PARTNERSHIP STRATEGIES AND SCREENING OUTCOMES IN COLORECTAL CANCER PATIENT NAVIGATION PROGRAM: A SCOPING REVIEW

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Introduction
Challenges in colorectal cancer (CRC) screening exist across diverse population groups. The CRC Patient Navigation Program (PNP) was designed to improve screening participation through collaboration with strategic partnerships and key stakeholders. This review assesses the nature of partnership strategies within CRC PNPs and their outcomes to acknowledge various approaches and support better planning in different contexts.

Methods
A comprehensive literature search was conducted using PubMed, Scopus, and Web of Science following the PRISMA-ScR 2020 protocol. Eligible studies were original research articles in English from 2014-2024 that reported on partnerships in CRC PNP and their related outcome.

Results
Of 157 identified studies, 14 met inclusion criteria all from the United States. The studies involved diverse populations including African American, Vietnamese American, Hispanic and other socioeconomically disadvantaged groups. CRC PNP partnerships were formed with numerous institutions, research bodies, academic, community, and non-governmental organisations.

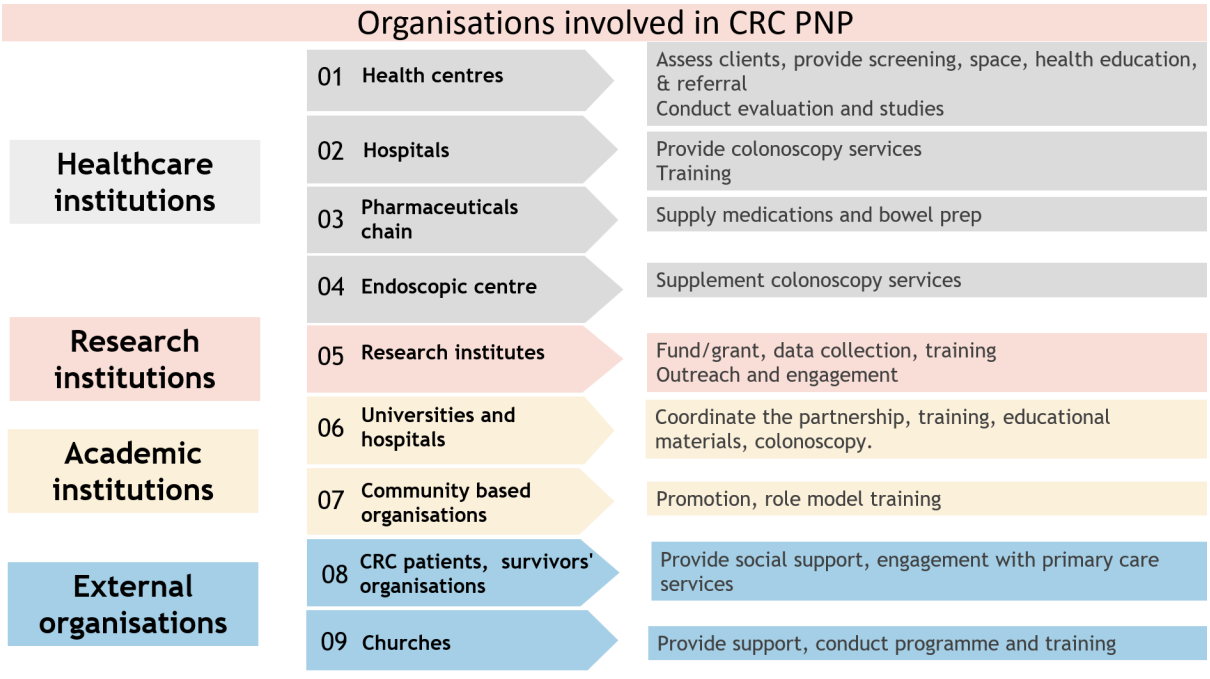

Figure 1. Organisations involved in CRC PNP

The collaborations resulted in positive improvements in screening uptake 56.7-97.3%, adherence to screening recommendations 66.7%, CRC detection rate 0.2-0.6%, bowel preparation quality (more than 90% adequacy), and less than 1% late cancellation. Qualitative findings emphasised that community participation built on trust and local empowerment.

Discussion
The partnership within PNP CRC plays a substantial role in overcoming structural and socioeconomic barriers to screening. The finding valued the multisectoral collaboration in improving CRC screening outcomes. Establishing performance indicators may assist in evaluation. Program outcomes open new avenues for future study into successful CRC screening.

Keywords: Patient navigation program, colorectal cancer, partnership, screening uptake, outcome