The FluFIT Program: A Pathway to Higher CRC Screening Rates in Primary Care and Integrated Health Systems

Michael B. Potter, MD

Director, SF Bay Area Collaborative Research Network

Professor, Department of Family and Community Medicine

University of California, San Francisco

Overview

- Why use FIT
- Characteristics of a High Quality FIT Program
- Flu-FIT Program Components
- Implementation Examples and Resources

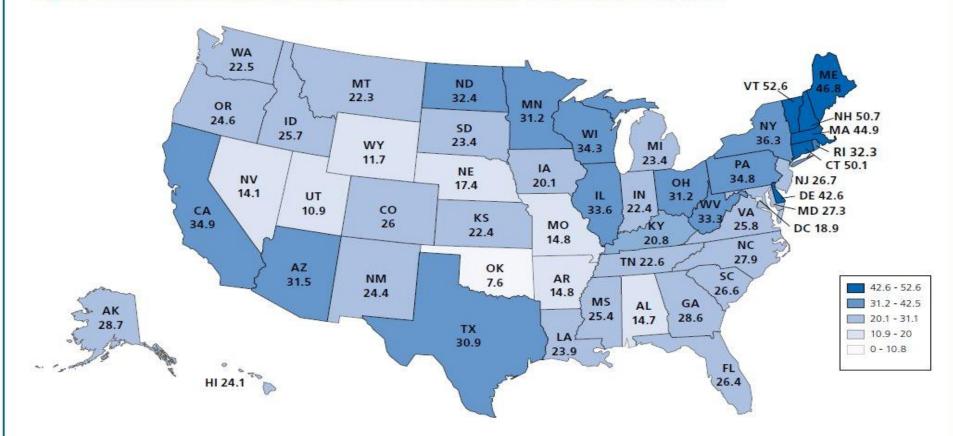
FIT has advantages

- Inexpensive and easily obtainable
- Can be offered by any member of the health team
- Can be done by the patient, in privacy and at home, on a single stool specimen, without any special preparation
- Is non-invasive and has no risk of pain, bleeding, bowel perforation, or other adverse outcomes
- Only requires colonoscopy if abnormal
- If done yearly and followed up correctly when abnormal, it is similarly effective to colonoscopy
- Many patients prefer it.

Doing more FIT is especially important in public health settings

(2014 NCCRT analysis of UDS data)

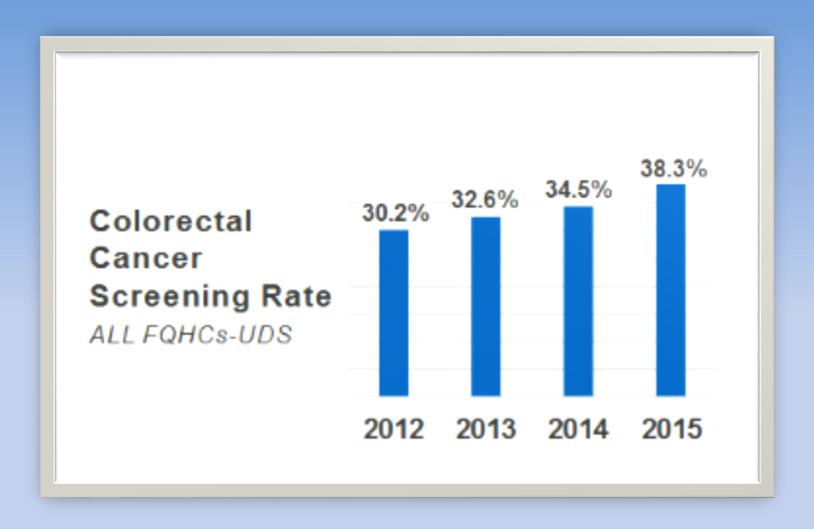
Figure 1. Colorectal Cancer Screening Rates in Community Health Centers by State



Data Source: UDS data 2012.

Adults 50-75 years of age who have received any of the following: colonoscopy during reporting year or previous 9 years, flexible sigmoidoscopy conducted during reporting year or previous 4 years, or FOBT or FIT during reporting year.

