

## Abstract

Low Colorectal Cancer (CRC) screening rate and Health Effectiveness Data and Information Set (HEDIS) score below 24% threshold were the major issues noted at the project site. CRC is the third most prevalent cancer worldwide and the second leading cause of death in the United States. There were over 147,950 recorded CRC diagnoses, 53,200 deaths, and more than 35.2 cases per 100,000 people in California alone. CRC screening can prolong life, but screening is still low. Approximately 1 in 3 adults aged 50 to 75 years have not screened as recommended by the United States Preventive Services Task Force (USPSTF). The objectives were to determine if provider education on CRC screening and follow-up phone calls increase CRC screening rate at project site. The quality improvement project was implemented in a Federally Qualified Health Center (FQHC) over a 4-week period. Descriptive statistics were used to analyze the LVN compliance rate and chi square test of association was used to analyze the Fecal Immunochemical Test (FIT) kit return rate. All patients aged 45-75 years were included in the project. The LVN provided a brief CRC education before handing over the FIT kits to patients and made a follow-up phone call to remind the patients to return the FIT kits. The CRC screening rate increased from 156 (89.6%) to 196 (97.5%), HEDIS scores increased by 4.06% with 100% LVN compliance with the follow-up calls. In conclusion, the CRC education and follow-up phone calls were effective in increasing the CRC screening rates, though target HEDIS scores of 5% was not met.

**Keywords:** *Colorectal cancer screening, FQHC, health promotion and disease prevention, FIT kit, multilevel intervention for CRC*