



Relevant Bi-Directional Outreach: FIT Kits

Aliados Health
Promising Practice

This project is supported by the Health Resources and Services Administration (HRSA) of the U.S. Department of Health and Human Services (HHS) under grant number U86CS45894, Health Center Controlled Networks, for \$665,817. This information or content and conclusions are those of the author and should not be construed as the official position or policy of, nor should any endorsements be inferred by HRSA, HHS or the U.S. Government.

PROMISING PRACTICE OVERVIEW

In an effort to improve efficiency with colorectal cancer screening outreach and increase compliance with screenings, Santa Rosa utilized Relevant’s bi-directional outreach feature to identify patients who agreed to complete a FIT kit. In October, several SRCH campuses rolled out Relevant’s bi-directional texting feature to all patients due for a colorectal cancer screening that had been seen since June (Epic go-live date). Patients meeting the inclusion criteria were identified by using Care Gaps in Relevant to pull in Populations due for screenings, and filtered out if they already had an open order for a FIT. \$10 gift cards were offered to incentivize patients to return completed FIT kits in person. Overall, the initial rate of “yes, you can send me a FIT kit” and the final “completed FIT” rate varied by campus. This was likely due to the differences in patient populations, the number of patients contacted, and the amount of follow-up conducted through phone calls. Future campaigns can examine the impact of incentives, follow-up and social risk factors have on response rates and patient compliance to completing health screenings.

AIM

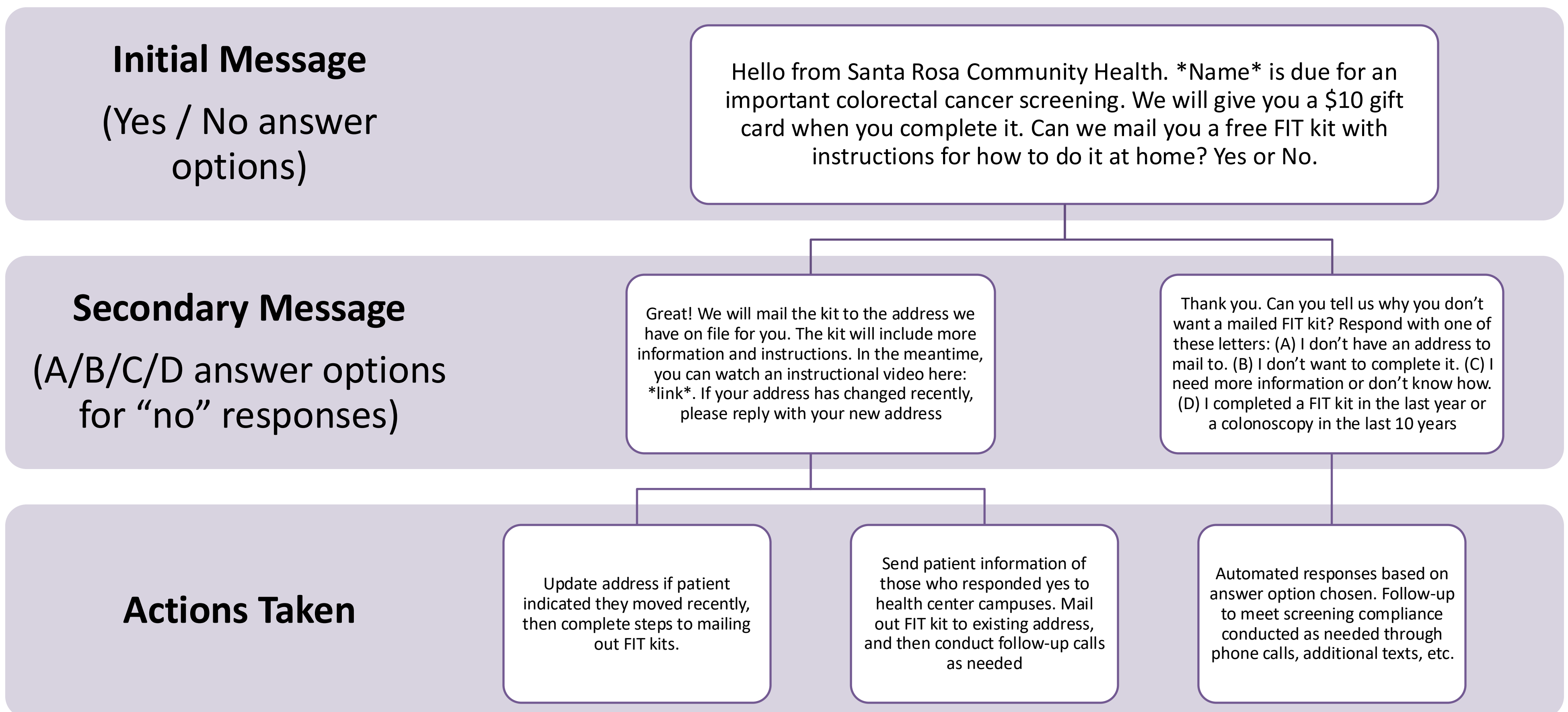
1. Inform patients they are due for colorectal cancer screening
2. Increase compliance for colorectal cancer screening measure
3. Gain understanding to barriers to screening (i.e. needing additional information, not having an address to receive FIT kit)

