

Cancer Screening Outreach at MetroHealth's J Glen Outpatient Clinic



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Background

- J. Glen Smith Community Health Center is a federally qualified health center operated in partnership with the Cleveland Department of Health and MetroHealth, serving the Glenville, Collinwood, and St. Clair-Superior neighborhoods.
- Colorectal cancer is one of the leading causes of cancer death, but it is highly preventable with regular screening.
- FIT is a simple at-home stool test that supports early detection.
- Outreach and patient education can help improve screening completion.

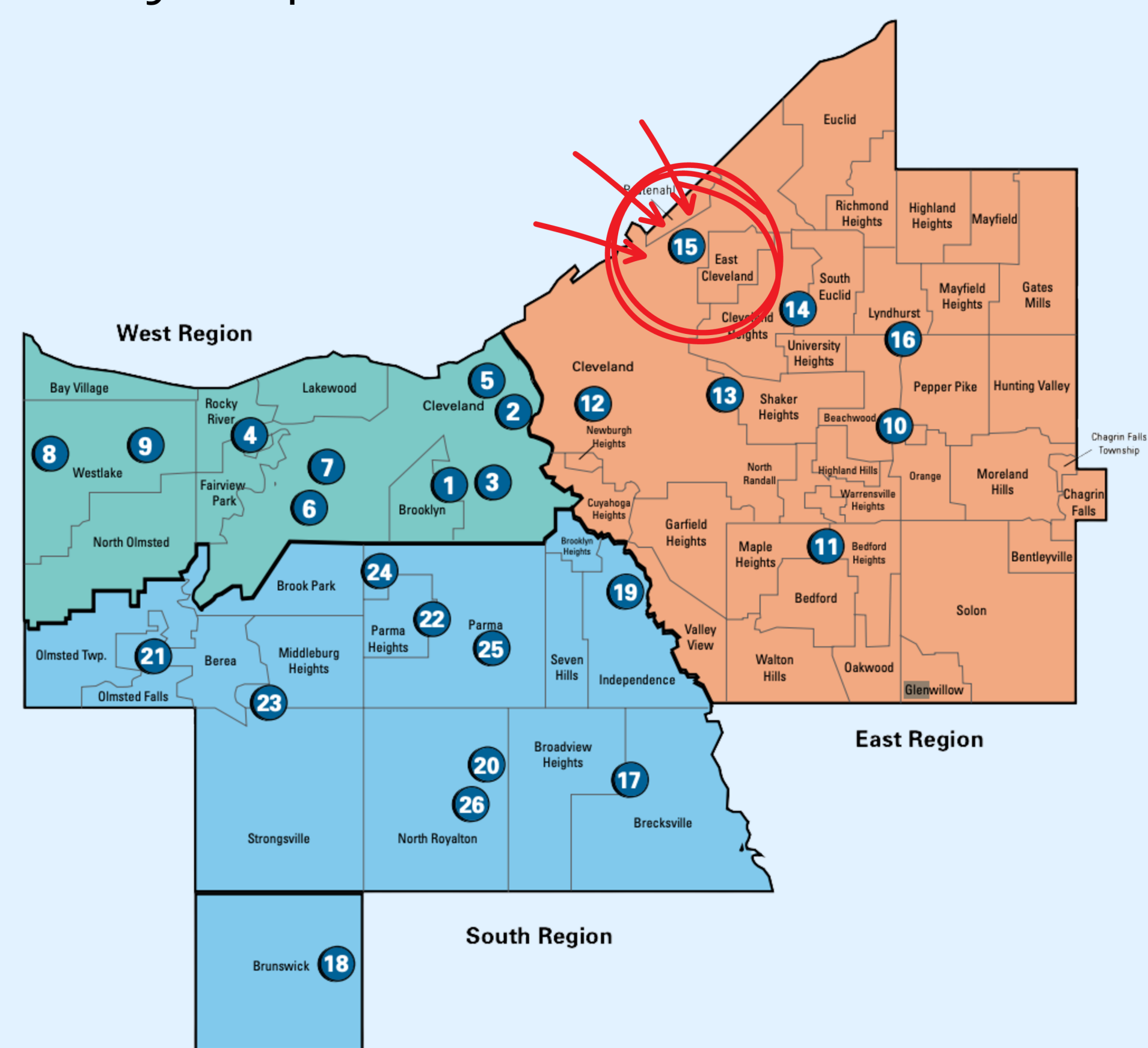


Figure 1: Map of all MetroHealth locations, with #15 highlighted as J. Glen

Learning Objectives

- Analyze patient and system-level data on preventive service utilization and health behavior outcomes in a primary care setting to identify gaps and opportunities for improvement.
- Apply evidence-based public health and health behavior theories to the development or refinement of interventions that support the delivery of preventive care.
- Evaluate the feasibility, effectiveness, and sustainability of clinic-based public health strategies implemented within primary care to address population health needs.

