

# Improving Colorectal Cancer (CRC) Screening in Primary Care

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## Background/Significance

- Early detection of CRC can efficiently be done by providing a referral for a colonoscopy or fecal immunochemical, or guaiac fecal occult blood kits.<sup>3</sup>
- The National Colorectal Cancer Roundtable (NCCRT) estimated that if providers achieved CRC screening of 80% of the target population by 2018, over 200,000 lives would be saved.<sup>4</sup>
- Medicare and Medicaid Services created a "bonus" reimbursement" for clinics that meet the 80% criteria called the *Medicare Star-Rating program*<sup>2</sup>
- This project clinic's performance had the lowest rating for quality measures; earning only one star out of five

## Purpose Statement

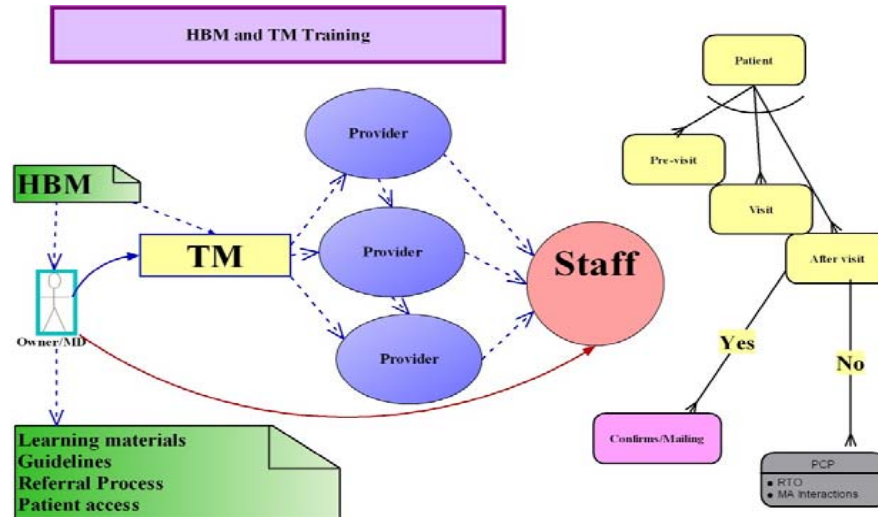
To evaluate the effectiveness of utilizing the Heath Belief Model (HBM) and the Teamlet Model (TM) on CRC screening scores.

- The specific aims for the project were:
  - 1) To provide the structure for implementing the TM and current CRC screening practices in the clinic
  - 2) To evaluate the effectiveness of the HBM and CRC screening rates in the selected clinic

## Methods

- **Setting:** A primary care clinic located in Los Angeles County, California
- **Sample:** Patients who present at the clinic aged 50 to 75 years, all genders, who are eligible for CRC screening
- **Exclusions:** patients with diagnosis of CRC or patients who are up-to-date with CRC screening
- **Measures:** CRC screening scores provided by Medical Group A (MGA) & B (MGB), chart reviews
- **Procedures:** Application of the HBM and Teamlet Training Pathway (TTP)

## Conceptual Frameworks



- The HBM was used to evaluate the perceptions of the providers and staff in the clinic<sup>5</sup>
- The TTP was used to design and manage the clinic flow in order enhance CRC screening process<sup>1</sup>

## Discussions

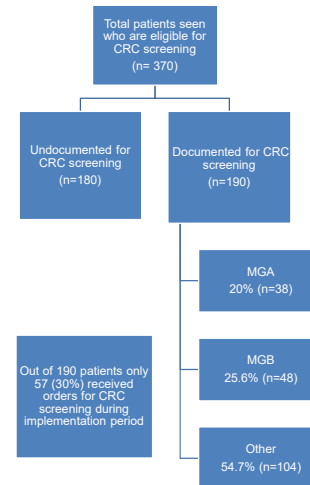
- Providers reported shortness of staff, large workload, and limited visit time with patients
- The HBM and TTP facilitated the staff and providers by helping them appreciate the importance for the CRC screening and increase engaging time with patients
- The TTP had allowed staff to be proactive in CRC screening, especially with stool testing (FIT or gFOBT)
- Understanding the population that the clinic is serving for can help identify present barriers

## Recommendations

- The application of the TTP illustrates that good teamwork and support from team members can facilitate the team to meet their goals
- A similar project could be implemented in other primary care settings and benefit an organization by identifying the same issues found at this clinic
- Implementing the TTP in larger organizations may also demonstrate different results

## Results

- Within 3 months of project implementation, 370 (54.3%) out of 692 patients were eligible for CRC screening
- 190 patients were documented to complete CRC screening: 38 (20%) under MGA coverage, 48 (25.6%) patients under MGB coverage, and 104 (54.7%) under other insurance coverage or self-pay
- Only 57 (30%) out of 190 documented patients received CRC screening orders : 18 (33%) Asian/Filipino, 12 (21%) Caucasian, 26 (43.8%) Hispanic, 1(0.2%), 0 African American
- Overall, CRC screening rates for both insurances increased more than 10%



## References

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