

# Colorectal Cancer Screening #DoThePoo

Redwood Community Health Coalition  
Promising Practice



## PROMISING PRACTICE OVERVIEW

Community Medical Centers (CMC) created a 3-month project competition #DoThePoo during July, August, and September 2020.

The goal was for their clinics to increase their colon cancer screening rates. In 2019 the rate was 29.8%, in 2020 it dropped to 24.1% and improved to 27.5% by the end of 2021.

Population: Patients due or overdue for a Colon Cancer Screening during the measurement year.

Two categories were set up within the competition. The second category was key because patients were receiving education on the importance of completing the test.

- 1) Which site had the most FIT Kits ordered during the 3-month period, and
- 2) Of those ordered, which site had the most results turned in by the end of the 3-month period?

Transparent reporting through Tableau was available so that each team could see how the other teams were performing. Using this tool elevated the challenge. Results were tallied to capture the high-performing clinics. Trophies were given to the 1<sup>st</sup> place teams, the 2<sup>nd</sup> highest performers received poo emoji pens, and 1<sup>st</sup>, 2<sup>nd</sup>, and 3<sup>rd</sup> place sites received a certification of recognition.

## AIM

Due to COVID-19, the organization was challenged to think out-of-the box and wanted to improve the colon cancer screening rates and bring them back to pre-COVID levels of 29.8%. With the help of implementing this competition in 2020 and 2021, we ended 2021 at 27.51% which was up from 24.1% in 2020.

## MEASURES

**Measure: Percentage of adults 50-75 years of age who had appropriate screening for colorectal cancer**

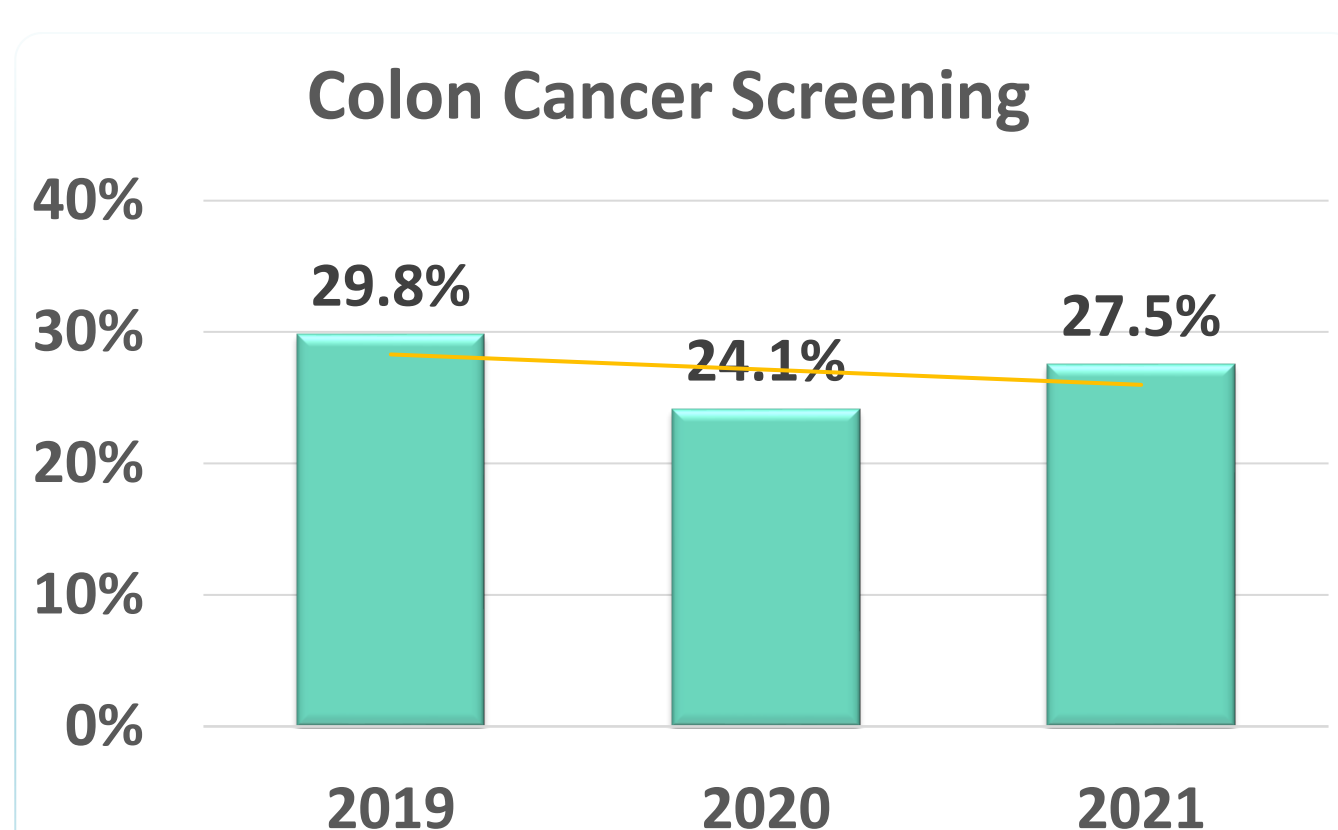
*Numerator:*

- Patients 50-75 years of age with one or more of the following colorectal cancer screenings during year
- Fecal occult blood test (FOBT) during the measurement period
- Flexible sigmoidoscopy during the measurement period or the four years prior to the measurement period
- Colonoscopy during the measurement period or the nine years prior to the measurement period
- FIT-DNA during the measurement period or the two years prior to the measurement period
- CT Colonography during the measurement period or the four years prior to the measurement period

