Increase Colorectal Cancer Screening Rates in a Federally Qualified Health Center in Alabama

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**Problem**
- Colorectal cancer is the second leading cause of cancer deaths in men and women in the United States.
- One-third of adults who qualify for colorectal cancer screening are not screened.
- Colorectal cancer is the second leading cause of cancer deaths in Alabama.
- Alabama has a higher incidence of colorectal cancer deaths than in the United States nationally.
- African Americans have a higher death rate from colorectal cancer than Whites in Alabama.
- In a large federally qualified health center located in northeast Alabama colorectal cancer screening rates are less than 25%.
- Colorectal cancer is reduced with preventive testing.

**Theoretical Framework**

**Health Belief Model**
- **Susceptibility and Severity**
  - Belief that CRC is a risk for patients
  - Belief consequences of disease are serious
- **Benefits and Barriers**
  - Belief that being proactive will benefit patients
  - Benefits of action outweigh inconvenience
- **Cues to Action and Self-efficacy**
  - Exposure to factors that encourage action
  - Confidence in ability to perform intervention

**Purpose**
To improve colorectal cancer screening rates by implementing evidence-based interventions for patients ages 50 to 75 who are at average colorectal cancer risk and who are eligible to have fecal immunochemical test.

**Methodology**
- Educational handouts
- Medical provider recommendation
- One-week post-intervention telephone reminder
- Evaluation of data
- Process evaluation

**Setting**
Three primary care clinics within a federally qualified health center organization in Northeast Alabama staffed with nurse practitioners, clinical, and other support staff who manage the care of patients of diverse ethnicity.

**Results**

- **CRCS Completion Percentages**
  - Clinic 1: 16%
  - Clinic 2: 36%
  - Clinic 3: 2%

- **Age – Participants Completing CRCS**
  - 50-55: 16%
  - 56-60: 39%
  - 61-65: 39%
  - 66-70: 7%
  - 71-75: 2%

- **CRCS Participants Payor-Type**

**Results (cont.)**
- Post-intervention in combined clinics yielded a 26% increase in CRCS rates compared to 2019.
- 32.5% did not complete CRCS test (2020).
- There was no difference in CRCS completion rates among males and females.
- Predominate age group completing FIT test was 56 to 60 year (39%).
- English was the predominate language spoken.

**Participant Reported Barriers**
- Forgot
- No transportation
- No motivation
- No symptoms
- No time
- Clinic operational hours not convenient

**Investigators Reported Barriers**
- Unable to leave message
- Incorrect phone number

**Implications for Practice**
- Increase colorectal cancer screening rates
- Improve patient-provider communication
- Improve patient experience and confidence
- Increase patient engagement
- Interventions easily merged into practice
- Decrease patient barriers to healthcare
- Enhancement of the interprofessional relationships