

Title of Intervention: Targeted and Tailored Interventions to Increase the Use of Colorectal Cancer Screening

Intervention Strategies: Individual Education, Supportive Relationships

Purpose of the Intervention: To increase colorectal cancer screening rates

Population: Racially and ethnically diverse adult patients aged 50-74

Setting: Large, urban health care facility in Philadelphia; health care facility-based, home-based

Partners: Public health research company

Intervention Description: Participants were assigned to one of three intervention groups: standard, tailored, or tailored plus phone call. Each intervention group received two rounds of contact.

- Individual Education: The standard intervention group received a mailed standard intervention, which included a mailed colorectal cancer screening invitation letter, an information booklet and a home screening kit. The screening letter was personalized and encouraged recipients to return the completed kit and to call the practice to schedule a screening. Detailed instructions concerning arranging screenings were provided by a designated practice coordinator at the time of patient contact. The tailored intervention group was sent the standard intervention plus two tailored "message pages." The pages included brief messages addressing personal barriers to screening that were identified through analyses of baseline survey data.
- Supportive Relationships: In addition to the standard intervention and the tailored message pages, the tailored plus phone call intervention group also received a reminder telephone call. During the call, a trained health educator reviewed the mailed materials and encouraged participants to consider screening.

Theory: Preventive Health Model

Resources Required:

- Staff/Volunteers: Practice coordinator, trained health educator
- Training: Not mentioned
- Technology: Computer
- Space: Office space
- Budget: Targeted intervention (\$42/participant); additional costs of adding tailored print materials (\$150/participant) and of delivering reminder telephone calls (\$200/participant); cost per additional individual screened \$319
- Intervention: Informational booklet, electronic message bank, access to baseline data, invitation and reminder letters, home screening kits, message pages, envelopes, paper, postage
- Evaluation: Telephone surveys, access to patient charts, access to electronic billing database, access to screening laboratory databases

Evaluation:

- Design: Randomized controlled trial
- Methods and Measures:
 - A survey measured decision stages for different screening methods to determine overall screening preference.
 - Endpoint chart audits were conducted to determine whether there was evidence of screening during the observation period.
 - Electronic billing databases and a screening laboratory database were inspected in order to locate evidence of screening.

Outcomes:

- Short Term Impact: Not mentioned
- Long Term Impact: Screening use was significantly different for all intervention groups compared to the control group. The tailored plus phone call group participants were more likely to undergo screening.

Maintenance: Not mentioned

Lessons Learned: Further research is needed to determine how much telephone reminders can increase colorectal cancer screening use. In relation to intervention tailoring, it would be worthwhile to explore the impact of delivering messages related to factors that affect screening use.

Citation(s):

Myers RE, Sifri R, Hyslop T, et al. A randomized controlled trial of the impact of targeted and tailored interventions on colorectal cancer screening. *Cancer*. Nov 1 2007;110(9):2083-2091.

Lairson DR, DiCarlo M, Myers RE, et al. Cost-effectiveness of targeted and tailored interventions on colorectal cancer screening use. *Cancer*. Feb 15 2008;112(4):779-788.