Title of Intervention: Intervention for Colorectal Cancer Screening Among Veterans

Intervention Strategies: Provider Education, Individual Education

Purpose of the Intervention: To increase colorectal cancer screening recommendations and screening rates in a Veterans Affairs medical center

Population: Health care providers and male veteran patients, aged 50 and older

Setting: Brown Veterans Affairs Medical Center in the Lakeside Division in urban Chicago, Illinois; health care facility-based

Partners: None mentioned

Intervention Description:
- Provider Education: An initial session on the rationale and guidelines for colorectal cancer screening and improving communication with individuals with low literacy levels was held with the intervention group of health care providers. Every four to six months thereafter, a feedback session was conducted for providers where they received information about the facility’s screening recommendation rates and adherence to screening recommendations. Providers also received confidential reports on their individual recommendation and adherence rates. Those who could not attend the sessions were told the highlights of the session.
- Individual Education: Veterans who agreed to participate watched a short video (using veterans as actors) that discussed colorectal cancer and screening and social and emotional messages to empower, motivate and increase self-efficacy of veterans. They also received a brochure with simple language and illustrations. Those who received a non-invasive screening from their health care provider also received a set of simplified instructions to complete the test.

Theory: Health Belief Model

Resources Required:
- Staff/Volunteers: Health care facility staff to coordinate activities, education session leaders
- Training: Chart review training for staff
- Technology: Electronic chart database, audiovisual equipment
- Space: Space for viewing video
- Budget: Not mentioned
- Intervention: Brochures, video, feedback reports
- Evaluation: Access to medical charts, surveys, interviewers

Evaluation:
- Design: Randomized controlled trial
- Methods and Measures:
  - Provider education class attendance was tracked.
  - A medical chart review assessed rates for provider recommendation of screening and colorectal screening completion.

Outcomes:
- Short Term Impact: Health care providers who attended at least one feedback session were significantly more likely to make a recommendation for any screening test than those in the control group of providers. Veterans who watched the individual education video were significantly more likely to receive a recommendation for a screening test.
- Long Term Impact: Veterans whose providers attended at least one feedback session were significantly more likely to complete a screening test than those whose provider did not.

Maintenance: Not mentioned
Lessons Learned: The video may have helped heighten the patients’ awareness of colorectal cancer screening and led to a discussion about colorectal cancer when they had their appointment. Coordinating patient and staff availability and gaining access to adequate space and a relatively private setting was difficult. This type of intervention may be effective because it requires minimal time, provides individualized feedback and encourages primary care providers to analyze and discuss their preventive screening priorities and specific barriers to colorectal cancer recommendations.

Citation(s):