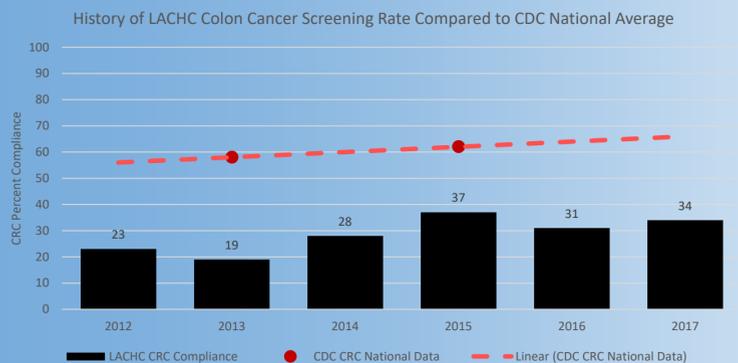


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Project Aim

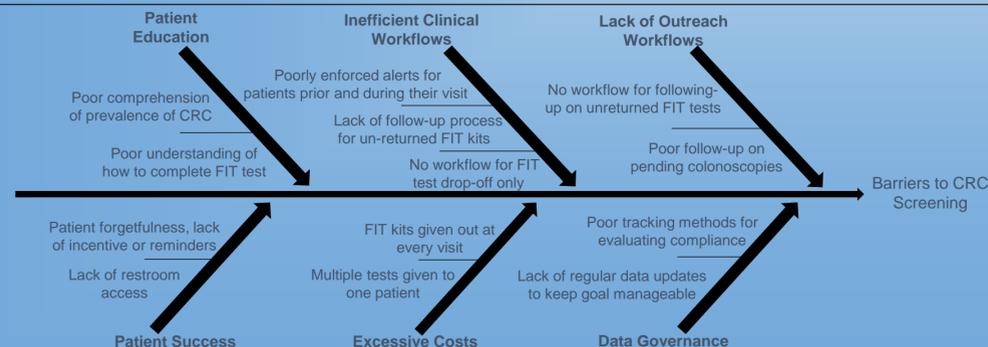
In April 2018, LACHC sought to increase Colorectal Cancer (CRC) Screening Compliance from 34% to 39% by December 2018. Despite being a UDS measure and Healthy People 2020 goal, LACHC performance was consistently substandard. This Quality Improvement Project evaluated barriers and root causes of poor CRC Screening compliance to improve the effectiveness and efficiency of current clinical workflows, develop appropriate interventions, and address this gap in care.



Root Cause Analysis

As an FQHC, the patients served by LACHC face higher prevalence of Colon Cancer rates and decreased participation in regular Colon Cancer prevention screenings. The barriers our patients face include lack of access to restrooms, limited education, low literacy rates, and unreliable transportation, all leading to poor health agency. Due to the unique circumstances our patients face, we found that our patients respond better to annual FIT tests than scheduling Colonoscopy appointments, so our efforts focused primarily on FIT test maximization.

Low compliance was attributed to poor evaluation of these distinct barriers, leading to inefficient workflows that lacked follow-up protocols. There was also deficiency in outreach processes, and substandard tracking methods that created high instances of missed opportunities for screening patients.



Key Actions & Improvements

Introduced weekly, monthly, and quarterly reports to help keep support staff motivated. These reports consisted of raw FIT test data, hits to goal data, and up-to-date information regarding PDSAs and interventions. These reports were presented at various levels of the organization increase buy-in from staff across a multitude of departments.

Implemented “Lab-Only” protocol for patients who wanted to return to the clinic just to drop off their FIT test. This allowed for better tracking of FIT tests returned by patients and reduction of tests lost.

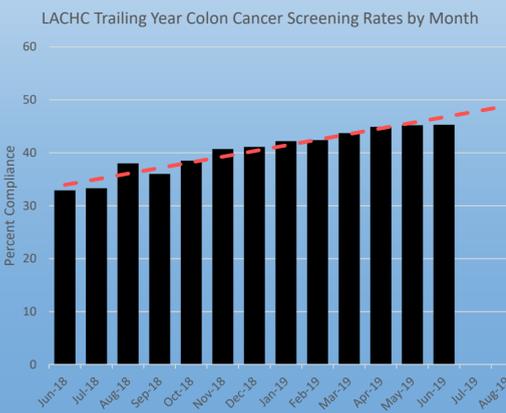
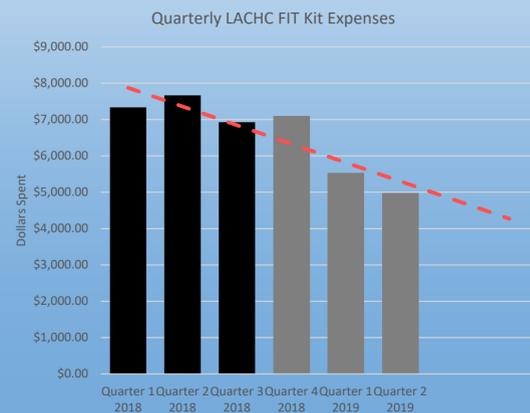
Built a more robust FIT test workflow, reinforcing the proper use of the CRC Screening alert provided by Azara and creating a detailed FIT script for MAs to use when demonstrating the test to patients. Patient education greatly improve as a result of these efforts.

