

Your Organization	
Name	Colorectal Cancer Prevention Network at the University of South Carolina
Address (City, State, Zip)	712 Main Street, PSC Jones Building room 614
Organization website address	crcfacts.com
Organization type (nonprofit, local government, etc)	University

Organization Contact	
Lead organization contact	
Name	Annie Thibault
Position	Executive Director
Telephone	803-543-9608
Email	thibault@mailbox.sc.edu
Second organization contact	
Name	Tracie Lewis
Position	Operations Director
Telephone	803-417-1852
Email	lewis53@mailbox.sc.edu

State Contribution	
Amount	250,000.00
Purpose	Colorectal cancer screening, awareness and education
State Agency Providing Contribution	SC DHHS

CCPN program description, Colorectal cancer screening background, and purpose of funding
<p>INTRODUCTION: Overview of the the Colorectal Cancer Prevention Network (CCPN) in the College of Arts and Sciences at the University of South Carolina. Since 2008, the CCPN has been recognized as the statewide organization that emphasis outreach efforts to increase colorectal cancer (CRC) prevention and screening across SC. With leveraged funding from the South Carolina Legislature, CDC, the University of South Carolina, and private donors, the CCPN provides awareness, education and screening in South Carolina. To address inequities in healthcare delivery, the CCPN has developed a program that serves uninsured and medically underserved individuals by providing patient navigation services and access to screening at no cost to the patient. In doing so, the program provides primary care clinics with options to provide colorectal cancer prevention services, which reduces downstream healthcare cost associated with late stage disease. Since its inception, the CCPN has collaborated with CRC leaders across the state, and at the national level to increase overall CRC screening. The CCPN is working actively with primary care providers, FMC's, FQHC's, hospital systems and other healthcare/public health organizations to increase screening uptake. Thanks to the generous contribution of gastroenterologists and anesthesiologist accross the State who waive their professional fees, we are able to provide screenings at lower cost, and ensure the continued commitment of gastroenterologists and anesthesiologists, by ensuring patient compliance to procedure through patient navigation. The CCPN's success is grounded in having strong partnerships among a wide range of organizations across SC. These partnerships include FQHCs, FMCs, the SCGA, Access Health, SCHA, SCPHCA, SCDHEC, SCCA, SCCCRC, ACS, DHHS, BCBS of SC, ~120 primary care clinics, 7 hospital systems, ~75 Board-certified gastroenterologists, 12 pathology groups, the biomedical industry, survivors, and advocacy groups.</p>

The CCPN works with several FMCs, FQHCs, and hospital systems across the state who refer low income (<200% FPL), uninsured patients to its screening program. **BACKGROUND:** Colorectal cancer (CRC) is the third leading cause of cancer death in the United States (US) and in South Carolina (SC) for men and women combined. CRC is highly preventable when individuals comply with timely screening. Sadly, participation in CRC screening (CRCS) remains underutilized across the Nation. Numerous barriers impact compliance to CRCS, including economic as well as demographic factors. Specifically, rurality and health inequities (e.g., race, gender, socioeconomic status, among others) directly affect CRCS participation, particularly where they are highly prevalent, as is the case in SC. In the last decade, many efforts have been implemented to increase CRCS participation. In 2021, the USPSTF made a change to its CRC screening recommendations, signifying that CRC screening should start at age 45. However, while these changes can significantly help us address the rise in early onset colorectal cancer, awareness and educational campaign must be implemented to inform South Carolinians of these changes, explain why and encourage initiation of screening at age 45+.

FUNDING PURPOSE: The additional proviso funding received from the State Legislature is intended to address all the factors mentioned in the background section. Namingly, the CCPN plans to educate and assist patients who missed their on time CRC screening due to COVID to catch up on screening. Furthermore, as the number of screening eligible patients has increased by adding patients 45 to 50 in the cohort of patients needing screening, additional resources are needed to address the screening needs for uninsured and medically underserved individuals accross the state. Finally, general populational education and awareness of CRC screening guidelines must be deployed to inform South Carolinians of the new guidelines, in order to ensure they can seek preventive cancer screenings. The CCPN will launch a statewide social media campaign that will focus on reaching individuals who previously wouldn't have qualified for screening and should now be screened. Furthermore, the campaign will focus on educate South Carolinians on the signs and symptoms and risk factors of CRC, and encourage them to speak with their primary care provider about them and consider screening.

Description	Budget	Budget expenditures
Payment of endoscopy screening colonoscopy, and pathology services, laboratory processing fees, navigation (contractual services)	\$ 110,000.00	
Payment of purchase of fecal immunochemical testing (FIT) supplies, and mailing to patients and lab	\$ 25,000.00	\$ -
Colonic preparation supplies, navigation education supplies	\$ 15,000.00	\$ -
CRC Educational material development and dissemination to promote screening participation (Contractual services)	\$ 100,000.00	
Grand Total	\$ 250,000.00	\$ -

Goals to be accomplished with the state funds received.

Goal	Description
1	Screen 300 patients for colorectal cancer using a combination of stool-based testing (FIT) and colonoscopy. These screening supplement the existing screening program deliverables.
2	Create awareness and provide education on new colorectal cancer screening guidelines to initiate screening at age 45 using a statewide comprehensive social media campaign.
3	Provide patient navigation education to encourage patients to get caught up on CRC screening that were delayed due to COVID.
4	Provide a legislative brief update report on program results

Goals to be accomplished with the state funds received.

Goal	Program Plan	Program outcome
1	Screen 300 patients for colorectal cancer using a combination of stool-based testing (FIT) and colonoscopy. These screening are supplement the existing screening program deliverables.	
2	Create awareness and provide education on new colorectal cancer screening guidelines to initiate screening at age 45 using a statewide comprehensive social media campaign.	
3	Provide patient navigation education to encourage patients to get caught up on CRC screening that were delayed due to COVID.	
4	Provide a legislative brief update report on program results.	