FQHC's Are Making Progress



FIT Programs Require That You:

- Select an effective test
- Identify eligible patients
- Train staff to communicate with patients
- Provide appropriate test instructions
- Assure test completion when provided
- Assure high quality test processing
- Follow up abnormal results with colonoscopy
- Follow up normal results with repeat annual testing

So...Before Starting Ask:

- How important is CRC screening within my organization?
- Who will lead the effort and what resources are we able and willing to commit?
- Can we leverage and learn from other activities that we already do well?
- How do we make it easy for patients?
- How do we make it easy for clinicians and staff?
- Will it be sustainable and scalable if it works?

Why FluFIT?

Can be implemented as part of flu shot activities that are organized in most clinics every year.

Creates an opportunity for the whole clinic to gear up for a time-limited campaign.

Lessons learned can be used year-round.

Often feasible with limited resources and sustainable without a lot of outside help.

Adaptable for many different types of clinical settings.

It is evidence-based and it works.

FluFit Program Flow Diagram

★GOAL: Increase colorectal cancer screening rates by offering home FIT kits to eligible patients during annual flu shot activities

Daily Implementation Program Planing & Implementation Daily supervision by program leader Designate a FluFIT program leader Trained staff offers program every day during flu shot season Program leader assigns clinic staff to participate EHR used to assess FIT eligibility when possible Clinic staff completes training FIT given to eligible patients before flu shot is given Clinic team approves program plans FIT kits prepackaged with all selected patient instructions and Advertise program to patients with posters educational materials and postcards Use postage paid return envelopes FIT Not Completed **Results Follow-up FIT Not Completed Normal Results** Postcards and Phone Notify patient and primary care provider • Reminder to repeat FIT in one year Tracking FIT kits are tracked for completion **Results Follow-up FIT Completed Abnormal Results** FIT Completed · Notify patient and primary care provider Competed tests mailed to lab for Arrange colonoscopy processing Clinic checks for results

Where to Do It?









In Theory, Wherever People Get Flu Shots!



The Flu-FIT "Assembly Line" -- Using electronic health records to assess FIT eligibility while patients wait for flu shots



Embedding the Program within a Health System - The Kaiser Permanente Example:



Endorsed but not required by Kaiser Permanente Leadership

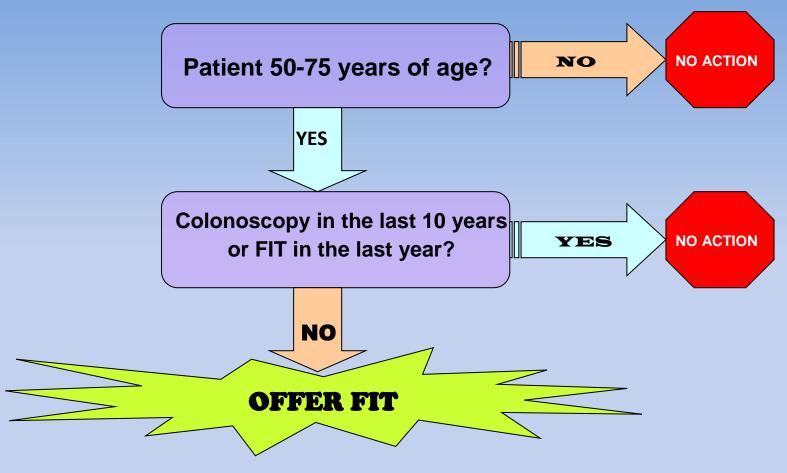
Internal website that describes the program and procedures for doing the program

Publicized and supported by regional flu shot clinic coordinators

Managed by local clinic teams.

Recorded webinars and centralized hands-on training available to all staff who want them.

BASIC FIT ALGORITHM



Can be modified with additional questions to adapt to local needs.

Colorectal Cancer Screening and you



Flu is Preventable! Colon Cancer is Preventable!

- •Yearly home stool tests are easy to do.
- •Yearly home stool tests could save your life.
- •All our doctors and nurses recommend Colon Screening for healthy men and women aged 50 to 79.
- •When you should get tested? We will tell you today.



¡La Gripa es prevenible! ¡El cancer del colon es prevenible!

- •Es fácil hacerse exámenes anuales de defecación.
- •Los exámenes anuales de defecación le pueden salvar la vida.
- •Todos nuestros doctores y enfermeras recomiendan un chequeo del colon para hombres y mujeres en buen estado de salud entre los 50 y 79 anos.
- •Cuando necesita ser chequeado? Nosotros se lo podemos decirr hoy.



流感 是可以預防的!結腸癌也是可以預防的!