STEPS FOR SETTING UP CAMPAIGN

Informed by positive results from previous pilots of the bi-directional outreach feature in Relevant, Santa Rosa created this campaign to meet measure goals for colorectal cancer screenings. First, the inclusion criteria was set to ensure the target patient audience was contacted. Then the specific language of the text messages and subsequent responses was confirmed, and the campaign was set up and scheduled to go out through Relevant. Campuses decided on the amount of phone call follow-up that was appropriate / possible with staff capacity after messages were sent out, and at least one additional round was sent to anyone who did not respond in the first round. Finally, the results of the campaign are generated into a report in Relevant, where all responses are tallied, and the information for patients who responded yes are sent to campuses to mail out FIT kits and conduct follow-up.

CAMPAIGN & RESPONSE OVERVIEW

- Sent 2,947 messages in English and Spanish across 4 health center campuses and multiple rounds
 - 2 rounds of text messages for 3 sites, 4 rounds for 1 site
- Inclusion criteria: Patients due for colorectal cancer screening without an open order for a FIT
 - Filtered out if they have an open FIT order, or responded “Stop” in previous FIT text campaign
- Average positive response rate (YES messages): 20%



RESULTS

Results of the outreach campaign varied across the four participating campuses. The average rate of “Yes” responses across all messages was 20%, with a range of 16 – 32% for individual campaigns at a certain location. Out of the mailed FIT kits, the average completion rate for returned kits was 34%, with a range of 9 – 65% completed. Therefore, **6% of all text messages sent out resulted in a completed FIT kit**. There was one campus that had consistently higher text message responses and completed FIT kits. This is likely because this site conducted more reminder calls after mailing the kits (about 2-3 calls per patient), as well as offered a drop off clinic to return the FIT kit in person and get the \$10 gift card. Patients were given a specific day/time to return the FIT kit, ensuring they wouldn’t have to wait in line at a lab. The patient population differences between health center locations also likely impacted the response and completion rates.

LESSONS LEARNED

1. Follow up is key to increasing responses and completed FIT kits
 - Bi-directional texting should be used in tandem with other outreach strategies to ensure the highest possible response rate, including follow-up via phone calls, patient education while in clinic, etc.
 - Limitations include staff capacity and campaign size
2. Give specific instructions on how to return FIT kits
 - Preferably in person, to make it easy to give out incentives
 - Will further examine the impact incentives have on responses
3. Patient population likely impacts response rate
 - For example, certain text message outreach may not be ideal for health centers with larger unhoused populations
4. Don't need to include options explaining “no” responses via text
 - Didn't get much of a response when asking why the patient didn't want to receive a FIT kit (0 - 3% response)