FROM THE PROGRAM DIRECTOR

I am thrilled to share the inaugural report for the Fred Hutch/UW Medicine Population Health Colorectal Cancer (CRC) Screening Program which launched in September 2021!

Since the program’s inception, we have worked in partnership with UW Medicine and Harborview Medical Center primary care clinics to create a solid workflow to reach patients due for CRC screening, and we are delighted with the results: our first mailed Fecal Immunochemical Test (FIT) campaign reached nearly 10,000 patients! In keeping with our health equity focus, we prioritized clinics and patient populations with lower screening rates. The important work of ensuring follow-up with these patients is ongoing and we look forward to analyzing the rich data that will result.

The CRC Screening Program team has also grown, with the hiring of Jerry Wood as Panel Navigator and Amanda Kimura as Program Manager. Jerry and Amanda round out our small yet formidable team with strong expertise in quality improvement, program management, patient navigation, prioritizing health equity, and colorectal cancer screening implementation.

We are committed to serving and collaborating with communities to achieve our mission. In March, we held our first community awareness event in partnership with the Urban League of Metropolitan Seattle, King County Public Health, and many others local organizations. Community members learned how to prevent and reduce their risk for colorectal cancer through education, lifestyle changes, and conversations with physician experts and survivors. This event was very well received, and our team has also received multiple requests for future events.

Looking ahead, I am excited to apply our learnings to refine and strengthen the program. As a data-driven organization, we will measure program impact by tracking changes in screening rates, follow-up of abnormal results, and impact on the local community. These learnings will be shared in traditional publications and lay media outlets.

The CRC Screening Program’s work would not be possible without the support of the Fred Hutchinson Cancer Center and UW Medicine Primary Care and Population Health. Thank you for supporting our efforts to improve colorectal cancer outcomes and achieve health equity for all individuals across our institutions.

Rachel Issaka, MD, MAS
Kathryn Surace-Smith Endowed Chair in Health Equity Research
Assistant Professor, Clinical Research & Public Health Sciences Divisions
Assistant Professor, Division of Gastroenterology & Hepatology
Director, Population Health Colorectal Cancer Screening Program
OUR MISSION

To **improve** colorectal cancer (CRC) screening completion for all UW Medicine patients and to **evaluate** interventions to increase screening participation equitably for all individuals.

OUR IMPACT

We expect the program to **improve** patient care quality, **increase** health care equity, and **drive** additional payor contracts across our health system.

“Screening is a way to not only prevent disease but reduce racial and economic disparities. We need to close that gap so that every citizen can benefit from the advances in cancer care and prevention.”

Dr. Rachel Issaka, Program Director
WHO WE ARE

COLORECTAL CANCER SCREENING PROGRAM TEAM

Our Fred Hutch and UW Medicine team of dedicated professionals is committed to improving health equity through quality care and robust research.

Rachel Issaka, MD MAS
Dr. Issaka is the Program Director for the Population Health CRC Screening Program.

- Scientific Oversight

Ari Bell-Brown, MPH
Ari Bell-Brown is a Project Manager for the Hutchinson Institute for Cancer Outcomes Research (HICOR).

- Research Portfolio Management

Amanda Kimura, MPH
Amanda Kimura is a Program Manager for the Population Health CRC Screening Program.

- Programmatic Oversight CRC Screening Program

Nkem Akinsoto, MSc
Nkem Akinsoto is an Assistant Director at UW Medicine Primary Care and Population Health.

- Programmatic Oversight UW Medicine Population Health

Victoria Fang, MD
Dr. Fang serves as Medical Director for UW Medicine Primary Care and Population Health.

- Leadership for UW Medicine Population Health

Jerry Wood
Jerry Wood is a Panel Navigator at UW Medicine Primary Care and Population Health.

- Daily Operations
Building Program Infrastructure

New Staff Spotlight

Jerry Wood, Panel Navigator

Jerry is a Panel Navigator for UW Medicine Primary Care and Population Health. They serve as the point of contact for patients throughout outreach, which includes scheduling appointments and coordinating health services. Jerry also enters and compiles mailed FIT outreach data.

“My approach is to provide information that empowers our diverse patient populations to make decisions that feel best for them. I enjoy attending community events as I get to meet our patients and hear their stories.”

Amanda Kimura, Program Manager

Amanda serves as the Program Manager for the CRC Screening Program. She manages the program’s operations and finances, evaluates the program’s performance and advocates for the program’s services.

