

Session/Poster#

Presenter

C39

Abhayvir Singh

College of Medicine Student

Advisor(s): Dr. Montgomery Douglas, Dept of Family and Community Medicine

Improving Colorectal Cancer Screening Rates at the Brownsville Multi-Service Family Health Centers

Colorectal cancer is among the leading causes of premature deaths in Brownsville, Brooklyn and residents die at a disproportionately higher rate compared to the rest of NYC. The Brownsville Multi-Service Family Health Center (BMS) is a Federally Qualified Health Center (FQHC) with 5 clinical sites located throughout the community, providing primary and specialty care services for uninsured and underinsured people. The colorectal cancer screening rate at BMS for 2021 was 51.7%, while the national average among the FQHCs was 41.9%. The purpose of this performance improvement project was to follow-up with patients in order to improve screening rates throughout BMS clinic sites. Data from patient conversations was used to explore reasons for nonadherence with screening recommendations. A total of 150 patients were contacted for this study from a list generated by the electronic health record system. Analysis of patient follow-up revealed the primary reasons for nonadherence with colorectal cancer screening include lack of understanding of screening process, missed clinician referral, workflow errors, and fear over colonoscopy procedure. Proposed solutions to increase screening rates apply multicomponent interventions that recognize the role of city, state, national policies to ensure accessibility of preventative care to all adults. Data suggests enforcement and optimization of the protocols in place to improve screening metrics at the clinic level. A comprehensive approach can save lives and improve prognosis of a disease that disproportionately affects Brownsville residents. The success of proposed interventions will be evaluated from the annual clinical measures, gathered by the BMS clinical quality coordinator. These measures are submitted to the Uniform Data System of the Health Resources & Services Administration as a requirement of FQHC status.