Improved the FIT kit given to patients, adding a glove, a detailed local public restroom map, and a bilingual visual handout to help reduce the likelihood of patients forgetting the FIT testing process.

Developed a workflow for outreaching to patients with unreturned FIT tests that includes designating MA “champions” to follow-up with patients, disseminating patient lists weekly to champions, and creating a script for champions to follow when speaking with patients.

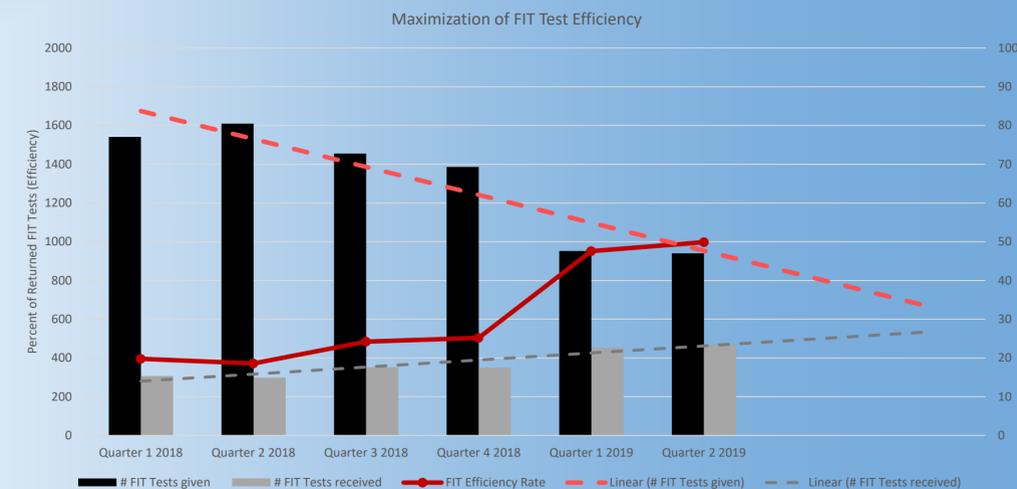
Utilized QI-based SMART goals and monthly chart auditing to track MA and provider progress and implemented a site-wide competition to help motivate staff.

Instituted patient gift card incentives – found that patients were more willing to complete a FIT test same day if they knew they would receive a \$5 gift card. The added cost of these incentives was offset by the decrease in the amount of repeat FIT tests given. Through trial, it was found that Subway gift cards were most successful on Skid Row, while North Gate grocery gift cards were preferred by patients visiting the Boyle Heights clinic.



Results

CRC Screening Compliance increased from 34% to 41% in 9 months, a 21% increase. Additionally, by June 2019, CRC Compliance has continued to climb to 45%, illustrating continued success of efforts.



Sustainability & Guidance

LACHC will continue using gift cards as patient incentives, encouraging Medical Assistants to promote the option of completing a FIT test in-house in order to improve compliance rates and decrease cost of handing out FIT tests at every visit.

Medical Assistants will continue utilizing weekly and monthly reports to contact patients with unreturned or invalid FIT tests.

Care Teams will receive quarterly reports that details their improvement efforts and success compared to clinic-wide data. Providing hits to goal data has proven to be a very efficient means of motivating care teams.

Referral Coordinators will continue to actively follow-up on pending colonoscopies, encouraging patients to go and retrieving records for patients who have already had the procedure completed.

LACHC will continue providing gloves, a public restroom map, and detailed, bilingual instructions in the FIT kit packets given to patients.

Evaluate your patient population – know your patients and learn the barriers and habits that must be considered

Study your data – ensure that your issues are related to incorrect mapping

Get feedback from your support staff – they know your patients best!