

# Patient Experience in a Federally Qualified Health Center that Implemented a Population-based Mailed Fecal Immunochemical Test (FIT) in Colorectal Cancer Screening Program

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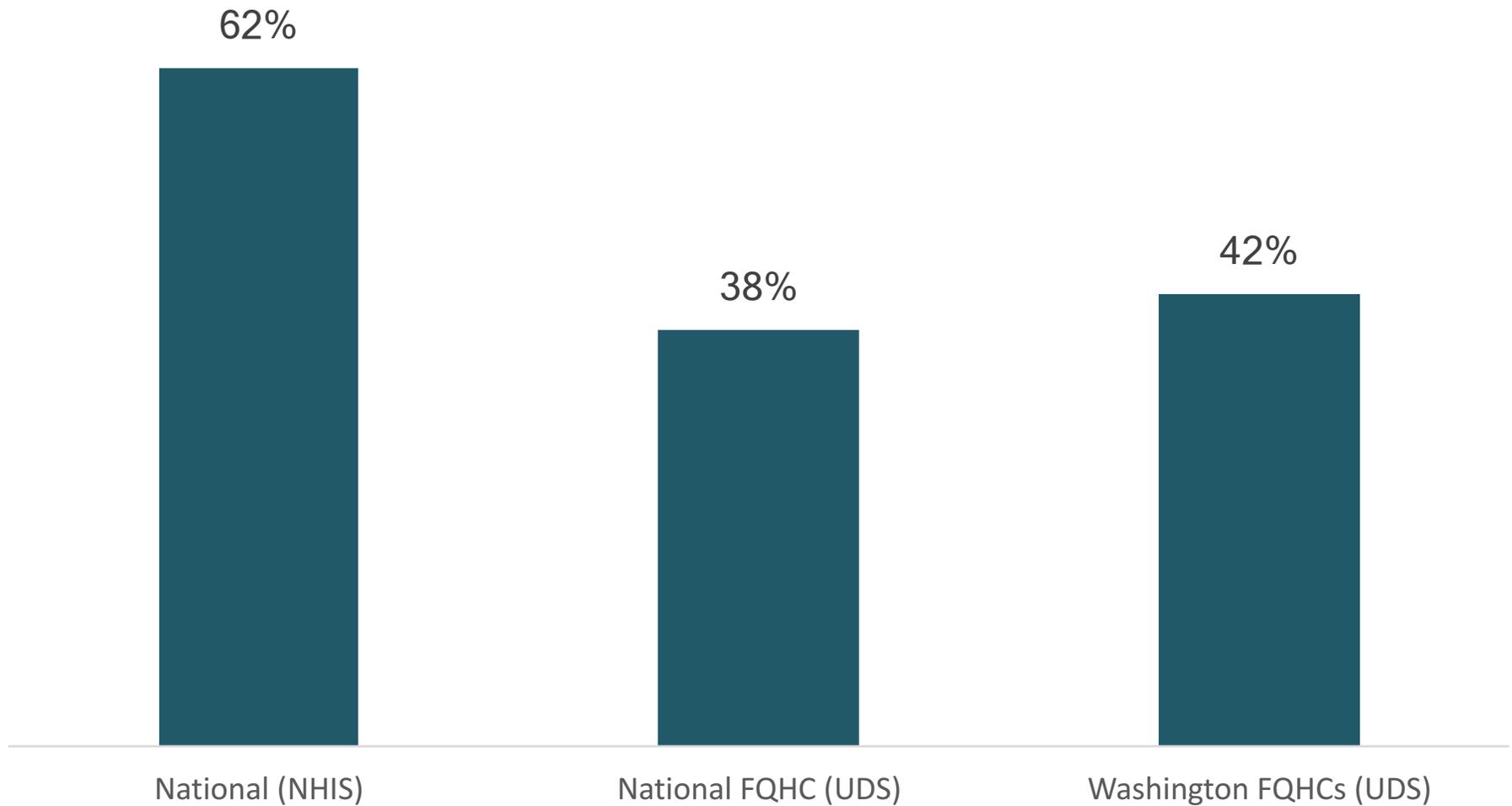
# Colorectal Cancer

