

Title of Intervention: Improving Cancer Screening in Healthcare Provider Practices Serving Low-Income and Minority Populations

Intervention Strategies: Provider Education, Individual Education, Environments and Policies

Purpose of the Intervention: To evaluate a health maintenance organization-sponsored intervention to improve cancer screening in private practices serving low-income, minority populations

Population: Health care providers and patients

Setting: Health care facilities located in primarily black and Hispanic low-socioeconomic neighborhoods of Chicago, Illinois; health care facility-based

Partners: The University of Illinois College of Medicine and School of Public Health, health maintenance organization

Intervention Description:

- **Provider Education:** A reminder system consisted of a chart flow sheet to facilitate recording and tracking of cancer detection tests and a chart sticker to alert providers that a patient was due for a test. Training sessions were conducted on site at each intervention health care facility. The training focused on screening guidelines, how to use a chart reminder system and patient health maintenance cards. The primary care providers from the intervention practices were also invited to a continuing medical education seminar on early cancer detection and management.
- **Individual Education:** The patient health maintenance cards replicated the flow sheet information for the patients and were intended to increase demand for, and facilitate, discussion of cancer-detection procedures with providers.
- **Environments and Policies:** An office chart reminder system, the patient health maintenance cards, and improved quality assurance protocols were intended to become part of the routine procedures.

Theory: Not mentioned

Resources Required:

- **Staff/Volunteers:** Chart abstractors
- **Training:** Not mentioned
- **Technology:** Not mentioned
- **Space:** Office space and training space
- **Budget:** Not mentioned
- **Intervention:** Chart flow sheets, chart stickers, health maintenance cards, quality assurance protocols
- **Evaluation:** Statistical software and computers

Evaluation:

- **Design:** Randomized controlled trial
- **Methods and Measures:**
 - Colorectal screening status was assessed through medical chart reviews.

Outcomes:

- **Short Term Impact:** Not measured
- **Long Term Impact:** There was an increase in the proportion of patients who had received colorectal cancer screening.

Maintenance: Two follow-up assistance visits were made to each intervention practice about three and six weeks after training to reinforce the initial training and to answer questions. The intervention maintenance strategies were incorporated into the existing quality assurance system and included periodic chart reviews and feedback to the practices on their performance to ensure quality.

Lessons Learned: Managed care organizations can give greater attention to, and provide incentives for, improving cancer screening of their members, regardless of the type of practice in which they are seen.

Citation(s):

Manfredi C, Czaja R, Freels S, Trubitt M, Warnecke R, Lacey L. Prescribe for health. Improving cancer screening in physician practices serving low-income and minority populations. Arch Fam Med. Jul-Aug 1998;7(4):329-337.