations to access hard to reach populations. 			
<p>Strategy 3: Cancer Data and Surveillance</p> <ul style="list-style-type: none"> Use data to identify and describe priority populations and/or communities of need for breast and cervical cancer screening. Establish and maintain MDE systems for patient surveillance. Conduct linkage of diagnosed women with state cancer registry. 			
<p>Strategy 4: Environmental Approaches for Sustainable Cancer Control</p> <ul style="list-style-type: none"> Work with employers to inform development of wellness policies that promote screening and healthy behavior. Work with community organizations to include education programs that reduce risk for breast and cervical cancer in their community outreach activities. 			
<p>Strategy 5: Community-Clinical Linkage to Aid Patient Support</p> <ul style="list-style-type: none"> Use community- or clinic-based health workers, lay advisors, or health educators for community outreach and referral to medical homes. Provide patient navigation services to identify and address barriers to facilitate access to appropriate breast and cervical cancer screening and follow-up. 			

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<p>Strategy 6: Health System Changes and Provider-Focused Activities</p> <ul style="list-style-type: none"> • Conduct assessment of partner health systems, including breast and cervical cancer screening rates, data functionality, process flow, and use of EBIs. • Implement provider education, quality assurance, and quality improvement and ensure continuous quality improvement by implementing provider assessment and feedback systems (EBI). • Implement health systems changes to increase breast and cervical cancer screening: <ul style="list-style-type: none"> ❖ Health information technology or electronic health record improvements ❖ Patient reminder systems (EBI) ❖ Provider reminder systems (EBI) ❖ Reduce structural barriers (EBI) • Provide appropriate quality screening, diagnostic follow-up, and treatment referral services to uninsured and underinsured NBCCEDP-eligible women. 			
<p>Strategy 7: Program Monitoring and Evaluation</p> <ul style="list-style-type: none"> • Develop an evaluation plan based on program-identified strategies. • Establish and maintain a data reporting system to collect required clinical data to monitor and track patient-level clinical care to ensure quality services. • Report required clinic-level data to CDC to monitor effectiveness and implementation of interventions. • Monitor breast and cervical cancer screening rates, data use, and process flow in clinic settings. 			
<p>Program Management</p> <ul style="list-style-type: none"> • Hire and retain qualified program staff to accomplish program goals. • Develop and maintain a fiscal system that tracks and monitors program expenditures. • Identify and retain medical professionals to provide NBCCEDP clinical consultations. • Participate in required CDC meetings. 			