- 135,430 new CRC cases estimated in 2017
- CRC is a leading cause of cancer death
- Annual screening (e.g. FIT) reduces CRC mortality



# Colorectal Cancer Screening Rates Remain Below National Targets

CRC Screening Rates (2015)



# Why focus on Federally Qualified Health Centers (FQHCs)

## Mission

- Community-based and patient-driven
- Deliver high quality, comprehensive primary and preventive care
- Provide services regardless of patient ability to pay

## Use

- Volume of patients served is growing. 24 million patients served in 2015
- Rate of FQHC-use grew faster than either Medicare or privately insured
- Medicaid and uninsured patients are served at the highest rates

Low income and uninsured patients are less likely to be up to date on CRC screening

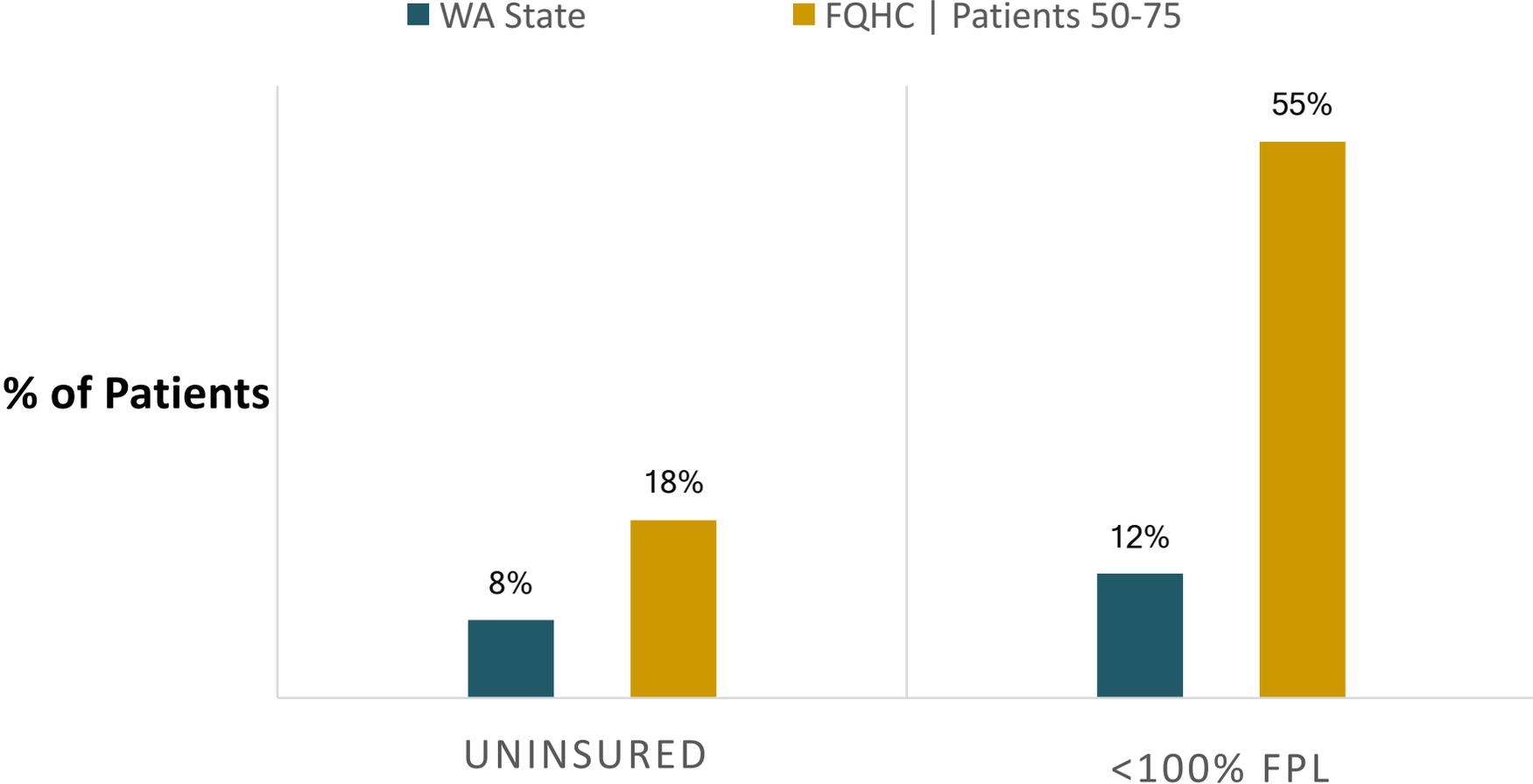


# Setting

- One of largest FQHCs in the state
- Network of non-profit medical clinic sites throughout western WA
- Provide medical care with integrated dental, behavioral, case management, pharmacy, and social services
- Served over 83,000 people in 2016