每年檢查糞便一次, 簡單並容易推行。

每年檢查糞便一次,可以保護您的生命。

我們的醫生及護士一致推薦,50歲至79歲的健康男仕及女仕們,應接受結腸檢查。

你何時需要測試?我們就今天告訴你。



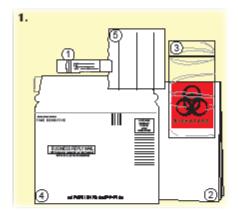
<u>Có Thể Ngừa Được Cúm!</u> <u>Có Thể Ngừa Được Ung Thư Ruột Giá!</u>

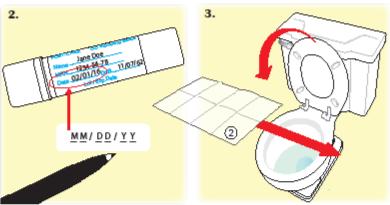
- •Xét nghiệm phân hằng năm làm dễ dàng.
- •Xét nghiệm phân hằng năm có thể cứu sinh mạng quý vị.
- •Bác sĩ và y tá đề nghị làm xét nghiệm ung thư ruột gìa cho những người khỏe mạnh từ 50 đến 79 tuổi.
- •"Quý vi nên đi khám lúc nào? Chúng tôi sẽ cho quý vị biết hôm nay!"

Грипп можно предотвратить! Рак толстой кишки можно предотвратить!

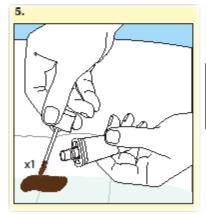
- Проводить ежегодно анализ кала очень просто.
- •Проведение анализа кала ежегодно может спасти вам жизнь.
- Обследование с целью предотвращения рака толстой кишки рекомедуется докторами всем женщинам мужчинам в возрасте от 50 до 79 лет.
- •Когда нужно сделать тест? Мы скажем Вам об этом сегодня.

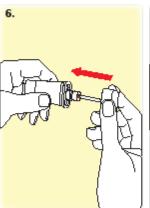
FIT Instructions

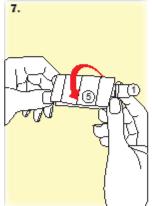


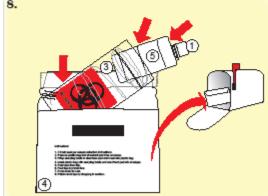












Funding provided by the Centers for Disease Control and Prevention (Award Number U48 DF004469) and the Jacobsohn Fund for Excellence
Adapted by the Health Outcomes Policy & Economics (HOPE) Research Program
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Don't forget about costs

 Costs influenced by extent to which services provided can be billed or reimbursed.

- Main Components:
 - Program Materials \$
 - Staffing \$\$
 - Follow-up Colonoscopy \$\$\$\$
- You will need your own local business case

Implementation Resources



HOW TO DO IT

STAFF TRANING

PROGRAM MATERIALS

PUBLICATIONS

CONTACTS



What is the FluFIT Program?

FluFIT is an award-winning and research-tested program that helps health care teams increase colorectal cancer screening rates by offering fecal immunochemical tests (FIT) to eligible patients during annual flu shot campaigns. Successful FluFIT Programs have been implemented in primary health care settings across the United States.

LEARN MORE

Public Website with Sample Program Materials: http://flufobt.org

Summary

- 1. FluFIT Programs are just one of many ways to "kickstart" or "enhance" colorectal cancer screening activities in primary care.
- 2. FluFIT Programs reinforce the message that "just like a flu shot, we need to offer FIT to our patients every year."
- 3. Lessons learned from doing FluFIT programs can be used to improve screening practices throughout your organization.

Summary

- 4. Keys to success
 - Decide that screening is important.
 - Engage the whole clinic team.
 - Make it feasible.
 - Make it fun and creative.
 - Map effective processes.
 - Learn from mistakes
 - Celebrate small successes
 - Share stories on Facebook
 - Don't give up!

Summary

- 5. Use Available Resources
 - FluFIT.org website
 - Advertise and share stories about FluFIT on Facebook
 - Ask for help from your local American Cancer
 Society team they have experience and may be able to offer technical assistance
 - Check out nccrt.org for helpful resources from the National Colorectal Cancer Roundtable

Collaborators in Flu-FIT Program Development, Evaluation, and Dissemination



























THANK YOU!

michael.potter@ucsf.edu
http://flufit.org

Q&A



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