Activities

- Assist the community health worker in making FIT test reminder calls to patients due for colorectal cancer screening using motivational interviewing techniques.
- Development and evaluation of practical tools or materials (educational or evaluation materials) to support ongoing clinic efforts.
- Shadow primary care providers (physicians, nurse practitioners, physician associates, medical assistants, community health workers, and other medical staff) to gain a comprehensive understanding of how the medical clinic operates and identify potential inflection points to be addressed later.
- Collaborate with MetroHealth clinical and public health staff to support a continuation project focused on preventive care and/or health behavior-related outcomes within J. Glenn.
- Translate findings into written deliverables that MetroHealth can use for quality improvement.
- Participate in regular meetings with the preceptor and project team to discuss progress, barriers, and implementation considerations.

Deliverables

- A written QI report summarizing findings from the practicum/capstone project.
- Low-literacy breast cancer screening fact sheet.
- Low-literacy prostate cancer screening fact sheet.
- Screening outreach data summary.

Methods

- Called patients due for colorectal cancer screening.
 - Used motivational interviewing during outreach calls.
 - Recorded de-identified call outcomes and sent replacement FIT kits when needed.
- Synthesized clinical guidance into low-literacy patient fact sheets.
 - Verified accuracy and checked readability of educational materials.

Public Health Implications

- The project increased colorectal cancer screening among eligible patients.
- FIT outreach may improve follow-up and screening completion.
- Clinic-based patient navigation and education can support earlier detection and prevention.

Results

FIT Reminder Calling Sankey

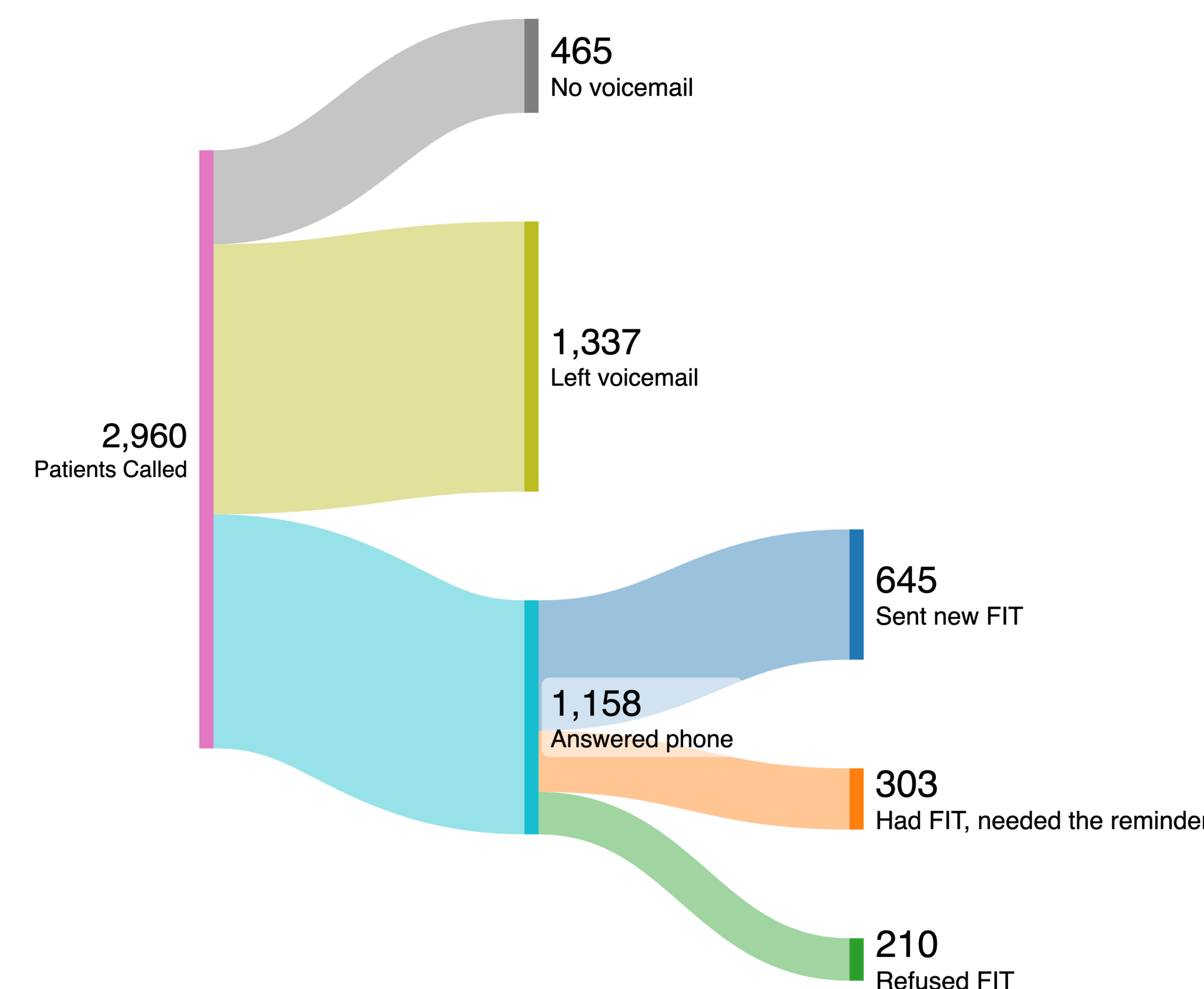


Figure 2: Sankey diagram depicting breakdown of FIT reminder calls made.

