

# Voices from the Field

August 24, 2021

## ACCSIS Appalachia

**A Q&A with the Muskingum Valley Health Centers – Malta (Malta, Ohio) ACCSIS Implementation Team on how they were able to successfully navigate the COVID-19 pandemic**  
*Kayla Bowman (Clinical Manager and Health Center Champion), Maryjo Eddleblute (Care Coordinator), and Kylie Emmert (Population Health Data Analyst Manager) shared their perspectives.*

### **What were your biggest challenges during the COVID-19 pandemic?**

A big challenge was finding ways to reach out to patients – patients do not always answer phone calls and sometimes you don't know whether or not mail is received. We had to figure out what worked best for our patients. Face-to-face meetings make it easier to educate patients about needed health care and answer their questions, but because everyone jumped in to make telehealth work, we were able to implement it smoothly. Another challenge was running vaccine clinics while working through some staffing changes and opening back up to provide more in-person care.

### **What did you do to try to overcome challenges with CRC screening during this time?**

We were busy updating our plan for colorectal cancer screenings when we learned that we needed to establish vaccine clinics immediately. We had to put the CRC screening project on hold temporarily because our entire staff was in the field giving vaccines. As soon as we were able to, we started a period of trial and error to address CRC screening. We looked at our reports and discussed where we could make some improvements and what was possible during the pandemic because routine care and hospital procedures like colonoscopies were “on hold.” We talked about what WE could do for our patients – whether it was FIT tests or Cologuard for an at-home alternative or offering incentives, like gift cards, for completed tests. It was really a group effort to find out what would work best.



*Members of the Muskingum Valley Health Centers – Malta Implementation Team Malta, OH (Pictured: Kayla Bowman & Maryjo Eddleblute; Not pictured: Kylie Emmert)*

**Names:** Kayla Bowman, Maryjo Eddleblute, Kylie Emmert  
**Organization:** Muskingum Valley Health Centers  
**Location:** Malta, OH  
**Research Project:** ACCSIS-Appalachia

When we added a staff member, we were better able to operate the vaccine clinics along with doing more outreach for CRC screening. That is where working with Buckeye Health Plan (a managed care health insurance entity) came in to the picture. Buckeye Health Plan was offering assistance for outreach, and we were able to leverage their assistance to complete CRC outreach at a time when we did not have the staff available to do it. Now we are doing more outreach, and we are considering having one of the Buckeye Health Plan representatives call patients from our office in the hopes of continuing to get a positive patient response to our outreach efforts.

**Your health center maintained its colorectal cancer screening rates during the pandemic. Were there others things you did that contributed to that?**

Staying open helped. Some other agencies were not able to stay open and function properly. When we had a full team, everyone was contributing to push through the challenges and to push forward with CRC screening outreach. We didn't stop, and we didn't give up. We actually grew, and we had more patients coming in for care.

There are definitely downsides of having fewer in-person meetings with patients, but it also provided an opportunity. We were able to focus our attention on identifying patients in need of screening and mailing information to everyone who should get it. Our efforts to reach patients with information they needed was an upside, despite the drawbacks of fewer face-to-face conversations.

**What advice would you give to other health centers that struggled with CRC screening during the pandemic and in its' aftermath?**

Consistency is important. All of us worked on CRC screening. We were all involved in figuring out what would work best for individual patients. What works for one patient is not going to work for every patient. We wanted to find what worked best for them – an email, a phone call, or mailing them a FIT kit -- and we made sure they got what worked. Also, following through with everything – keeping track of who you talked to, and who you sent things to and then following up to see if patients have questions or need to complete a screening test or schedule an appointment. Consistency, personalized patient care, and follow-up are all important.