

## Overview of the Program Management Chapter

This chapter contains guidance, sample strategies, and resources to assist in the development of thoughtful approaches to managing the program at the state, tribal, or territorial level. The overall intent of the chapter is to help program managers focus program resources (e.g., human, fiscal, informational) on improving access to quality screening and diagnostic services for breast and cervical cancer.

### Conceptual Framework

Management and evaluation are represented by a sphere that symbolizes their all-encompassing nature. The placement of management on top represents how all other parts of the program fall under this leadership. Managing these components requires a “systems approach” – understanding the bigger picture of how and why the program components interrelate to achieve optimal results.

### Purpose of Program Management

The purpose of program management is to

- Maximize available resources to implement all program components according to established policies and procedures
- Identify and leverage non-Federal resources
- Provide leadership in program planning, implementation, and evaluation
- Coordinate and administer program activities and supportive management systems

### Definition of Program Management

Program management is the act of:

- Leading, facilitating, and ensuring the strategic planning, implementation, coordination, integration, and evaluation of efficient and effective programmatic activities and administrative systems
- Developing, cultivating, and maintaining productive working relationships among staff and with partners through the creation of supportive communication channels and feedback mechanisms

### CDC Administrative Requirements That Influence Program Management

Includes policies related to:

- **Contracts and Consultants** – specifies requirements for contracting with public and non-profit or for-profit private entities
- **Matching Funds** – specifies expectations for securing matching funds in the form of non-Federal resources
- **Maintenance of Effort** – specifies how to determine the amount of non-Federal contributions to credit toward the matching funds requirement
- **Medicaid As It Relates to Match** – specifies how to account for Medicaid contributions in relation to matching funds
- **Medicare Reimbursements for Screening and Diagnostic Services** – specifies that reimbursement to program providers of clinical services may not exceed Medicare rates for corresponding procedures

- **60/40 Percent Distribution Requirement** – specifies that no less than 60% of total Federal funding must be spent on direct clinical services to program-eligible women
- **10 Percent Administrative Costs** – is considered a portion of the “40%” budget and specifies a 10% limitation on use of federal funds for administrative expenditures
- **IPR or Competitive Application** – specifies requirements for submitting periodic reports to CDC for continuation or new funding
- **FSR** – specifies requirements for reporting on the expenditure of federal funds; unobligated funds are reported here
- **Prior Approval** – specifies examples of program changes requiring prior approval from CDC, and consequences for failure to obtain such approval
- **Contractor and Consultant Approval Process** – specifies elements that must be submitted to CDC prior to obtaining approval of a contractor or consultant

### **Essential Elements of Program Management**

To meet NBCCEDP’s expectations in the area of program management, a grantee should

- Identify a staff person to serve as a program director or coordinator
- Recruit and develop a qualified and technically diverse staff
- Develop an annual work plan containing specific, measurable, time phased, and realistic goals, as well as objectives, activities, and performance measures for each program component
- Implement NBCCEDP components
- Develop an accurate budget request that corresponds with the program’s work plan and meets the administrative requirements and guidelines of the NBCCEDP
- Establish a sound fiscal system that tracks and monitors program expenditures and ensures the accurate and timely reimbursement of services contracted by the program
- Prepare and submit required reports (e.g., progress reports, financial status reports) to CDC in a timely manner
- Develop mechanisms for consultation with tribal governments and native people to enhance breast and cervical cancer screening activities in tribal communities

### **Competencies Needed to Implement Program Management**

Staff responsible for management need the ability to

- Develop and nurture a strong, cohesive team of qualified and technically diverse staff
- Assume a leadership role by inspiring and mobilizing others
- Build partnerships with other organizations, agencies, and individuals
- Communicate effectively with staff, program partners, agency management teams, CDC program staff, and providers
- Initiate and guide long- and short-term planning processes

- Develop, track, report, and manage complex budgets

Staff responsible for management need knowledge in

- NBCCEDP policies, procedures, and requirements
- Administrative and fiscal requirements and practices of the state, territory, or tribe
- Methods for evaluating program performance and outcomes

## Overview of the Data Management Chapter

This chapter provides guidance and resources for collecting and analyzing data to characterize screening, diagnostic follow-up, and treatment efforts; monitoring data collection and analysis efforts; reporting results to CDC; and using results for program improvement.