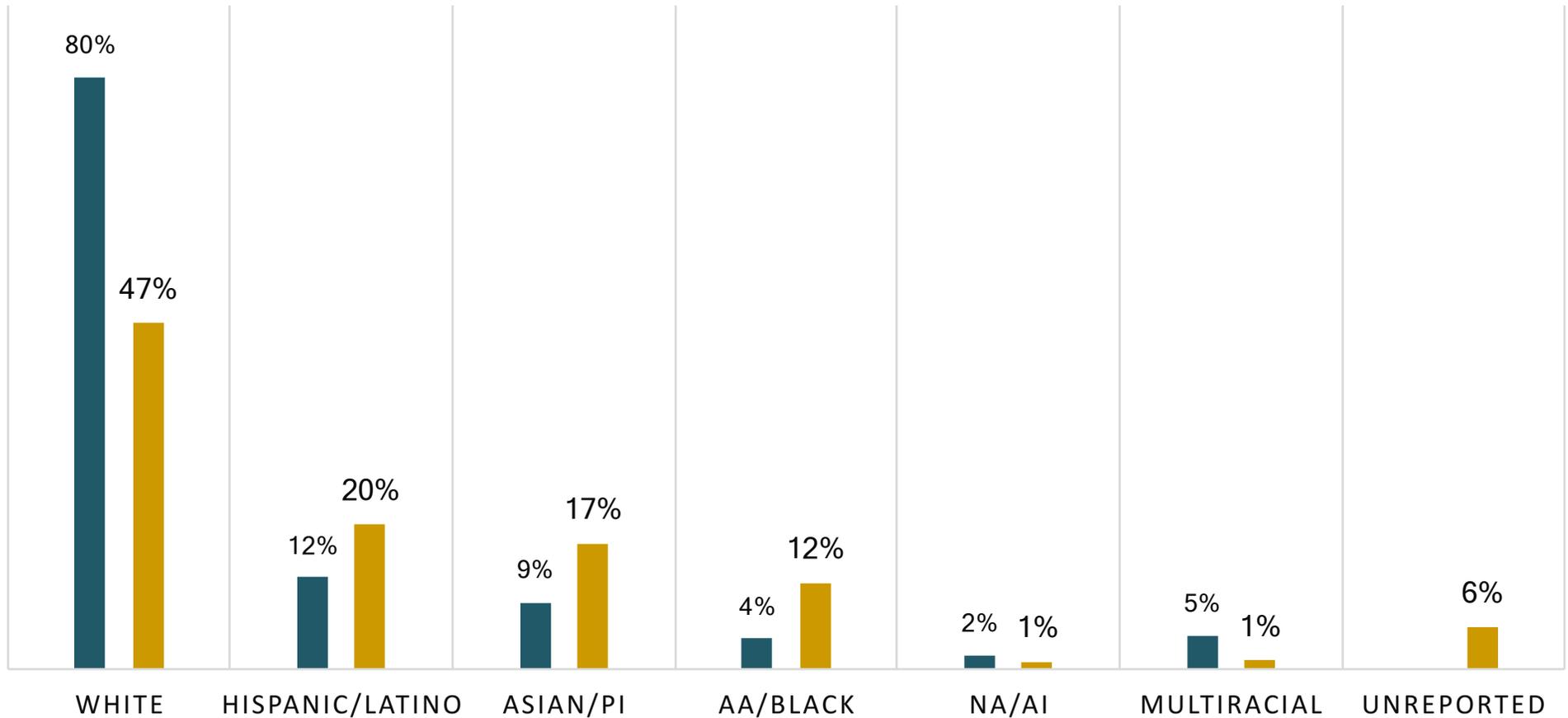


# Patient Population



# Patient Population

■ WA State      ■ FQHC | Patients 50-75



# CRC Screening Initiative

- System-Wide Goal: Increase CRC screening rate 6% (to 60%)
- Implement evidence-based strategies to promote screening
