

CASE STUDY SPOTLIGHT

Tiburcio Vasquez Health Center



Type

Federally Qualified Health Center

Location

Alameda County, CA

EHR

OCHIN-Epic

27,492
patients

- 92.0% of patients at or below 200% Federal Poverty Guideline
- 60.8% of patients are best served in a language other than English
- 28.0% of patients are uninsured

4

locations

Union City | Hayward | San Leandro | Fremont



Patient Strategies

- Patient reminder or recall/in reach
- Patient education
- Navigator/Community Health Worker



Clinician/Staff Strategies

- Provider reminder or recall
- Care team/team-based approach



Reducing Structural Barriers

- Open scheduling
- Expanded office hours

Background

Tiburcio Vasquez Health Center (TVHC) placed a focus on increasing colorectal cancer (CRC) screening rates after identifying that in 2016 the health center's CRC screening rate was below the national average for Federally Qualified Health Centers (FQHCs).

Results

Between 2017 and 2019, the practice increased CRC screening rates from 33% to 40%.

Evidence-based Strategies and Innovations

TVHC used multiple strategies to increase their CRC screening rates, including reducing structural barriers by offering expanded office hours and mailed fecal immunochemical tests (FITs). All staff in the participating clinics were engaged in the CRC screening efforts and educated about the importance and handling of FITs. Patient education and reminders were also essential to success, as well as designating a Medical Assistant (MA) to assist in the process. TVHC shared the following solutions and lessons learned from their CRC screening interventions:

Mailed FITs

- The practice has a dedicated MA who spends four hours per week on mailed FIT processes.
- TVHC adapted successes from different practices, such as putting labels on kits to remind the patient to add the date the sample was completed. The MA also sends reminders to patients to keep the kit in the bathroom for easier access.

The Health Center Sought Ways to “Normalize Poop” with Staff

- TVHC allowed open dialogue with non-clinical staff to discuss concerns and provided education to them on the importance of accepting FIT kits.
- The front office staff were the ones receiving the FIT kits and had to get used to it. The message shared with them was, “This is something that can save someone’s life”. Providers and MAs normalized the process of FIT collection in their practice by creating a supportive and open environment.

Patient Education and Communication

After-visit summaries provided to patients who take home a FIT include an illustrated, wordless instruction sheet developed by the Kaiser Permanente Center for Health Research. The practice then follows up with patients by text message. This is available in [Appendix CS09-4](#).

Birthday Card Reminder Campaign

- TVHC implemented a birthday reminder campaign for existing patients who have both a birthday and an upcoming appointment. They mail FIT kits to these patients and give them a choice to either return their completed kit by mail or bring it with them when they come in for their visit.
 - The key to success with this campaign is that patients are already making an investment in their health. Patients that received these reminders had been in for an appointment within the last 18 months and had an upcoming appointment in six weeks.
 - Patients who had not been in for a recent visit or did not have an upcoming appointment were much less likely to return a completed FIT.
- An alert is placed in the chart and during the reminder call for the visit. The MA encourages the patient to bring in the test or return it via mail.

Addressing Structural Barriers

- In addition to offering same-day and urgent appointments, the practice also provides after-hours appointments, some Saturday appointments, a mobile van, and outdoor wellness clinics where patients can obtain FITs. They also implemented a “poop on-demand” option, which offers patients the opportunity to provide a stool sample for testing while in the office.
- One of the structural barriers the practice encountered was that patients didn’t want to walk upstairs to the lab to drop off their completed FIT kits. Additionally, both the lab and post office would frequently reject mailed FIT kits from patients. To address this issue:
 - The health center worked with the lab supervisor to agree on a process where the patient returns the kit to the clinic’s front desk staff, who then hand-deliver the specimens to the lab.
 - Part of normalizing the FIT kits with front office staff included providing them with gloves and having them agree to deliver the kits daily to the lab (sometimes several times a day). This not only assisted patients who were unable or unwilling to climb stairs, it also eliminated the barrier of both the lab and the post office rejecting mailed kits.

