Title of Intervention: Increasing Colorectal Cancer Screening Access through a Nurse Practitioner-Led Screening Clinic

Intervention Strategies: Environments and Policies, Provider Education, Supportive Relationships, Individual Education, Campaigns and Promotions

Purpose of the Intervention: To increase access to colorectal cancer screening

Population: Nurse practitioners and patients

Setting: A screening clinic in the Repatriation General Hospital in southern Adelaide, Australia; health care facility-based

Partners: Local university, health care providers, hospital

Intervention Description:
- Environments and Policies: A nurse practitioner was authorized and trained to lead a colorectal cancer screening clinic in a community health clinic. Patients with positive screenings were fast-tracked to a health care facility for more advanced screening tests.
- Provider Education: The nurse practitioner received training from other health care providers prior to opening the clinic. Education sessions reviewed the types of non-invasive screening kits available and the barriers to access to screening. The risk categories for colorectal cancer and the average risk criteria for patients referred to the clinic were reviewed. The nurse practitioner received follow-up support through telephone consultations.
- Supportive Relationships: Prior to the patient’s visit, the nurse practitioner established a rapport by calling the patients to answer questions and provide instruction. Screened individuals were informed of their progress during the test, and those who watched the procedure on screen were taught more through the procedure.
- Individual Education: After the screening, patients were invited to be on a reminder list for future screenings.
- Campaigns and Promotions: A “marketing strategy” promoted the opportunity for average-risk patients in need of screening to receive screening by the nurse practitioner. Educational brochures were also given to individuals before and after the procedure.

Theory: Not mentioned

Resources Required:
- Staff/Volunteers: Nurse practitioner, health care providers, office support staff
- Training: Not mentioned
- Technology: Not mentioned
- Space: Procedure room, place for provider education sessions
- Budget: Not mentioned
- Intervention: Brochures, education materials for general practitioners, screening supplies, phone, reminder system
- Evaluation: Questionnaires

Evaluation:
- Design: Pilot study
- Methods and Measures: A post-procedure questionnaire assessed patients’ quality of experience and likeliness of returning for future screening.

Outcomes:
- Short Term Impact: The overwhelming majority of individuals were willing to return for future testing by a nurse practitioner.
- Long Term Impact: Not measured
Lessons Learned: The intervention must have the support of nursing and medical peers, the medical director and the hospital administration. Taking time to give careful explanations and being mindful of personal privacy significantly improves the patient's impression and helps reduce anxiety. Identifying a key medical and nursing facilitator to whom the nurse practitioner can relate while establishing the service is important.

Citation(s):