

Screening for Colorectal Cancer

The FQHC Experience

March 17, 2016



What is a Federally Qualified Health Center

- FQHC Requirements
 - Outpatient Health Care Facility
 - Serve the Underserved
 - Offer a Sliding Fee Scale
 - Provide Comprehensive Services
 - Have Ongoing Quality Assurance Programs
 - Governed by a Board of Directors



FQHC Goals

- Improve Patient Health Outcomes
- Be Accessible to Low-Income Residents
- Provide High Quality Health Services
- Establish Community Partnerships
- Comply with Federal, State and Local Funding Mandates



FQHC QI Initiatives

- HRSA (Health Resources and Services Administration)
- Meaningful Use
- UDS (Uniform Data System)
- PCMH
- HEDIS
- Private Funders



CCNV and Quality Improvement

Collaboration with FQHCs

- Activities
 - Benchmarking measures
 - Roll-up reporting
 - Clinical practice guideline development



CCNV Activities for the FQHC

- Objectives
 - Interoperability
 - Improved Patient Outcomes
- Activities
 - Establish Access to Virginia FQHC Data
 - Outreach to Center IT Staff
 - Work With EHR Vendors
 - Data Normalization



FQHC CRC Activities

- Quality Improvement Committee Meetings
- Registry Reports
- Reminder Notices
- Exception Reports by Provider
- Community Outreach
- Referral Follow-Up



Communication/Education

- Staff
 - Training
 - Meetings/Huddles
 - Outcome Reports
 - Guest Educators
- Patients/Partners
 - Social Media
 - Messaging
 - Local Cable



Clearly Written Procedures

Procedure for In House Fecal Occult Blood Testing:

Provider orders the test just as they would have when using Lab Corp except select In House Occult IFOB and order as a “**Future**” order.

Screening: ICD9: V76.51, CPT: G0328 + 99000; Diagnostic: ICD9: *, CPT: 82274 + 99000

The collection envelope is delivered to the patient advocate for payment of the test (the collection material has a cost to the practice and will be kept in the lab).

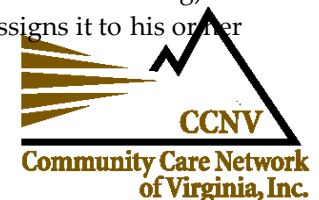
Patient **pays for test and after paying is provided the collection material** which will have a “**Paid**” stamp on it with the date of the payment.

The **patient returns** with the sample/specimen and registers with a patient advocate. An encounter is created on the “nurse/nurse” resource schedule. The **patient advocate transfers the order to “today’s visit” and prints the order** and changes the status to “**arrived**” indicates to nursing staff that a patient has arrived for a nurse visit.

The clinical support staff call the patient to the clinical area and accepts the specimen from the patient, **confirms the correct patient and demographic information** has been selected and that the **specimen is labeled with the name, DOB and date specimen** is brought in. The test is **RUN THE DAY THE SPECIMEN IS BROUGHT INTO THE OFFICE BUT NOT WHILE THE PATIENT WAITS FOR THE RESULTS**. This is to avoid the interruptions to the patient flow should the result be positive.

A bin will be provided to hold the specimen in the lab until processed. The medical assistant **documents the results in the order screen much like when recording a pregnancy test, including the “Result Received” check box** (as with any In House testing). The order with the result is then forwarded to the ordering provider for review. The provider reviews the result, assigns it to his or her medical assistant and the patient is notified.

The results with the **patient name must be recorded in the log book** as we do all in house testing.



Training Verification

Certification of Training

This is to verify that the office staff and personnel responsible for running the Consult Diagnostics Immunochemical Fecal Occult Blood Test at the Greater Prince William Community Health Center have been thoroughly in-serviced on the test and the test procedure.

This has included:

Review of the package insert

Demonstration of the product assay

Successful performance of the Clearview iFOB Complete Test and interpretation of results

Names of the personnel who have been trained with the Consult Diagnostics Immunochemical Fecal Occult Blood Test and are responsible for reporting patient results:

PRINT NAME	SIGNATURE	DATE



Greater Prince William
Community Health Center
Serving Greater Prince William County, Manassas, and Manassas Park



Standing Orders

GPW Standing Orders for Routine Colon Cancer Screening

Purpose: To provide screening services to Health Center patients and improve compliance with evidence-based guidelines for routine health maintenance. The Greater Prince William Community Health Center (GPW) clinical staff may provide an order for a screening IFOB tes without a direct order from a Provider.

