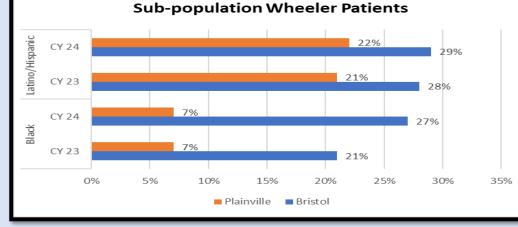


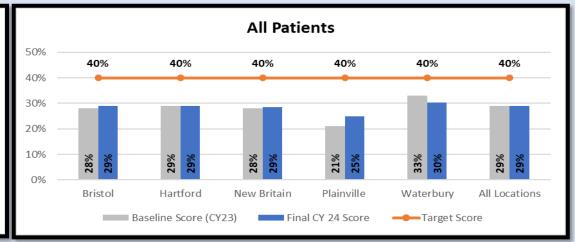
Increasing Colorectal Cancer Screenings for Wheeler Patients

The CY 2024 Colorectal Cancer Continuous Quality Improvement (CQI) Team members: Mariana Paxton, Senior Director of Quality, Quality Operations; Heidi Warseck, Senior Manager, Central Records Unit; Katherine Taylor, Senior Director of Health Center Operations, Plainville Family Health & Wellness Center; Alyssa Voisine, Medical Assistant, Bristol Family Health & Wellness Center; Subrina Manabat, Director of Nursing, New Britain Family Health & Wellness Center; Aaron Roscoe, Float Nurse, Family Health & Wellness Centers

The CY 2024 Colorectal Cancer Screening (CCS) CQI Team focused on integrating new resources for medical staff at the Family Health & Wellness Centers (FHWCs) to build competency and support the colorectal cancer screening workflow, implemented and supported compliance with the American Cancer Society Colorectal Cancer Screening Poopon, and implemented interventions identified in partnership with the Connecticut Health and Educational Facilities Authority (CHEFA) Targeted Grant "Systematically Addressing Health Disparities at Federally Qualified Health Centers" including but not limited to identifying and recruiting 1-3 sub-population patients to participate in a Quality Improvement Root Cause Analysis (RCA) to identify interventions to address the disparity in colorectal cancer screening rates. The Wheeler sub-population consisted of Black and Latino/Hispanic patients from the Wheeler Plainville and Bristol FHWCs from 45-75 years old who met the criteria for a colorectal cancer screening.

NEW RESOURCES FOR MEDICAL STAFF	ACS POOPON	INTERVENTIONS
The CCS CQI Team reviewed the current Medical Assistant (MA) workflow for ordering a colorectal cancer screening (i.e., Cologuard home screening kit) and identified opportunities to increase efficiency by building MA competency in identifying patients that are due for a screening and empowering them to support ordering of colorectal cancer screening through consultation with medical providers and proactively ordering screenings. The CCS CQI team redesigned the workflow. In the new workflow, MAs review patient information prior to their scheduled visit and order a kit proactively, if the patient meets the criteria. Then, they consult with the medical provider and the patient about the screening at the appointment. If they agree, the medical provider authorizes the order, and the Cologuard kit is sent to the patient's home for completion.	The CCS CQI team partnered with the American Cancer Society under a grant to promote colorectal cancer screenings for identified patients via a gift card that is provided to the patient upon completion of the screening (i.e., Poopon). For patients that meet the criteria for a colorectal cancer screening and agree to participate in this voluntary initiative, they are informed that upon completion of an at-home colorectal cancer screening (i.e., Cologuard home screening kit) or colonoscopy that is ordered by Wheeler, they will receive a gift card (\$10- Cologuard home screening kit and \$25 for a colonoscopy).	 In May 2024, a Root Cause Analysis (RCA) was facilitated by CHCACT and attended by two (2) Wheeler patients and the CCS CQI Team. Eindings: There is a need to increase health literacy for patients regarding colorectal cancer and screenings, and there is a need to develop a centralized area within the EHR with patient information regarding preventative screenings thus allowing staff to promptly order preventative screenings and support patients with completion. In response, the following interventions were implemented: Wheeler partnered with Exact Sciences, maker of the Cologuard home screening kit, to provide test Cologuard kits that are in the exam rooms at Wheeler Family Health & Wellness Centers (FHWCs). In addition, Exact Sciences provided a training for Wheeler medical staff on the Cologuard kits and how to explain them to patients during their appointments. Wheeler purchased colorectal cancer screening awareness promotional items for staff and patients along with hosting a colorectal cancer prevention information session at each FHWC. Wheeler uploaded an American Cancer Society Preventative Cancer Screening video to the TVs in the waiting room at all FHWCs. Wheeler created a section in the electronic health record (EHR) that centralizes patient information, including a preventative screening schedule. A follow up RCA with the same two patients was held at the Bristol FHWC on 9/12/2024. In this meeting, patient participants were given an update on Wheeler's progress toward implementing the interventions.





OUTCOMES

•There was a 6% increase in colorectal cancer screening completion for Black patients at Bristol FHWC. •There was a 1% increase in colorectal cancer screening completion for Latino/Hispanic patients Bristol and Plainville FHWC. •Across all FHWCs, screening rates remained flat from CY23 to CY24, although individually, three sites improved their rates.