  - Provider reminders
  - Provider assessment and feedback
  - Small media
  - Patient reminders
  - Reducing Structural Barriers → **Direct mail FIT kits** (n=5500)



# Objective

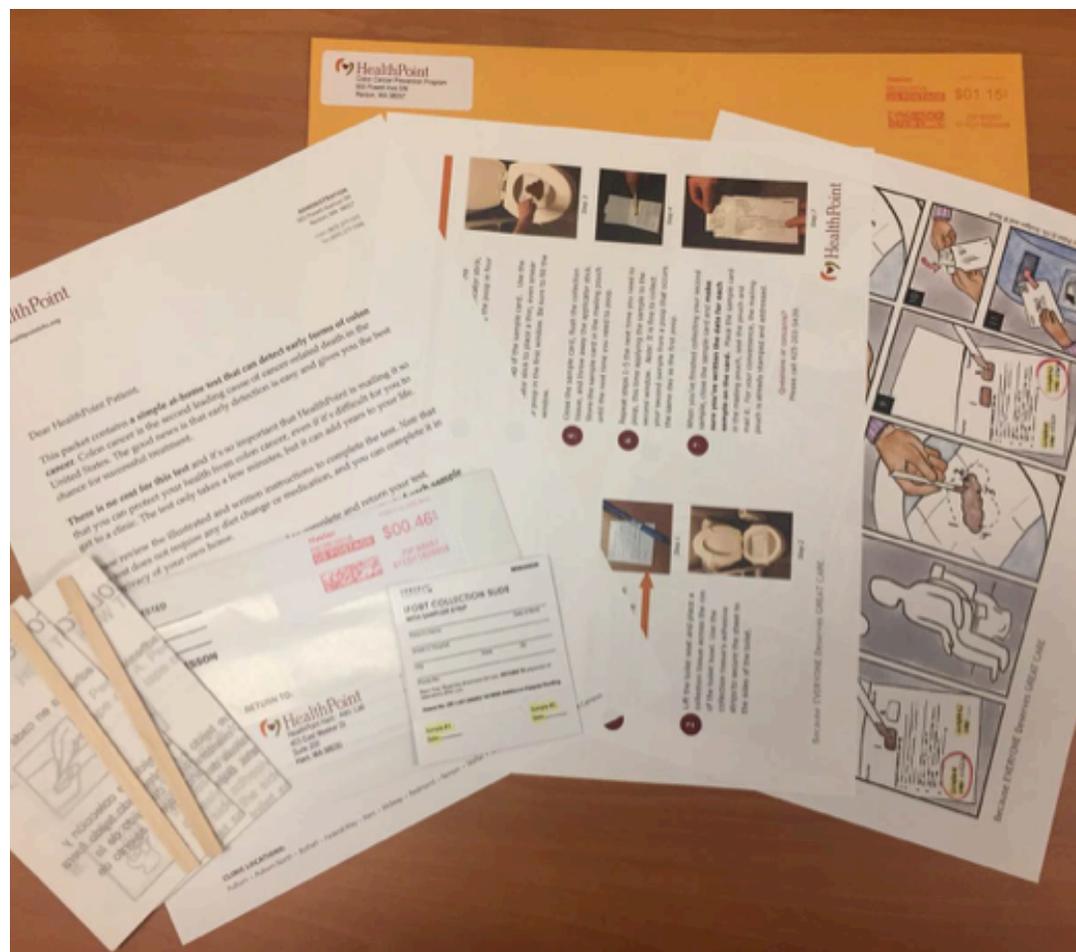
Assess across diverse patient groups,  
patient-reported:

- CRC screening barriers and facilitators
- Acceptability and usability of FIT kit and materials
- Quality and degree of communication between patients and their FQHC clinic staff



# Recruitment Methods

- Mailed invitation letter **with FIT Kit** (n=195) to stratified random sample
- Inclusion criteria
  - 50-75 years old
  - Active patient status
  - Due for CRC screening



# Interview Method

- Semi-structured interviews
- Completed within two weeks, July-August 2016
- Conducted by two trained staff; translator used as needed

*What in particular helped you decide to do your colon cancer screening?*

*What stopped you from completing the screening?*

*Did anyone from your FQHC clinic speak to you about colon cancer screening? If so, who?*

*How much did speaking with them help you make a decision to do the screening or not?*



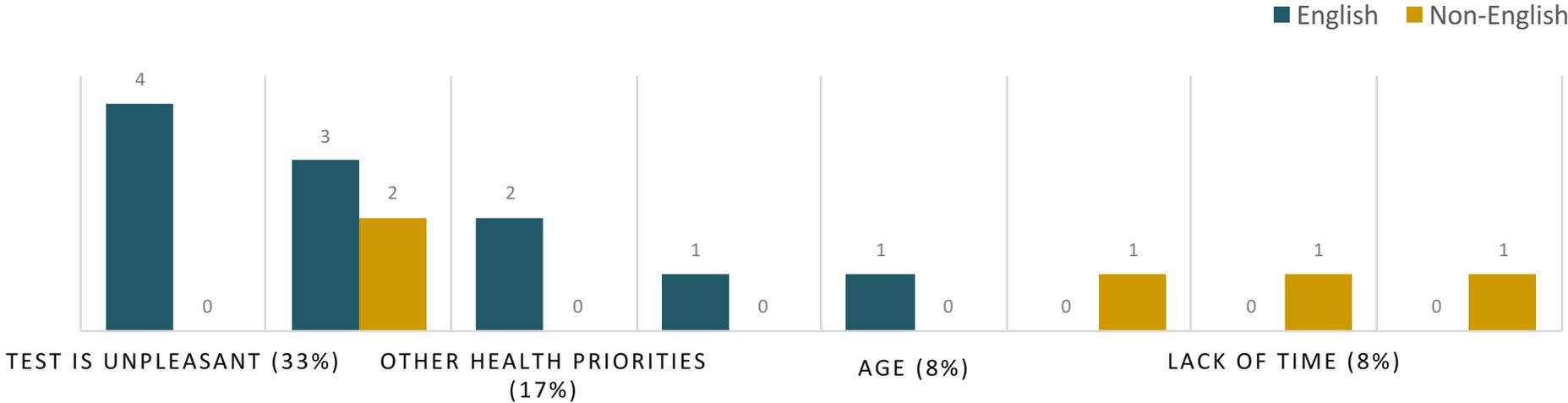
# Recruitment Results

- Attempts
  - 193 calls
  - 25 unreachable
- Participants
  - 43 completed interviews (26% of those reached)
  - 4 languages (Spanish=17, Punjabi=2, Swahili=2)
  - 72% completed FIT (compared to 35% of overall)