IFOB Screening Criteria:

Participant is a female/male age 50 to 75, is a current GPW patient who has been seen by a medical provider at least once in the previous year and has not had a colonoscopy in the last 10 years or a FIT/IFOB in the last 1 year. If the above criteria are met an order may be placed on behalf of the Medical Director by a medical assistant or nurse.

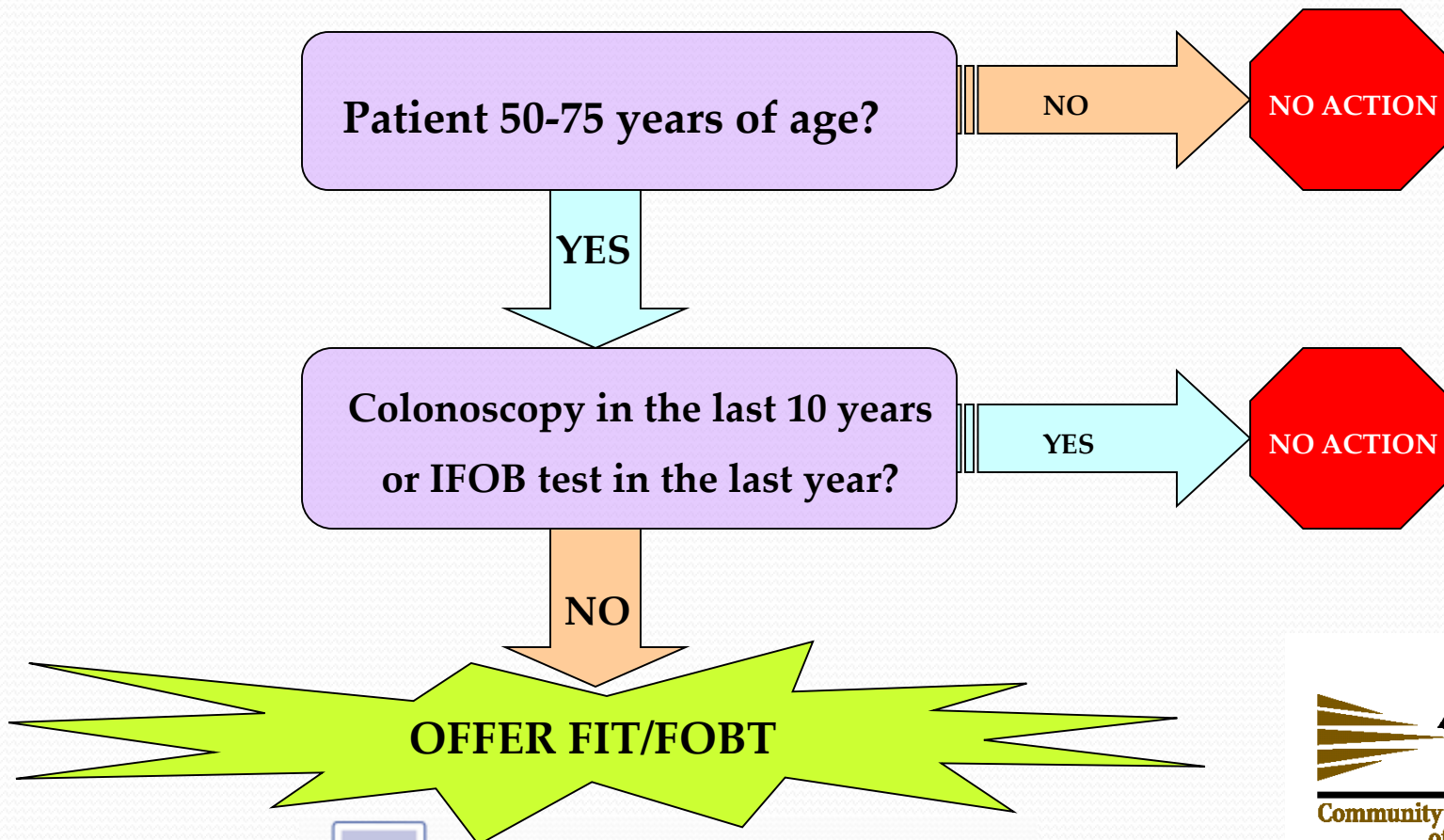
This standing order shall remain in effect for all patients of the Greater Prince William Community Health Center until rescinded or until 11/14/2016 (date).