*Denominator:*

- Patients 50-75 years of age due or overdue for a colon cancer screening with a visit during the measurement period

## RESULTS TO DATE



## ACTIONS TAKEN

- Patient population was identified through pre-visit planning reports; gap in care lists; and/or a report from Relevant
- Standing Order Set was used
- Health center site size was established based on encounters: large or small
- Method of the FIT Kit distribution
  - Direct mail (most used)
  - Patient could pick up the FIT Kit at the Quest Hub located within the health center, or
  - If the patient was scheduled for an on-site appointment for another reason, the FIT Kit was presented to the patient at that time by the care team
  - Quest Laboratory draw stations also provided the patient with a FIT Kit
- Method to return the FIT Kit
  - Mail In
  - Drop off at either Quest Hub or Quest Draw Station
- The winning teams were spotlighted during All Staff Town Hall Meetings. 1<sup>st</sup>, 2<sup>nd</sup>, and 3<sup>rd</sup>, place winners for each of the 2 categories were celebrated.
- Reporting Resources Used
  - Tableau folder: Do The Poo
  - Relevant overall gap in care report: Due for Colon Cancer Screening
  - Relevant Pre-Visit Planning Report used for Telehealth or In-Person visits (used in morning huddles, chart prep, and chart scrubbing).
  - 2 weeks after the initial communication with the patient, if the results were not recorded a member of the care team began reaching out to the patient

## WORKFLOW

To get the population two reports were run a) A Relevant report and/or b) The Relevant Pre-visit Planning report that would indicate if the patient were due or overdue for colon cancer screening.

Administrative/Front Desk/QI Staff/Care Team mailed or handed out the FIT Kit. The Fit Kit was not modified.

Personal follow-up was made to the patient if a result had not been recorded within 2-weeks of distributing the kit. Patients were given options to either mail the kit back or drop it off at the Quest Diagnostic Lab or the Quest Hub (lab within the health center).

When the 3-month period was up results were tallied up counting the encounters.

## LESSONS LEARNED

Relevant is being used much more consistently and frequently. Teams are using the Pre-Visit Planning Reports. The winning sites regardless of size had the largest success in completing FIT Kits where a member of the patient's care team followed up with the patient personally. It is essential to watch your data and understand what the data is telling you. Be comfortable with educating the patient on the importance of this test. Make it fun! Make it fun in as feasible was as you can, it gets everybody involved. Using Tableau had a learning curve in accessing the platform.



## #DoThePoo Competition

### #DoThePoo Competition Rankings (Highest Ranking Per Group Wins)

Weighted Ranking: **Rewarded higher % of patients completed for FIT Kit AND total # of patients due for a FIT Kit.** This allows for fairness between each centers different volume of patients while still rewarding smaller centers for their efficiency!

Site Group	Rank	Center	# of Patients due for FIT Kit	# of Patients with Lab Ordered	# of Patients with completed FIT..	% of Completed FIT Kit
Large Site	1	CMC Lodi	737	383	102	13.84%
	2	CMC Tracy - Grant Line	893	244	88	9.85%
	3	CMC East March Lane	950	453	89	9.37%
	4	CMC Vacaville	474	137	56	11.81%
	5	CMC West Lane	1,064	259	81	7.61%
	6	CMC Waterloo	560	66	23	4.11%
	7	CMC Manteca	823	95	26	3.16%
	8	CMC Channel	623	59	13	2.09%
	9	CMC Lodi Vine Family Care	315	29	9	2.86%
Small Site	1	CMC Dixon	206	111	44	21.36%
	2	CMC Channel Residency	240	75	24	10.00%
	3	CMC Mariposa II	180	48	17	9.44%
	4	CMC King	98	88	12	12.24%
	5	CMC Esparto	25	15	6	24.00%
	6	CMC DL Jones	113	38	10	8.85%
	7	CMC Lawrence	217	29	13	5.99%
	8	CMC Gleason	373	32	5	1.34%
	9	CMC Tracy	258	2	1	0.39%
	11	CMC Waterloo Recovery Center	55	1	0	0.00%
		CMC Tracy Recovery Center	9	0	0	0.00%
		0 500 1000	0 200 400	0 50 100	0% 10% 20% 30%	
		# of Patients due for FIT Kit	# of Patients with Lab Ordered	# of Patients with completed FIT..	% of Completed FIT Kit	

**First Place Trophy**