# Reasons for Non-Completion

| n=12



*"It just grosses me out. You know, having to put a piece of paper over the toilet and then play in it."*  
 - English-Speaking (ES) Female, age 56

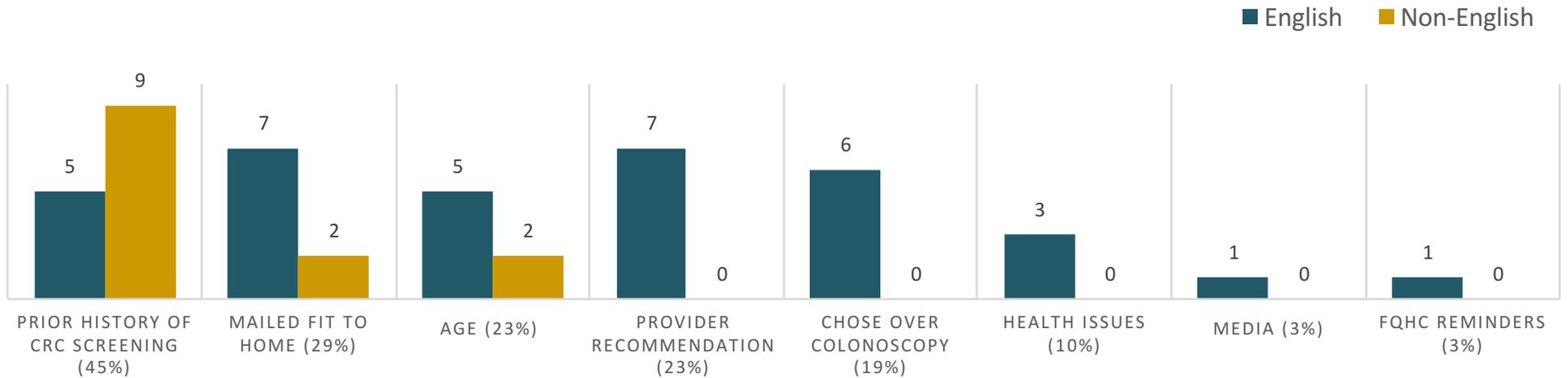
*No one told me it was coming to me, that was probably the main reason. Other than that, trying to play with my poop didn't sound good.*  
 - ES Male, age 56

*"I don't have the time. I'm always outside and I never have the time. But I appreciate that you always remind me."*  
 - NES Male, age 52



# Reasons for FIT Completion

| n=31



*“Nothing was hard because this was not the first time. I’ve done it several times, so when I get it I just do it.”*

*- Non-English Speaking (NES) Female, age 65*

*“It was so convenient. I didn’t have to waste any time or go to a clinic. I thought it was very easy this way.”*

*- NES Male, age 64*

*“I’m almost 70 years old. I have to be aware of these things.”*

*- NES Male, age 68*

*“Well I needed to get it done... I never got around to getting a colonoscopy, so this seemed easier in contrast.”*

*- ES Male, age 56*

*“I just really appreciated that I could get away without doing a colonoscopy. I’ve had issues with hearing about people who have been injured. I wanted to know if there was a better option for me and [my doctor] said yes, I could take this test. It makes me feel smart that yes, I can do something about colon cancer and not have an invasive procedure.”*

