

MULTI-CLINIC ANALYSIS OF IMPROVEMENTS IN COLORECTAL CANCER SCREENING RATES IN HARRIS COUNTY HOSPITAL DISTRICT COMMUNITY HEALTH CLINICS

Lead Author: Justin Fu, BS

Contributing Authors: Shruti Varadarajan, MD, Christine Victorian, MSN, RN, CMCN

Category: Quality, Cost, Value

Background

Colorectal cancer (CRC) remains the second leading cause of cancer death in the US. In 2015, 60% of adults in the US, for whom screening was recommended, were properly screened. Within seven Harris County Hospital District Community Health Clinics, screening rates in December 2015 were even worse (<50%). As of August 2017, the screening rate in these clinics had risen to over 60%. With such improvement, there is a need to investigate the unique practice changes in each of the clinics to increase colorectal cancer screening rates.

Objectives

This project seeks to investigate the practices that seven Harris Health clinics have implemented since December 2015. Specifically, understanding which practice changes were most greatly increased CRC screening rates will help guide best practices moving forward.

Methods

Monthly CRC screening rates from Casa de Amigos, Cypress, Gulfgate, MLK, Northwest, Strawberry, and Valbona clinics were collected using the HEDIS Quality Metric database. Monthly data from December 2015 to August 2017 were plotted on a run chart for each clinic and a clinic-wide average. Information about interventions were gathered using a survey/questionnaire sent to clinic directors, operations managers, and other relevant staff for each clinic. Interventions were further categorized into four categories: pre-clinic, in-clinic, post-clinic, and clinic-wide interventions. Finally, categories of interventions were evaluated by the absolute increase in screening rates after their implementation.

Results

As shown in Figure 1, CRC rates for the seven clinics and the total clinic average were mapped on a run chart. Median for the total clinic rates and a national benchmark were also mapped onto the run chart. Interventions were also collected in a table (not shown).

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5th Annual Quality Improvement and Patient Safety Conference

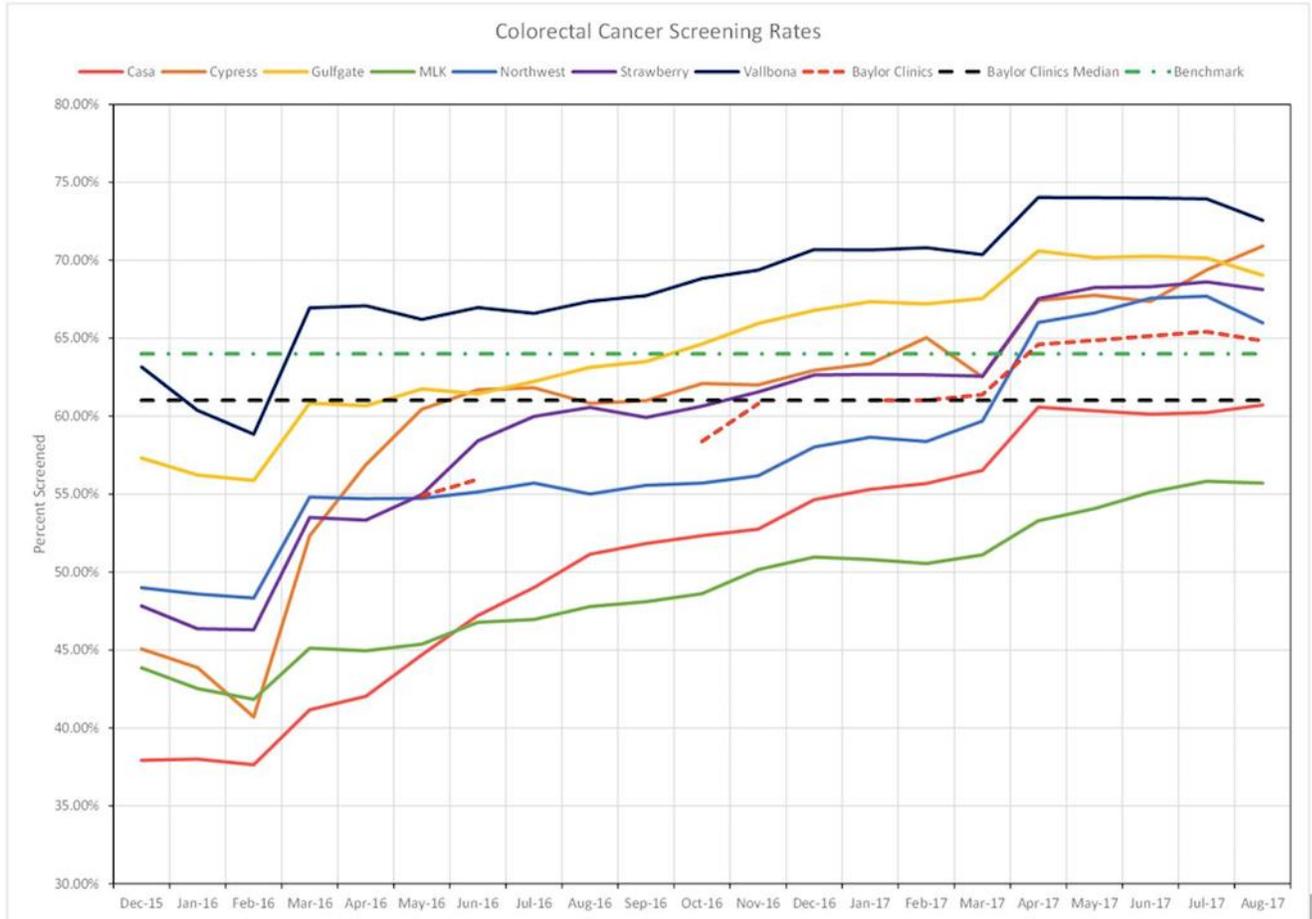


Figure 1. Colorectal Cancer Screening Rates for All Clinics from December 2015 - August 2017

Discussion

CRC screening rates across all clinics increased during the observed period. Clinic-wide interventions such as monthly performance reports sent to each clinic and a switch to a newer FIT test across all clinics likely contributed to the overall CRC screening rate increases. However, some clinics, such as Casa de Amigos and Cypress, showed faster CRC screening rate increases than other clinics. Specifically, these two clinics implemented more interventions, and a greater variety of interventions (pre- and post-clinic interventions) compared to other clinics. From this initial analysis, it is likely that interventions targeting multiple points along the timeline of a patient’s screening experience provided the greatest increases in CRC screening rates at a clinic.