Switch Workshop 2A: Deliver the message that CRC screening is not so bad (do it for friends and family)

Facilitator: PatriciaBonifer-Tiedt Scribe: Mary Ann Troyano

Who needs to change? Eligible individuals who go without screening

How should they change? Facilitate relationship with provider, become aware of what is available, reduce barriers

| Direct the Rider: | Motivate the Elephant: | Motivate the Elephant: | Shape the Path: | Shape the Path: |
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| Find the Bright Spots | Find the Feeling | Shrink the Change | Tweak the Environment | Rally the Herd |
| Patient-to-patient word- of-mouth | Opportunity—hope for the future. "Do it for your friends and family" | It is only 1 day every 10 years! | Make it easy for patients to make an appointment by having "one click" online or one phone number that goes directly to appropriate person who can schedule appointments—no transfers, no long holds | Announcements saying "this many people have been screened in your neighborhood" to encourage others to get screened. Create competition Encourage people to talk to others Buddy bracelet |



Switch Workshop 2B: Deliver the message to Increase CRC screening

Facilitator: Erica Breslau Scribe: Erica Childs Warner

Who needs to change? Opinion leaders

How should they change? Priority on parallel between CRC and breast. Increase visibility, funding and emotional ties.

| Direct the Rider: | Motivate the Elephant: | Motivate the Elephant: | Shape the Path: | Shape the Path: |
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| Find the Bright Spots | Find the Feeling | Shrink the Change | Tweak the Environment | Rally the Herd |
| Advocacy: Susan G. Komen Attaching CRC screening with other preventive care (mammogram, flu shots) Use of humor in messages Use of personal stories Personalize social messaging Use of survivors and champions (faith-based) | Tailor to the audience of leaders (with survivors) making it personal Build trust and show value of screening Tapping the competitive nature of men | Make it automatic Screen 80 and save 1 life (messaging to unions) | Utilize patient navigators Make it the social norm to talk about it and to get screened. Tailor messaging for the individual Use of sports—March Madness (blue in uniforms) "Madness not to get screened" Teamsters/unions | Use of buttons as badges of honor (also use t-shirts) Attach CRC to other screenings Tap into men and sports |



Switch Workshop 2C: Using increased access to health care as an opportunity to target the new 50-year-olds accessing health services

Facilitator: Carrie Klabunde Scribe: Suzette Smith

Who needs to change? Change perception to start screening earlier (age 47?) and target 50-year-olds (even doctors), find them through: primary care, DMV, AARP, insurance companies

How should they change? Create discount or incentives: discounts for good behavior (educing risks); incentives for employers; life insurance discounts; shrink the steps; create a check-off like car care

| Direct the Rider: Find the Bright Spots | Motivate the Elephant: Find the Feeling | Motivate the Elephant: Shrink the Change | Shape the Path: Tweak the Environment | Shape the Path: Rally the Herd |
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| Kaiser | Use family ties to Motivate; use children to | Decrease steps -Direct access to FIT or | Patient navigation | Work place wellness |
| NYC (C5) has patient navigators | do the ask and use so- cial media | colonoscopy | Bring screening to the patient | Make screening a "societal norm" |
| "Widely known" that at | Create positive feeling | Outreach | Work place wellness | Use class reunions |
| 65 window opens for Medicare | (Do not focus on the procedure, but on living longer and the fact that | Piggyback with other preventive care (e.g. flushot) | Educate the public, make individuals aware | Use family reunions to talk about family history |
| In KY, gift cards for screening "prevention | it is only every 10 yrs) | Move care together | EHRs | Use community |
| pays" | Mix up the message and target populations | (comprehensive service under one roof) | "It's not so bad" — | (barbers , farmers, churches) |
| Allegheny (PA)—\$ for meeting steps | Don't focus on the many | Keep focus; don't | message to entire staffs of medical practices, not | Use unique factors |
| Pink Ribbon | steps—saps the feeling | overwhelm with too many tests/options | just doctors | (ethnicity) |
| Create a group to encourage "Blue Star" | Message: "You may look young, but your colon is 50" | New message: "Screen and Treat" | | Spouses |



A Dialogue for Action™ on Colorectal Cancer Screening:

Prevention Now for a Healthier Tomorrow

Renaissance Baltimore Harborplace Hotel • Baltimore, Maryland • March 23 – 25, 2011

Switch Workshop 2D: Increasing CRC screening in a time of tight budgets and scarce resources