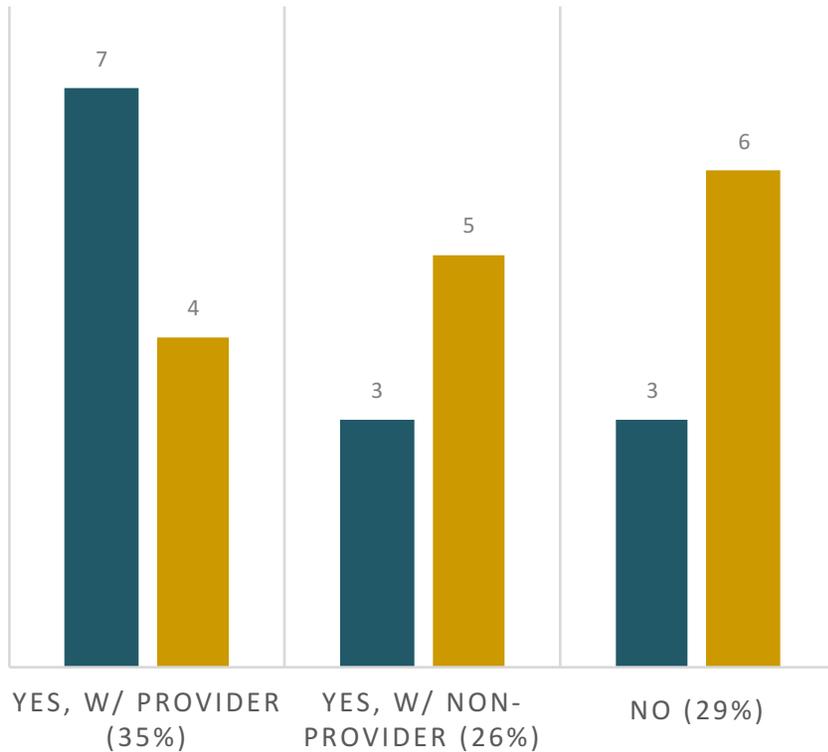
*- ES Female, age 70*



# Communication with Healthcare Staff

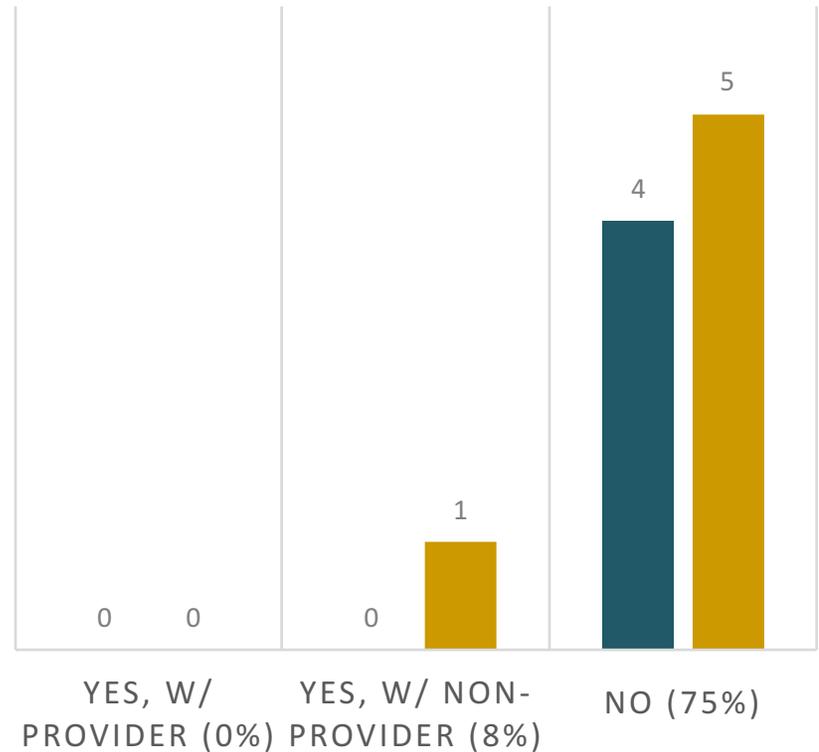
## Completed FIT | n=31

English-Speaking Patients    Non-English Speaking Patients



## Did Not Complete FIT | n=12

English-Speaking Patients    Non-English Speaking Patients



# Discussion

- Patients receiving mailed FIT still experience barriers to CRC screening
- Discussions with clinic staff, especially non-physician staff for non-English speaking patients, important in supporting FIT completion



# Thank you, collaborators!



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