

Title of Intervention: Provider Education Intervention to Improve Colorectal Cancer Screening Rates among African American Patients

Intervention Strategies: Provider Education

Purpose of the Intervention: To improve colorectal cancer screening rates for African Americans

Population: Health care providers and their African American patients aged 50 and older

Setting: Health care clinic; health care facility-based

Partners: George Washington University Division of Gastroenterology and Liver Diseases

Intervention Description:

- Provider Education: Health care providers attended instructive seminars on colorectal cancer screening recommendations, which included an observation of screening exams, a 25-question pre-test and post-test and training on how to chart the performance of cancer screening on summary forms in patient medical records. The education sessions were case-based learning discussions moderated by a senior-level health care provider. For each case, screening guidelines were reviewed and the appropriate screening modality was chosen based on patient's age, race, gender and family history.

Theory: Not mentioned

Resources Required:

- Staff/Volunteers: Senior-health care provider
- Training: Training to deliver education
- Technology: Not mentioned
- Space: Space for discussions
- Budget: Not mentioned
- Intervention: Education materials, access to medical records, screening guidelines, surveys, access to medical equipment, patient models
- Evaluation: Observation forms

Evaluation:

- Design: Pre/post comparison
- Methods and Measures: Providers' performances of several colorectal cancer screenings were evaluated.

Outcomes:

- Short Term Impact: Not measured
- Long Term Impact: There was no statistical difference in the rates at which rectal exams and fecal occult blood tests were conducted before and after the intervention. There was a significant improvement in the rate at which endoscopic assessments were performed.

Maintenance: Not mentioned

Lessons Learned: It is important that all patients are offered colorectal cancer screening and particularly important that African Americans undergo assessments due to their higher risk. Educational interventions focused upon racial disparity in colorectal cancer may improve providers' performance of screening exams in African American populations.

Citation(s):

Friedman M, Borum ML. Colorectal cancer screening of African Americans by internal medicine resident physicians can be improved with focused educational efforts. J Natl Med Assoc. Sep 2007; 99(9):1010-1012.