### Conceptual Framework

Data Management is represented as a circle surrounding Screening and Diagnostic Services, indicating its focus on this component. Data, especially the results of the screening and diagnostic services, should be used to inform and evaluate each of the other program components.

### Purpose of Data Management

The purpose of data management is to ensure the availability of high-quality data for program planning, quality assurance, and evaluation.

### Definition of Data Management

Data management is the ongoing, systematic collection, analysis, and interpretation of data for

- Planning
- Implementation
- Quality assurance
- Evaluation of recruitment, screening efforts, results, diagnostic follow-up, and treatment

### CDC Requirements Regarding Data Management

Aspects of this manual relevant to data management are

- **Requirements for the Inclusion of Data in the MDEs** – specifies scenarios in which screening and diagnostic MDEs are required and quality standards for those data
- **Requirements for Data Sharing** – specifies CDC requirements for responding to MDE data requests for research purposes

To meet NBCCEDP's expectations in the area of data management, a grantee should

- Establish and maintain a data system to collect, edit, manage, and continuously improve the data needed to track a woman's receipt of screening/re-screening, diagnostic, and treatment services
- Establish a system that provides routine and ad hoc reports for program management
- Establish mechanisms for reviewing and assessing the completeness, accuracy, and timeliness of data collected by the grantee
- Establish protocols to ensure the security and confidentiality of all data collected
- Utilize existing systems to collect and analyze population-based information on demographics, incidence, staging at diagnosis, and mortality from breast and cervical cancer

### Competencies Needed to Implement Data Management

Staff responsible for data management need the ability to

- Collect data
- Enter and edit data
- Assess data quality
- Analyze and interpret data
- Prepare data reports
- Evaluate quality of data systems

Staff responsible for data management need knowledge in:

- CDC requirements for MDEs
- Data system hardware and software
- Database design and programming, particularly for those programs that do not use the Cancer Surveillance and Tracking (CaST) system
- Cancer registries and other population-based data sources for surveillance

## **Overview of the Evaluation Chapter**

This chapter provides an overview of evaluation, rationale for conducting evaluation, and resources for successful evaluation practices.

### **Conceptual Framework**

Management and evaluation are represented by a sphere that symbolizes their all-encompassing nature. Evaluation is placed on the bottom to show it is the foundation of successful operation of all components individually and together.

### **Purpose of Evaluation for the NBCCEDP**

The purpose of program evaluation is to assess the quality, implementation, effectiveness, and efficiency of the overall program and components and gather useful information to aid in planning, decision making, and improvement.

### **Definition of Evaluation for the NBCCEDP**

Evaluation is defined as the systematic review of the operations and outcomes of a program in order to inform future planning. CDC expects grantees to review progress in meeting objectives and indicators of performance with CDC staff during regular conference calls and/or site visits. Grantees should evaluate all component activities routinely and use results to improve program planning and implementation. Performance evaluation will be measured by the extent to which there is an evaluation plan for each component and evaluation results are used to improve program.

To meet NBCCEDP's expectations in the area of evaluation, a grantee should

- Design evaluation activities with the explicit purpose of improving the quality, effectiveness, and efficiency of a program's operations, emphasizing appropriate methods to ensure the program is operating as intended, and program standards for quality are being met
- Integrate evaluation activities within each program component
- Use evaluation findings as the foundation for overall program planning, monitoring, and improvement

### **Competencies Needed to Implement Evaluation**

Staff responsible for evaluation need the ability to

- Assess program outcomes
- Monitor program processes and performance of program
- Analyze evaluation data and results
- Present evaluation findings

Staff responsible for evaluation need knowledge in

- The BCCEDP and its workplan
- Program monitoring and evaluation
- Surveillance and data management
- Data tracking and monitoring

## **Overview of the Recruitment Chapter**

This chapter contains sample strategies and resources to assist in the development of a thoughtful approach to recruiting priority women into the program.

### **Conceptual Framework**

Recruitment is one of two structural links that tie partners directly to delivery of screening and diagnostic services. Recruitment creates demand from and provides a link to services for women most in need. Recruitment includes educating women about the importance of screening, explaining the services available, and addressing any barriers to screening.

