

Comprehensive Cancer Control Collaborative of North Carolina (4CNC)



*Cancer Prevention and Control Research Network
Annual Meeting*

January 27-28th, 2020

Presentation Overview

4CNC Aims

Core Project: PharmFIT

Member Strengths and Partnerships

Collaboration Opportunities

Discussion

4CNC Aims

- **Engage health care and community partners** and build their capacity to adopt, implement, and scale-up evidence-based cancer prevention and control interventions
- Lead and participate in **cross-center projects**
- **Conduct community-engaged intervention and implementation research** to prevent and control cancer in NC populations that are vulnerable due to their race/ethnicity, socioeconomic status, or rural residence

PharmFIT Aims & Activities

4CNC's Core Project

Rationale & Purpose

Rural populations have lower rates of colorectal cancer (CRC) screening and less access to health services than their urban and suburban counterparts.

Rural residents often have greater access pharmacies than to primary care facilities.

Pharmacists are highly trained medical professionals who regularly counsel patients.

Study Purpose: To develop and pilot test a model for delivering FIT kits for CRC screening in pharmacy settings.

Preliminary Work

12 patient interviews

12 primary care provider interviews

12 pharmacist interviews

Additional interviews conducted in Washington (Fred Hutch)

Coding and analyses is currently underway

PharmFIT Aim 1: Years 1-2

Evaluate patient and pharmacist perceptions of community pharmacy-based delivery of FIT kits.

1. Conduct a national survey of average-risk U.S. adults eligible for CRC screening aged 50-75.
2. Conduct a national survey of community pharmacists.

PharmFIT Aim 2: Year 2

Refine the programmatic features of a community pharmacy-based FIT kit distribution program.

1. Identify five target community pharmacies and describe their care coordination capabilities with primary care clinics, including access to electronic health record (EHR) data.
2. Conduct key informant interviews with pharmacy staff and primary care providers (PCP) to identify facilitators and barriers to care coordination for patients with positive (e.g. abnormal) test results.

PharmFIT Aim 3: Years 2-4

Pilot test a FIT kit distribution program (PharmFIT) in five rural community pharmacies and assess implementation and effectiveness outcomes.

1. Implement a small, non-randomized test of the PharmFIT program.
2. Evaluate implementation outcomes associated with the PharmFIT program.

4CNC Member Strengths & Partnerships



Jennifer Leeman, DrPH, MDiv | *School of Nursing*

- Implementation frameworks, strategies, & outcomes
- Healthy eating & physical activity



Alison Brenner, PhD | *School of Medicine*

- Development & testing of patient decision aids
- Colorectal cancer screening



Catherine Rohweder, DrPH | *HPDP (PRC)*

- Community engagement & capacity building
- Colorectal cancer screening



Mary Wangen, MPH | *HPDP (PRC)*

- Project management, communications & research administration
- Qualitative methods



Victoria Petermann, RN, BSN | *School of Nursing*

- Rural-urban differences in gynecologic cancer care
- Impact of geographic factors on cancer care access & outcomes



Sarah Birken, PhD | *Health Policy & Management*

- Implementation science
- Theory selection & application
- Cancer survivorship



Dan Reuland, MD, MPH | *School of Medicine*

- Health communication & decision making
- Colorectal cancer & lung cancer screening in diverse populations



Ben Urick, PharmD, PhD | *School of Pharmacy*

- Novel community pharmacy practice models
- Pharmaceutical reimbursement & pharmacy profitability



Stephanie Wheeler, PhD, MPH | *Health Policy & Management*

- Mathematical modeling & systems thinking
- Colorectal cancer, breast cancer, financial toxicity
- Comparative & cost effectiveness research



Alice Ammerman, DrPH

Professor, UNC Department of Nutrition
Director, HPDP



Kurt Ribisl, PhD

Professor and Chair, Health Behavior
Program Leader, LCCC



Marti Wolf, RN, MPH, PCMH CCE

Clinical Programs Director, NC
Community Health Center Association



Molly Black

Senior Director, State and Primary Care
Systems, American Cancer Society



Debi Nelson

Program Director, NC Cancer Prevention
and Control Branch, NC Division of PH

4CNC Partners & Advisors

Collaboration Opportunities

Formal Workgroup Proposals Co-Led by 4CNC

- OTIS
- QI/IS
- Systems Science

Formal Workgroup Proposals Co-Led by Others

- Cancer Survivorship
- Rural Cancer

4CNC Core Project

- PharmFIT

Ongoing 4CNC Work

- Evaluation of ACS QI Collaboratives
- Putting Public Health Evidence into Action