

The National Breast and Cervical Cancer Early Detection Program: A Foundation for Local Success

NACCHO-CityMatCH

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The Breast and Cervical Cancer Mortality Prevention Act of 1990

- ◆ Authorizes CDC to create a national breast and cervical cancer early detection program
- ◆ Describes components of a comprehensive program: management, surveillance, screening, tracking and follow-up, case management, public education, professional education, quality assurance, partnerships and evaluation
- ◆ Sets parameters for services and fiscal management

The NBCCEDP

is designed to improve the quality and accessibility of breast and cervical cancer screening and early detection services, particularly for women with limited income and no health insurance coverage

Not just a screening program...

- ◆ A spotlight on breast and cervical cancer incidence and mortality rates, stage of disease at diagnosis and disparities
- ◆ A mechanism through which access can be expanded and quality improved for all women
- ◆ An opportunity to engage a variety of partners to improve the health of the community as a whole

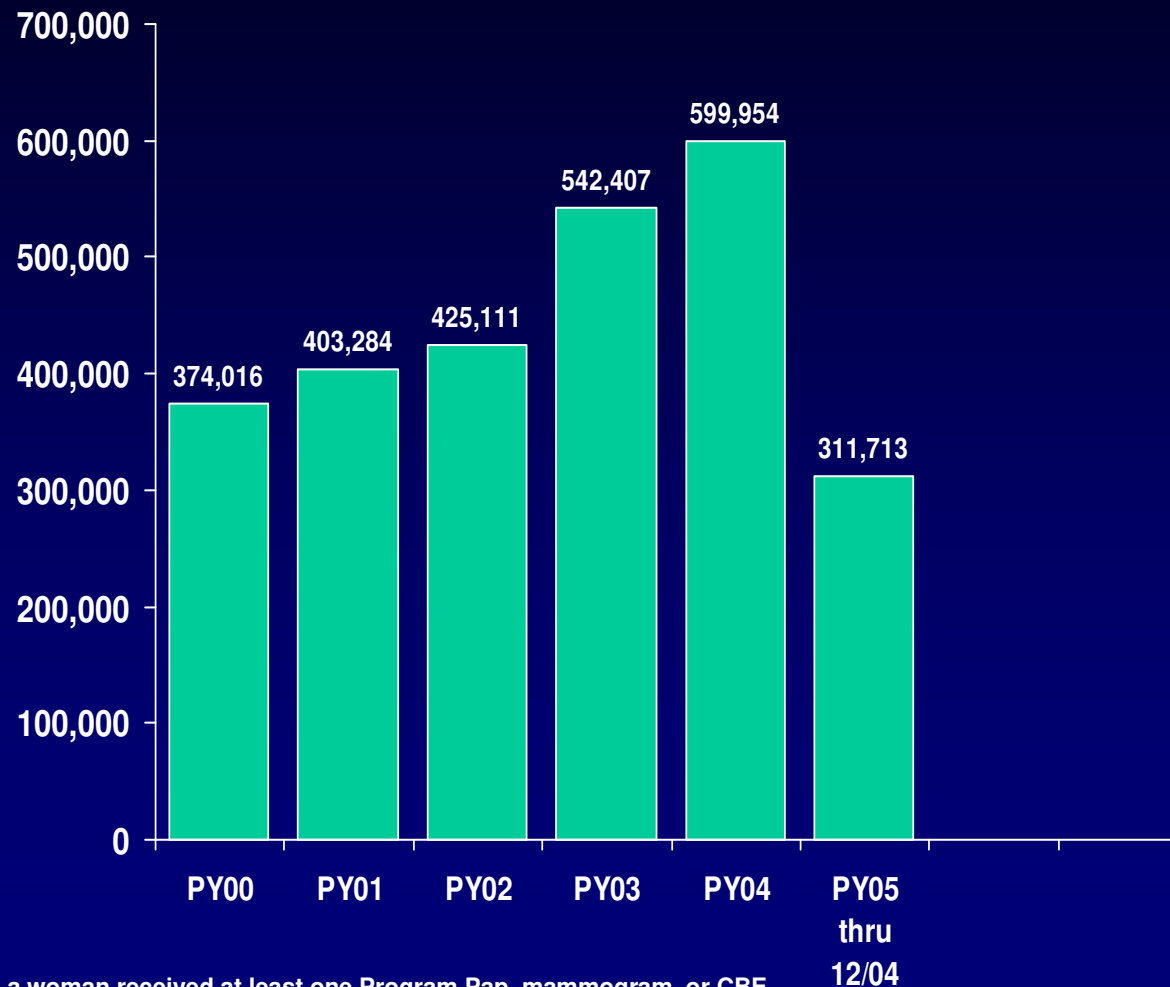
2005-06 NBCCEDP Grantees

- ◆ 50 States
- ◆ District of Columbia
- ◆ 13 Tribes or Tribal Organizations
- ◆ 4 Territories

Focus of NBCCEDP Screening

- ◆ In general, women ages 40-64
- ◆ For women receiving Pap tests, women never or rarely screened for cervical cancer (60% of invasive cervical cancer is found among these women)
- ◆ For breast cancer screening, women ages 50 – 64
- ◆ Women returning for routine mammography rescreening

Number of Women Screened Program Years 2000-2005



Screened indicates that a woman received at least one Program Pap, mammogram, or CBE
Source: NBCCEDP Minimum Data Elements through 12/31/2004, paid with NBCCEDP funds
Program Year is July 1 through June 30; PY 04 represents July 1, 2003-June 30, 2004

NBCCEDP Accomplishments

As of 12/04, NBCCEDP has:

- ◆ screened almost 2.5 million women
- ◆ performed nearly 5.8 million screening exams
- ◆ detected:
 - 22,878 breast cancers
 - 76,921 pre-cancerous lesions
 - 1,502 cervical cancers

Hallmarks of the NBCCEDP

- ◆ Grantees are all subject to the same requirements, standards and expectations
- ◆ Grantees set parameters within CDC-prescribed guidelines
- ◆ Implementation varies across grantees
- ◆ All grantees have routine feedback, ongoing Technical Assistance, training and consultation

Variation Pluses and Minuses

- ◆ Promotes creativity and innovation
- ◆ Allows grantees to respond to local circumstances, resources, problems
- ◆ Complicates comparisons
- ◆ Complicates economic analysis
- ◆ Increases the challenge of learning from one another

Performance-based Funding

distributes funds for maximum impact using a consistent approach based on priorities related to management and outcomes, standardized definitions, reasonable standards and reliable data

Performance-based Funding

- ◆ Rewards those who accomplish their goals
- ◆ Rewards those who provide the highest quality services
- ◆ Rewards those who manage funds well
- ◆ Ensures that funds are directed where they will have the most benefit

Local Health Organizations

- ◆ Must adhere to all guidelines and requirements and meet all standards set by CDC/grantee
- ◆ Should be getting regular feedback about their performance
- ◆ Should have a contact at the state or regional level to whom to direct questions and concerns
- ◆ Should ensure that recruitment strategies are evaluated and, where successful, shared.
- ◆ Don't be shy! Toot your horn!