Tools Shared

- Photo of FIT colon reminder – the graphic is stuck to all the computers in the adult medicine clinic as a reminder to check CRC screening status – [Appendix CS09-1](#).
- Flyer promoting colorectal cancer screening to African American patients – [Appendix CS09-2](#).
- Mailed FIT workflow (used by MAs until centralized care coordination staff are available), when order is sent it goes to a centralized work queue for mailing – [Appendix CS09-3](#).
- Wordless FIT instructions for patients – the health center uses the Kaiser Permanente Center for Health Research wordless FIT instructions – [Appendix CS09-4](#).



Interviewees

Blair Brown, MD

Senior Director, Population Health and Quality Improvement
Tiburcio Vasquez Health Center



Jessica Jamison, MPH

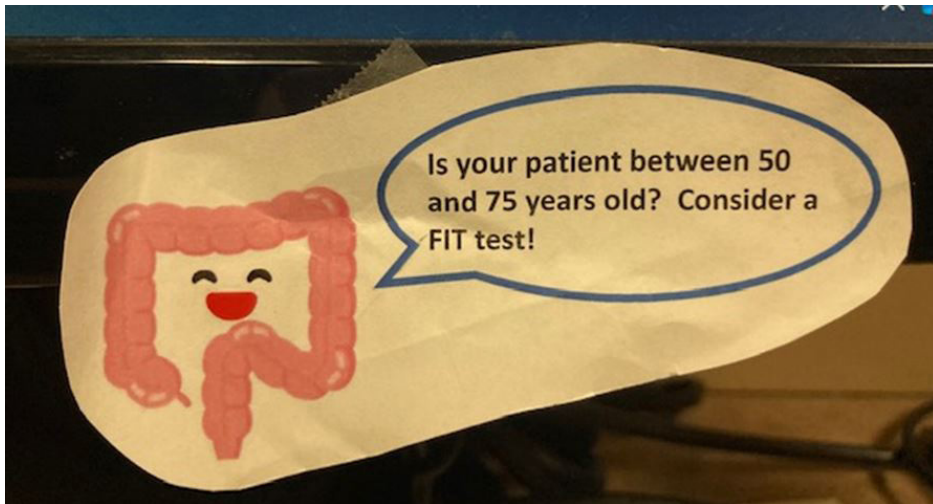
Former Director, Patient and Community Engagement
Tiburcio Vasquez Health Center

CASE STUDY APPENDICES

CS09-1


FIT Colon Reminder


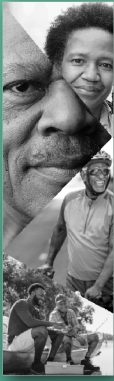

The graphic is stuck to all the computers in the adult medicine clinic as a reminder to check CRC screening status.




CS09-2

Flyer promoting colorectal cancer screening to African American patients

 **Tiburcio Vasquez Health Center**

The best test is the test that gets done.




Did you know, African Americans are at higher than average risk for colon cancer?


90%

People who complete yearly colon cancer screenings have a 90% survival rate after diagnosis.


What is a FIT Kit? The fecal immunochemical test (FIT) checks for hidden blood in your poop from your lower intestines. This quick and easy test must be done every year and can be done in the privacy of your own home.




Are you are over the age of 45? Protect yourself from colon cancer by completing a FIT.



Request a FIT kit from your provider during your visit or through your MyChart account.



Follow the instructions to complete and return your FIT by mail or in person.