### **Purpose of Recruitment**

The purpose of recruitment is to increase the number of women in priority populations who use breast and cervical cancer screening services by raising awareness, educating women, addressing their barriers, and motivating eligible women to complete screening exams as part of their routine health care.

### **Definition of Recruitment**

Recruitment is defined as the act of seeking to enroll program-eligible women into breast and cervical cancer screening services. Recruitment may be comprised of three types of activities:

- Public education involves the design and delivery of clear and consistent messages about breast and cervical cancer screening
- Outreach relies upon comprehensive, tailored, population-specific strategies designed to reach and bring women from priority populations into clinical screening services
- Inreach involves approaching program-eligible priority women who are using other health services (e.g., getting a flu shot, receiving care for diabetes or heart disease, etc.) and recruiting them for program enrollment

### **Essential Elements of Recruitment**

To meet NBCCEDP's expectations in the area of recruitment, a grantee should

- Engage partners, including representatives from priority population groups, in assessing needs and developing comprehensive plans for public education, outreach, and inreach
- Develop and revise as appropriate a public education and comprehensive outreach workplan that includes a multi-level approach—an appropriate mix of broad-based awareness raising, community education, and one-on-one outreach strategies
- Develop and use methods to evaluate the effectiveness of approaches used in recruiting women into screening and meeting projected screening numbers
- Place priority for using program resources on implementing strategies/activities that are most effective in recruiting program eligible women from priority populations for screening

### **Competencies Needed to Implement Recruitment**

Staff responsible for recruitment need the ability to

- Conduct a comprehensive community assessment
- Use data to develop targeted outreach strategies

- Work effectively with partners and coalitions
- Use program data to plan and evaluate activities
- Recruit and supervise appropriate outreach personnel

Staff responsible for recruitment need knowledge in

- Use of data for identification of the priority populations and where they are located
- Tailoring recruitment strategies to the cultural values, norms, and behaviors of the priority populations the program serves
- Working with existing social networks in various unique cultural communities
- Barriers to breast and cervical cancer screening and follow-up and how to help women overcome them
- Use of behavioral change theories (e.g., Stages of Change, Health Belief Model, Social Ecological Theory, etc.)

(See the Program Management Chapter, Staffing and Personnel Management, for additional information on hiring, training, supervising, and retaining staff.)



## **Overview of the Screening and Diagnostic Services Chapter**

This chapter contains the rationale for screening and outlines the core screening, diagnostic, and case management services offered through the NBCCEDP. It also provides information about how these services work together to result in timely and appropriate clinical services for our clients.

### **Conceptual Framework**

Screening and Diagnostic Services are represented as the core of the program. Assuring the availability and quality of these services to low-income, underserved women is the intent of the NBCCEDP. All other program components are related to and support the delivery of screening and diagnostic services to those most in need.

### **Purpose of Screening and Diagnostic Services**

The purpose of screening and diagnostic services is to detect pre-cancerous lesions or cancerous lesions at the earliest stage and refer promptly for treatment by

- Establishing and maintaining a comprehensive provider network for screening and diagnostic services and treatment referrals that will maximize access and quality care for women enrolled in the program
- Assuring rescreening is provided at regular intervals for all women enrolled in the program

### **Definition of Screening and Diagnostic Services**

Screening and diagnostic services can be defined as specific and appropriate clinical services to detect breast and/or cervical abnormalities.

For this program, services include screening, diagnosis, and case management.

Screening procedures include clinical breast examination (CBE), mammography, pelvic examination, and the Papanicolaou test (also called the Pap test).

Diagnostic services are the tests designed to confirm or rule out cancer when screening tests yield abnormal results.

Case management facilitates essential support services for program women who have an abnormal screening result and are assessed to need support services.

