Improving Colorectal Cancer Screening (CRC) for Homeless Patients at Community Health Centers

Resource Center
SFCAN Collaboration

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Background

- **Mission Neighborhood Health Center**
  - Federally Qualified Health Center in SF’s Mission District
  - Established in 1967, one of the first FQHCs in San Francisco
  - 3 primary care clinic sites – 12,000 patients/annually
  - Predominantly Latino, monolingual Spanish-speaking population with growing Asian-Pacific Islander community in Excelsior
Background

• **Project Focus: Resource Center site**
  - Homeless or marginally housed
    - Primary Care Clinic – approximately 700 patients/year
    - Drop in Center – safe space, survival services (i.e. shower, laundry, food), case management, community building, etc
SFCAN Collaboration

- Ongoing collaboration with San Francisco Cancer Initiative (SFCAN) since 2017
- Expanded collaboration to Resource Center site in May 2018.
- Quarterly meetings with SFCAN and American Cancer Society (ACS)
  - SFCAN and ACS provide materials, tech assistance, and training
  - Annual Stipend to be used for printing, postage, materials, incentives, QI Trainings, Technology enhancements, etc.
Objectives

- **Colorectal Cancer**
  - 2nd leading cause of death in United States and San Francisco
  - Screening: Fecal Immunochemical Test (FIT) every 1 year and if positive, referral for colonoscopy

- **AIM Statements:**
  - Improve CRC Screening rate at the Resource Center from 21% to 30% by December 31st, 2018.
  - Ensure that at least 30% of patients with positive FIT tests in 2018 will have completed their follow up colonoscopy.
## Barriers and Challenges

People experiencing homelessness/vulnerable housing in SF face significant structural, social, environmental & socioeconomic barriers to care.

### FIT Test Barriers
- Behavioral Health/Complex Trauma/Substance Use
- Lost/Stolen Belongings
- Weather/Elements
- No unrestricted access to bathroom
- May not always prioritize preventative screenings

### Colonoscopy Barriers
- Unable to complete colonoscopy Prep/Poor Prep
- Ride/Accompaniment/Transportation
- No one to watch stuff during Colonoscopy
Strategies to Reduce Barriers

- Staff trainings
- Reminder calls, involve Case Manager to reach patients
- Clear, simple step by step when possible with demonstration
- Health Fairs at Drop-In center
- Coordination of transportation to and from colonoscopy
- FIT Test Collection Box in Lab
Other Interventions

Implemented **Poop on Demand**
Patient given option to use clinic restroom today/anytime during Clinic Hours.

MA offers to keep FIT test at clinic for patient to come back anytime to perform FIT when ready.

MA made **Care Maintenance Alert Reminder Cards** for every Exam Room and MA Prep Room computer stations.
Other Interventions

Used i2i Population Analytics to enhance Chart Prep and create protocols to flag patients due for services.

Medical Respite and Sobering Center offers safe access to beds and bathrooms for patients to complete colonoscopy prep and to recuperate after.
Results to Date

Median Return Rate (1.18-1.19): 67%
Results to Date

Resource Center - CRC Screening Rate

- May-18: 21%
- Jun-18: 22%
- Jul-18: 21%
- Aug-18: 23%
- Sep-18: 28%
- Oct-18: 32%
- Nov-18: 34%
- Dec-18: 35%
- Jan-19: 36%
- Feb-19: 38%
- Mar-19: 39%