Reasons Patients Refused the FIT Test

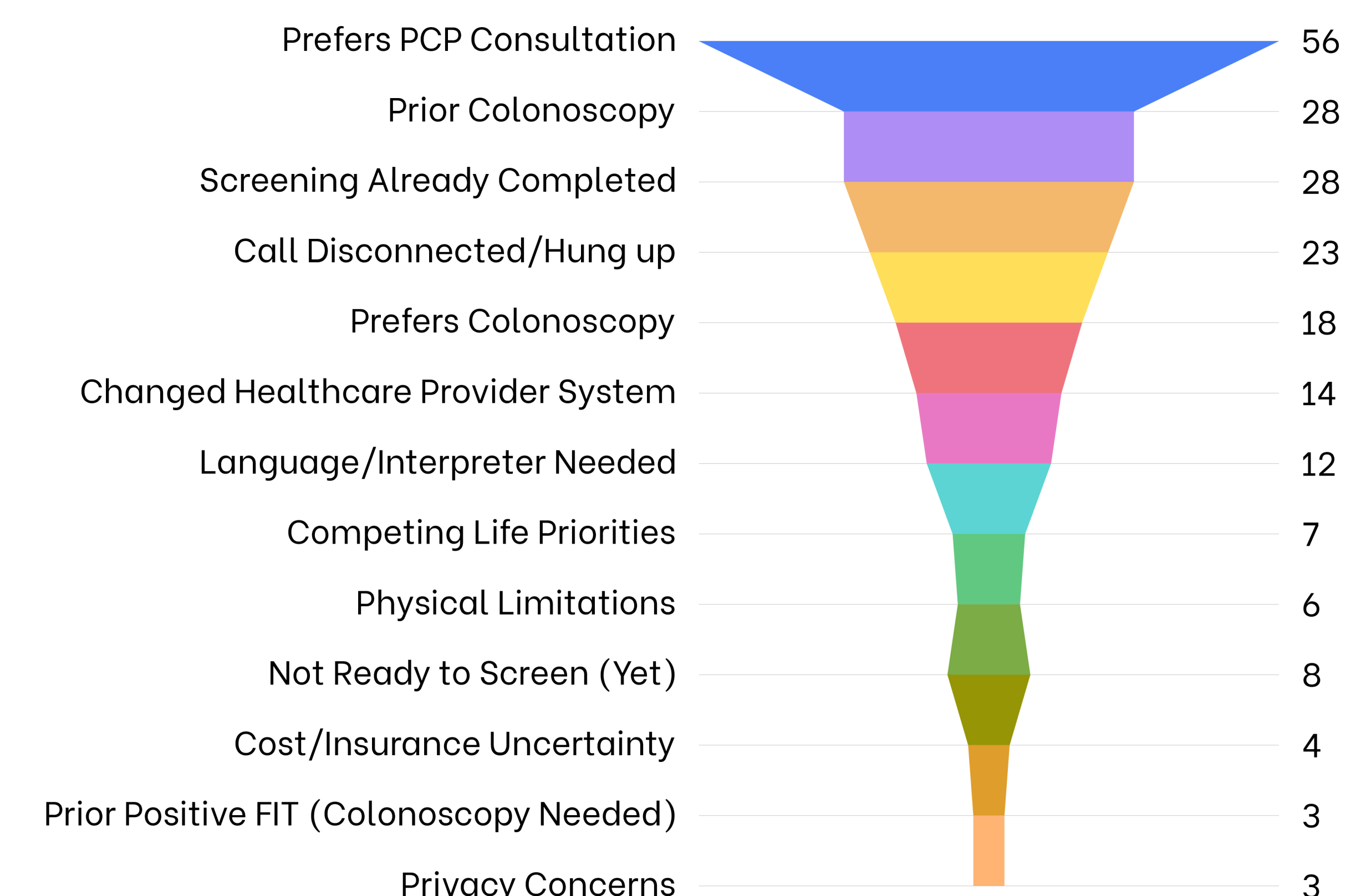


Figure 3: Funnel chart breakdown of the 210 reasons patients declined to take the FIT test.

Lessons Learned

- Large systems require time and coordination across departments.
- Motivational interviewing was more effective than a direct reminder approach.
- Physical data collection has both strengths and limitations.
- Clear communication is essential for project success

Acknowledgements

I am truly grateful to Dr. Daprano for this incredible opportunity and for graciously accommodating my piles and piles data in his office.