Facilitator: Karen Peterson Scribe: Sarah Abou-El-Seoud

Who needs to change? Third party payers: insurance companies, Medicare and Medicaid

How should they change? Use insurance lists to educate patients send yearly reminders to get screened (to individuals 50+), inform patients about benefits and/or offer incentives to get screened.

| Direct the Rider: | Motivate the Elephant: | Motivate the Elephant: | Shape the Path: | Shape the Path: |
|---|--|---|--|--|
| Find the Bright Spots | Find the Feeling | Shrink the Change | Tweak the Environment | Rally the Herd |
| Insurance companies that send out emails or statements with health tips Companies that call members to talk about health programs and incentives offered as part of benefits Dentists do a good job of getting patients in through postcard reminders and phone calls | Appeal to morality; make the to focus on prevention—CRC screening is "the right thing to do" and that their competitors are doing it | Reduce the burden on the insurance company by doing the majority of the work. Provide text and design for emails/letters If doing regular mail, find a sponsor to pay for the printing Identify eligible patients 50+ with EHRs and/or email individuals just turning 50 about the screening benefit | Make it easy: put together a campaign (e.g. record messages for patients on hold, create text and design for email and regular mail) and share with insurance companies to distribute to members | Use bright spots to highlight examples of groups doing well—those making an effort to increase screening (e.g. report card) Numbers matter: use quantitative examples of the good in a positive light |



Switch Workshop 2E: Optimizing local or state government to increase CRC screening

Facilitator: Mary Doroshenk Scribe: Bethany Biskey

Who needs to change? State and local agencies at all levels and elected officials on city councils and state legislatures

How should they change? Influencing the budget, mindset—prevention (cost), medical decisions, "Boston Day-Off for screening" for city employees, break down dollars and cents of prevention similar to Heath's "Glove Effect" story

| Direct the Rider: Find the Bright Spots | Motivate the Elephant: Find the Feeling | Motivate the Elephant: Shrink the Change | Shape the Path: Tweak the Environment | Shape the Path: Rally the Heard |
|--|---|--|--|---|
| "Champions" and survivors (especially survivors who are legislators) | Personal story/ Survivors/Faces of colon cancer | Ask your legislator: "Have you had a colono- | Pledge forms for members of congress/local reps—ask them to | Co-sponsoring Identify spokesperson |
| NYC's C5 program | Humor | scopy?" "What is an easy thing | commit on the spot Peer pressure environ- | Change the stigma |
| Breast and Cervical Program | Legislative cancer caucus | you can help with?" | ment/Town hall—make them feel there is only | Lobby day Change the message |
| Pike County, KY (local leadership) | Connecting w/the com- munity, coaches and religious leaders | "What do you spend on healthcare?" | one choice Use community leaders | "social justice" |
| NE saved money | Involve survivors and family story; Family as | "Have you ever been to your local health depart-ment?" | (Pastors) as advocacy base | Know what you want when you get in the door |
| MD tobacco refund— long term investment by Government | motivators: "Have you had one?" | Learn to speak their lan- guage (state reps, etc.) | Ask your elected officials in the media spotlight -tweet or video tape | Small business Champions |
| | Family can show full spectrum and tell prevention story | Make it local—their constituency | Develop a relationship with staff as well as members | State chamber and other lobbyists/orgs, Competition between |
| | Disparity—cost of Prevention vs. none | | Education, be specific | local businesses |



Switch Workshop 2F: Optimizing community resources to Increase CRC screening

Facilitator: Frank Berger Scribe: Stephanie Guiffré

Who needs to change? Insurance companies

How should they change? Cover the uninsured

| Direct the Rider: | Motivate the Elephant: | Motivate the Elephant: | Shape the Path: | Shape the Path: |
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| Find the Bright Spots | Find the Feeling | Shrink the Change | Tweak the Environment | Rally the Herd |
| Kaiser provides services to the uninsured through a collaboration with community health centers in San Diego Blue Cross Blue Shield Foundation in SC screens the underserved through grant funding. They receive ongoing money for 340 colonoscopies | | Fund Screenings Give them the resources to make it happen - Collaboration - Evidence of need | Create a committee to impact the change. Include: -GIs -PCP -Pharma reps - Oncologists - And their social networks | Good press Feed their egos (E.g. Award Program) Put a face on the issue (appeal to emotion) Show success of what is working Keep looking for ways to sustain the change Say "Thank You" |

