

Increasing Colorectal Cancer Screening Rates in Primary Care

The American Cancer Society National Colorectal Cancer Roundtable (ACS NCCRT) developed the **STEPS for Increasing Colorectal Cancer Screening Rates: A Manual for Primary Care Practices** to offer evidence-based, expert-endorsed recommendations to help improve colorectal cancer (CRC) screening rates in primary care practices.

Among men and women combined, CRC is the second most common cause of cancer deaths. For adults younger than 50 years of age, CRC is now the leading cause of cancer death in men and the second-leading cause in women.¹

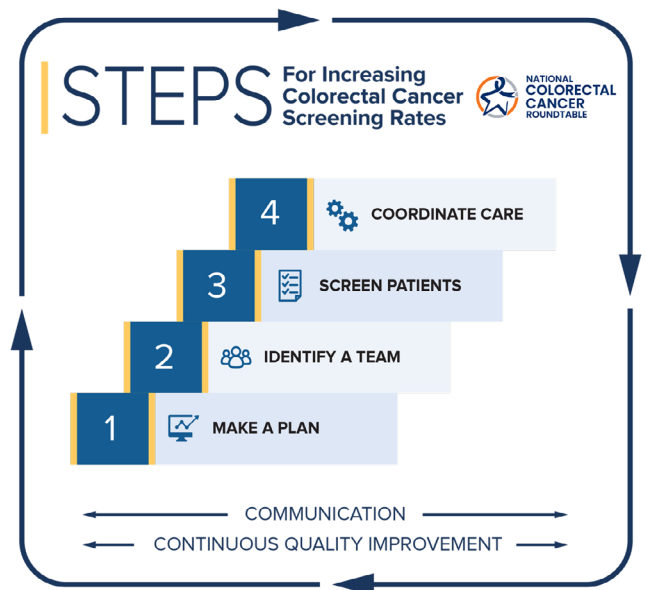
CRC screening can help save lives by finding them early when treatment is often most effective. Primary care clinicians play a crucial role in ensuring on-time and regular CRC screening. This is critically important as 1 in 3 eligible adults are not getting screened as recommended.²



Why use this manual?

The manual provides step-by-step instructions for planning and implementing an effective CRC screening program to increase screening rates. Those who utilize this information will learn how to:

- Agree on and implement a screening strategy in a clinical setting
- Promote the use of appropriate and high-quality screening modalities
- Access tools to help patients complete timely, recommended CRC screenings
- Track follow-up of screening and results
- Build networks among primary care, specialty care, and health systems
- Incorporate successful workflow models



Why focus on CRC screening?

The American Cancer Society recommends that people who are at average risk of CRC begin regular screening at age 45. Here's why:



Screening for CRC can help save lives.

Few preventive interventions are as reliably effective in reducing avoidable death as CRC screening.



The burden of CRC is swiftly shifting to younger individuals.

In just two decades, CRC has moved up from being the fourth-leading cause of cancer death in people under age 50, to first in men and second in women.¹



CRC screening disparities persist.

Many communities, including certain racial and ethnic communities and low-income communities, report low CRC screening rates.



Advanced diagnoses of CRC are on the rise.

The proportion of individuals diagnosed with advanced-stage CRC has increased from 52% in the mid-200s to 60% in 2019.²

Build a strategy to improve CRC screening rates.

Through accessible, easy-to-navigate content, the STEPS manual functions as a succinct guide for primary care teams to improve CRC screening and outcomes in their practice.

The goal of the manual is to help primary care clinicians understand and address the screening needs of the communities they serve – setting them up to successfully meet the ACS NCCRT's national screening goals.

Resources included:

- Background information on the importance of CRC screening.
- Case studies from exemplary and diverse practices from across the country.
- Field-tested tools, templates, and resources to get your practice started.

What's Inside



Up-to-date sources that provide clinicians with CRC screening, incidence, and mortality rates and data visualizations.



Performance measures, charts, and worksheets to help practices calculate and monitor their baseline CRC screening rates.



Readiness assessment tools that allow practices to assess current CRC screening processes, as well as gaps and needs.



Quick guide of available CRC screening methods, including key points for practices to consider and compare when determining their screening strategies.



Calculator tool that allows practices to estimate the number of anticipated colonoscopies (and relevant costs) in a high-quality stool-based CRC screening program.



Patient navigation resources, manuals, and checklists to help practices define the roles of navigators and design navigation interventions for CRC screening.



Template for practices to use to develop and describe their CRC screening policies.



Risk assessment and screening tools to help practices systematically collect, document, and address patient information related to family or genetic risk of CRC.



Sample scripts to help clinicians facilitate CRC screening discussions with patients throughout the CRC screening process.



Patient education materials to help clinicians prepare patients to make informed decisions about CRC screening.

Additional resources include:

Worksheets to help practices collect, monitor, and report data on their CRC screening rates to assess and improve program quality.

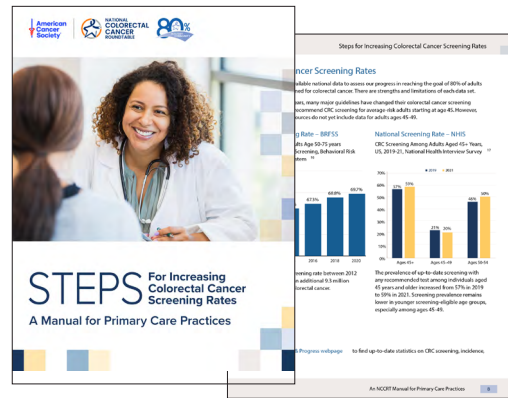
Case studies of CRC screening improvements at diverse health systems. Practices can use lessons learned to glean insights and jumpstart their adoption of best practices.

Ready to get started?



To access **STEPS for Increasing Colorectal Cancer Screening Rates: A Manual for Primary Care Practices**, scan the QR code.

Visit nccrt.org for more resources from the ACS NCCRT.



80% in Every Community is an ACS NCCRT initiative in which 1,800+ organizations are working toward the shared goal of CRC screening rates of 80% and higher in communities across the nation.



Established by the American Cancer Society in partnership with the Centers for Disease Control and Prevention in 1997, the ACS National Colorectal Cancer Roundtable is a national coalition of 225+ member organizations that acts as a catalyst to stimulate work on key issues around colorectal cancer in the United States.

Follow the ACS National Colorectal Cancer Roundtable

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References

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2. Siegel RL, Wagle NS, Cercek A, Smith RA, Jemal A. Colorectal cancer statistics, 2023. *CA Cancer J Clin.* 2023;73(3):233-254. [doi:10.3322/caac.21772](https://doi.org/10.3322/caac.21772)
3. Khalili F, Najafi B, Mansour-Ghanaei F, Yousefi M, Abdollahzad H, Motlagh A. Cost-effectiveness analysis of colorectal cancer screening: a systematic review. *Risk Manag Healthc Policy.* 2020;13:1499-1512. [doi:10.2147/RMHP.S262171](https://doi.org/10.2147/RMHP.S262171)



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