

# Increasing Cancer Screening: Provider Assessment and Feedback

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## Task Force Finding and Rationale Statement

### Intervention Definition

Provider assessment and feedback interventions both evaluate provider performance in delivering or offering screening to clients (assessment) and present providers with information about their performance in providing screening services (feedback). Feedback may describe the performance of a group of providers (e.g., mean performance for a practice) or an individual provider, and may be compared with a goal or standard.

### Task Force Finding (October 2009)

The Community Preventive Services Task Force recommends provider assessment and feedback interventions on the basis of sufficient evidence of effectiveness in increasing screening for breast cancer (mammography), cervical cancer (Pap test), and colorectal cancer (FOBT). Evidence was insufficient, however, to determine the effectiveness of this intervention in increasing colorectal cancer screening using methods other than FOBT.

### Rationale

The Task Force finding is based on an update of a previous review. The findings from this update are unchanged from the previous Task Force findings because only one new study of provider assessment and feedback was identified. Although this study evaluated colorectal cancer screening by proctoscopy in addition to FOBT, these results could not be disaggregated, so they contribute little to filling the evidence gaps on the effects of provider assessment and feedback on increasing invasive colorectal cancer screening tests.

Recent changes in health care systems (e.g., integration of computerized medical records into practice) are making it increasingly necessary to consider single-component interventions such as provider assessment and feedback within a broader context of how care is delivered in a given health care system. Thus, it is appropriate to consider the role that provider assessment and feedback can play to improve the delivery of recommended cancer screenings in relationship to other elements of the specific health care system.

### Publications

Sabatino SA, Lawrence B, Elder R, Mercer SL, Wilson KM, DeVinney B, Melillo S, Carvalho M, Taplin S, Bastani R, Rimer BK, Vernon SW, Melvin CL, Taylor V, Fernandez M, Glanz K, Community Preventive Services Task Force. Effectiveness of interventions to increase screening for breast, cervical, and colorectal cancers: nine updated systematic reviews for The Guide to Community Preventive Services. *Am J Prev Med* 2012;43(1):765-86.

Community Preventive Services Task Force. Updated recommendations for client- and provider-oriented interventions to increase breast, cervical, and colorectal cancer screening. *Am J Prev Med* 2012;43(1):760-4.

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### Disclaimer

The findings and conclusions on this page are those of the Community Preventive Services Task Force and do not necessarily represent those of CDC. Task Force evidence-based recommendations are not mandates for compliance or spending. Instead, they provide information and options for decision makers and stakeholders to consider when determining which programs, services, and policies best meet the needs, preferences, available resources, and constraints of their constituents.