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Clear Algorithms



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Reminders

- Patient Messaging: Text, Voice, Email
 - For Colon Cancer Awareness month the Health Center is giving FREE tests to patients age 50 to 75. Ask for one at your appointment next week. Prevention saves lives.
 - Remember to return your sample to the Health Center this week. Early colon cancer detection saves lives. Call 703-680-7950 for questions.
 - Recuerde devolver su muestra al Centro de Salud de esta semana . Detección de cáncer de colon salva vidas. Llame 703-680-7950 para preguntas.



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Reminders

- Patient Messaging: Text, Voice, Email

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«FirstName» «MiddleInitial» «LastName»
«MailingAddress1»
«MailingAddress2»

Dear: «FirstName» «MiddleInitial» «LastName» DOB: «DOB»

This is a courtesy letter to remind you that your colorectal screening is now due. Please call the Center at 703-680-7950, extension _____ for further assistance.

Colorectal Cancer can affect anyone - men and women alike – and your risk increases with age. Colorectal cancer is highly preventable, treatable and often curable. There are several screening tests for colorectal cancer. These tests not only detect colorectal cancer but can prevent colorectal cancer.

Beginning at age 50, men and women should be screened regularly for colorectal cancer. If you have a personal or family history of colorectal cancer or colorectal polyps, or personal history of another cancer or inflammatory bowel disease, you should begin screening earlier.

If you have had your colorectal screening completed recently at another medical center, please let us know so that we can obtain a copy for your medical record.

Sincerely,

«RendPrFName» «RendPrLName»

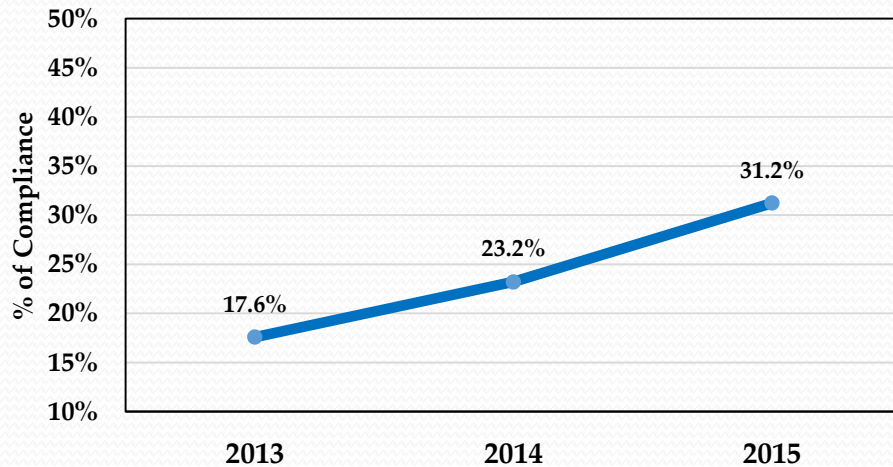


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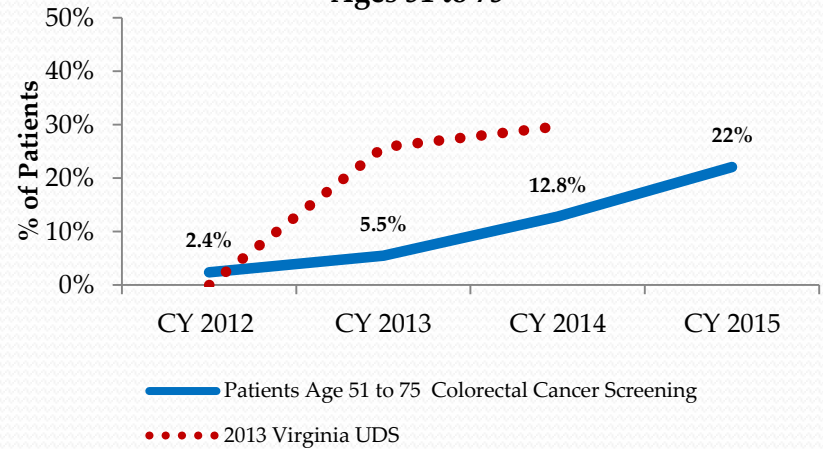


Results Monitoring

CRC Screening Rates



Colorectal Cancer Screening Ages 51 to 75





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