We will notify you of the results once they are available.

www.TVHC.org

Call or Text
(510)471-5880

CS09-3

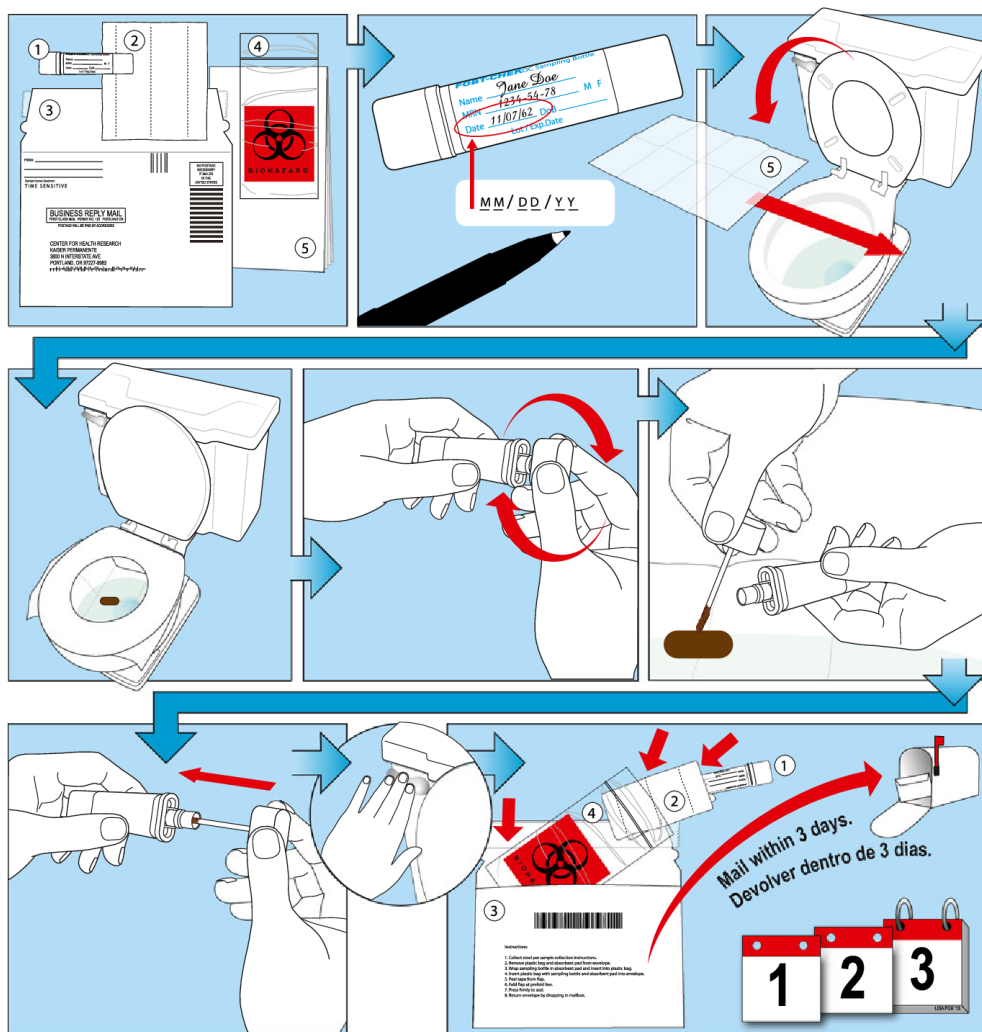
Mailed FIT workflow (used by MAs until centralized care coordination staff are available)

When order is sent it goes to a centralized work queue for mailing.

21 – 75

21-65 w/ cervix: Cervical Cancer Screen (Pap)
 40-74 w/ breasts: Breast Cancer Screen (Mammo)
 45-75: Colorectal Cancer Screen (FIT)

- Review relevant tabs (labs, imaging, etc) in Epic, Care Everywhere & Patient Archive
- Search item name in Epic search bar (ex: pap, mammogram, FIT, etc)
- Document most recent result in Epic Care Gap tab
- If due, pend/send orders to PCP or schedule visit
- Update documentation in Epic & create recall apt for appropriate follow-up



CS09-4

Wordless FIT instructions for patients

The health center uses the Kaiser Permanente Center for Health Research wordless FIT instructions.