### **Essential Elements of Data Management**

To meet NBCCEDP's expectations in the area of screening and diagnostic services, a grantee should

- Collect essential patient information (i.e. demographics, symptoms, screening history, screening tests results, diagnostic evaluation, final diagnosis, and notation of treatment referrals where appropriate) on the women served
- Report this information semi-annually to the CDC in a standardized clinical record (the MDEs)

### **Competencies Needed to Implement Screening and Diagnostic Services**

Staff responsible for screening and diagnostic services need the ability to

- Budget for screening and diagnostic services
- Recruit and retain a comprehensive provider network

- Develop and promote tracking of clinical results to ensure the timeliness and completeness of follow-up
- Assess relationships between planned care and approved protocols for care
- Assess clients' needs for support to remove barriers to screening and follow-up
- Develop and promote recall systems that include patient reminders
- Communicate and collaborate effectively with clinical providers

Staff responsible for screening and diagnostic services need knowledge in

- Cervical cancer prevention
- Breast and cervical cancer early detection
- Breast and cervical cancer screening, diagnostic, and treatment referral services
- Tracking systems for data management
- Client assessments of barriers to follow-up
- Rescreening reminder systems

## Overview of the Partnerships Chapter

This chapter contains sample strategies and resources to assist in the development or enhancement of key partnerships. The chapter will provide guidance about how to expand and engage your partners and sustain and evaluate their efforts.

### Conceptual Framework

Partnership is represented as an extension to show that partnerships expand the reach, capacity, and resources of the NBCCEDP. Partnerships influence all components and partners play a key role in advancing the broader goals of the NBCCEDP—enhanced access and quality for all women.

### Purpose of Partnerships

The purpose of developing partnerships is to help programs reach their goals by

- Expanding and maximizing resources
- Coordinating program activities
- Overcoming obstacles to the recruitment of NBCCEDP priority populations
- Promoting the delivery, improvement, and evaluation of breast and cervical cancer screening services

Partnerships can offer

1. Additional skills and expertise, e.g., planning, design, and implementation of community assessments; provision of training and technical assistance; development and distribution of educational materials; planning, design, and implementation of program evaluation
2. Increased understanding of, and access to, priority populations for enhanced outreach, inreach, and public education
3. Increased opportunities for promotion of the NBCCEDP
4. Coordination of public education about the issues related to breast and cervical cancer
5. Advice on key medical and community issues, e.g., participation on medical advisory board and community advisory groups; assistance with guideline development
6. Increased access to data and interpretation of data
7. Links to diagnostic services, treatment, survivorship counseling and care
8. Advocacy for policy change
9. Individualized support for patients (e.g., transportation, translation, etc.)
10. Additional venues through which quality screening can be provided

### Definition of Partnerships

Partnerships can be defined as groups of individuals brought together by an established reciprocal agreement for sharing resources and responsibilities to achieve common goals and derive mutual benefits. The basic assumption of a partnership is that when individuals or organizations join together, they will be more successful in their collective efforts than they could be as individual players. A partnership can be a relationship between as few as two parties or it can involve a larger number of

individuals and organizations. These larger groups are often referred to as a network, coalition, consortium, or collaboration. The strongest partnerships occur when both mutual and individual goals are served by the joint agreement.

### **Essential Elements of Partnerships**

To meet NBCCEDP's expectations in the area of partnerships, a grantee should

- Seek out and establish partnerships and coalitions with, and among, entities such as public health agencies, public and private businesses, service and social groups, non-profit agencies and institutions, medical care providers, and interested individuals representatives of priority populations who are willing to share their resources to assist the grantee in meeting program goals, objectives, and activities
- Recruit partners with appropriate knowledge, skills, and resources based upon current and anticipated program needs

### **Competencies Needed to Implement Partnerships**

Staff responsible for developing effective partnerships need the ability to

- Work effectively with diverse groups of people, which include both professional and community partners from a variety of cultural and educational backgrounds
- Facilitate meetings in an organized and efficient manner
- Help others organize and accomplish complex tasks
- Focus on both the task (accomplishing the goals and mission of the partnership) and process (how the partners relate to each other)

Staff responsible for developing effective partnerships need knowledge in

- Stages in the development of partnerships and coalitions
- Methods for facilitating groups in developing a common mission
- Group dynamics
- Group problem solving techniques
- Reciprocity and how to work within that framework
- Conflict management and resolution strategies
- Data and assessment tools needed for action planning
- Advocacy strategies to inform policy and legislation related to breast and cervical cancer screening and treatment
- Cultural differences and disparities

## **Overview of the Professional Development Chapter**

This chapter contains guidance, sample strategies, and resources to develop a thoughtful approach to strengthening clinical practice through professional development.

### **Conceptual Framework**

Professional Development is one of the two structural links in the NBCCEDP framework that tie Partnership directly to delivery of Screening and Diagnostic Services. Professional Development enhances service delivery.

### **Purpose of Professional Development**

The purpose of professional development is to

- Affect health care providers' knowledge, attitudes, and behaviors about breast and cervical cancer early detection
- Promote the current program guidelines for breast and cervical cancer screening
- Disseminate evidence-based breast and cervical cancer prevention and early detection education materials to providers, program staff, and regional staff
- Build professional development resources through partnerships with professional organizations and academic institutions

### **Definition of Professional Development**

Professional development is the act of improving by expanding, re-directing, or refining the knowledge, skills, and attitudes of health care professionals to perform their jobs competently and with sensitivity for diverse patient cultures. It may include guidance to enhance delivery structures, which in turn support effective clinical practices that result in better outcomes.

### **Essential Elements of Professional Development**

To meet NBCCEDP's expectations in the area of professional development, a grantee should

- Develop and revise, as appropriate, a professional development work plan
- Establish professional development program priorities based upon issues identified from the review of program-specific data, assessment of health professionals' training needs, and available resources
- Establish the priority audience for professional development as program-funded providers
- Partner with appropriate professional organizations and institutions to enhance resources necessary for selecting and implementing effective designs

### **Competencies Needed to Implement Professional Development**

Staff responsible for professional development need the ability to

- Assess and prioritize professional development strategies
- Work collaboratively with the program manager and partners for professional development activities
- Plan and deliver training programs

- Evaluate the effectiveness of training programs

Staff responsible for professional development need knowledge in

- Adult learning theory
- Skills-based training
- Professional development marketing
- NBCCEDP breast and cervical cancer screening and diagnosis policies and guidelines

## **Overview of the Quality Assurance and Improvement Chapter**

This chapter provides guidance on how to monitor, assess, and improve the quality of the clinical services provided through the NBCCEDP. This will help ensure a program meets benchmarks outlined in the data quality indicator guide of the NBCCEDP Minimum Data Elements.

### **Conceptual Framework**

Quality Assurance/Quality Improvement is represented as an inner circle within the NBCCEDP Conceptual Framework to show its direct connection to Screening and Diagnostic Services. It works in concert with the Data Management and Evaluation components to monitor, assess, and improve program outcomes. Quality Assurance is on the top representing the Program Management responsibility of assuring quality care. Quality Improvement is on the bottom showing its proximity to evaluation.

### **Purpose of Quality Assurance and Improvement**

The purpose of quality assurance and improvement is to

- Ensure the quality of services delivered through the NBCCEDP
- Monitor performance and identify opportunities for improvement
- Plan effective strategies for improving services

### **Definition of Quality Assurance and Improvement**

Quality assurance and improvement is the act of assuring the quality of clinical services and continually improving the quality of these services.

### **Essential Elements of Quality Assurance and Improvement**

To meet NBCCEDP's expectations for quality assurance and improvement, a grantee should

- Work with medical advisory boards or consultants to oversee the quality of clinical services being delivered
- Ensure program providers use established clinical practice guidelines and protocols reviewed and endorsed by the medical advisory board or consultants
- Establish a system for monitoring program services to identify potential problems and/or best practices
- Assess data regularly for opportunities to improve outcomes for women served by the program
- Initiate improvement strategies and ensure a continuous cycle of monitoring until outcomes demonstrate improvement has been sustained

### **Competencies Needed to Implement Quality Assurance and Improvement**

Staff responsible for quality assurance and improvement need the ability to

- Collaborate with the medical advisory boards or consultants and other professional experts as necessary
- Provide feedback and reports designed to maintain or improve clinical outcomes

Staff responsible for quality assurance and improvement need knowledge in

- How to use the NBCCEDP MDEs to identify problems and monitor outcomes of quality improvement interventions
- Data collection and analysis
- Breast and cervical cancer screening and diagnostic protocols
- Tools for monitoring, assessment, and improvement