“I get to work with a fantastic team who strives to achieve equitable access to CRC screening. I enjoy working together to identify and execute strategies that help people get screened.”

“UW Medicine Primary Care and Population Health shares the UW goal to improve the health of our communities. The CRC screening program is a leap forward in extending our teams’ efforts beyond the confines of our clinics. Our partnership with Fred Hutch has helped us make great strides in meeting our goal to reach more patients for cancer screening. I am excited to see the results and know that this is a model we can continue to build on.”

Dr. Victoria Fang, Medical Director, UW Medicine Primary Care & Population Health

Business Priorities

- Fully staffed team
- Workflow established
- Mailed FIT outreach

Additional Priorities

- UW/Fred Hutch partnership building
- IRB approval

“UW Medicine Primary Care and Population Health shares the UW goal to improve the health of our communities. The CRC screening program is a leap forward in extending our teams’ efforts beyond the confines of our clinics. Our partnership with Fred Hutch has helped us make great strides in meeting our goal to reach more patients for cancer screening. I am excited to see the results and know that this is a model we can continue to build on.”

Dr. Victoria Fang, Medical Director, UW Medicine Primary Care & Population Health
ACCOMPLISHMENTS

GETTING PATIENTS TESTED

In the first half of the year, the team worked with UW Medicine and Harborview primary care clinics to refine and finalize a workflow for mailed outreach, developed communication materials to accompany the FIT kits, and established a contract and workflow to complete all mailings.

EDUCATING COMMUNITIES

In March 2022, the program held its first CRC Community Awareness event in partnership with nine local organizations. Community members learned how to prevent and reduce their risk for colorectal cancer. Participants had the opportunity to take home CRC screening test kits, walk through an inflatable colon (CECE), get connected to healthcare resources, and listen to survivor stories.

Photo by Leo Carmona/ Seattle Cancer Care Alliance
The CRC Screening Program also established the Health Equity Working Group, whose purpose is to advise the program as it strives towards achieving health equity for all eligible patients. The group includes representatives from community-based organizations and health systems. Towards this goal, we expanded language access to program materials. FIT outreach materials were translated into the most spoken languages across our health system - Spanish, Somali, Chinese and Vietnamese. Translations into Russian and Arabic are ongoing. Additionally, in collaboration with Harborview Medical Center International Medicine Clinic, we produced videos demonstrating how to use a FIT kit that can be accessed through QR codes in English, Spanish, Somali, Chinese, Vietnamese, Khmer, Russian and Arabic.
WORKING IN COMMUNITY

HEALTH EQUITY WORKING GROUP

The Health Equity Working Group’s purpose is to advise the CRC Screening Program as it strives to achieve health equity for all eligible patients. The group meets quarterly and includes patient advocates and representatives from community-based organizations and health systems.

Rachel Issaka, MD, MAS
Director, Population Health CRC Screening Program, Fred Hutch/ University of Washington

Nkem Akinsoto, MSc
Assistant Director, UW Primary Care and Population Health, University of Washington

Bryan Balmadrid, MD
Medical Director, Gastroenterology, Harborview Medical Center

Ari Bell-Brown, MPH
Project Manager, HICOR, Fred Hutch

Vida Henderson, PhD, PharmD
Assistant Professor, Public Health Sciences, Fred Hutch

La Shanda Hurst
CRC Patient Advocate Business Program Manager, Microsoft Philanthropies, Microsoft

Anita Mitchell Isler, CPN
Founder/ Director, Washington Colon Cancer Stars 501c3

Amanda Kimura, MPH
Program Manager, Population Health CRC Screening Program, Fred Hutch

Richard Kincade, MD, MSHA
Clinic Chief, UW Medicine Primary Care Clinic – Kent Des Moines, University of Washington

Susan Onstad
Director, UW Population Health Analytics, University of Washington

Martine Pierre-Louis, MPH
Director, Equity, Diversity and Inclusion, Harborview Medical Center

Joycelyn Thomas, DNP, ARNP
Health Ministry Chair, New Beginnings Christian Fellowship Medical Director, Virginia Mason Franciscan Health Federal Way Medical Clinic
**KEY RESULTS TO DATE**

In alignment with program goals, we prioritized clinic locations and patient populations with lower screening rates, where less than 50% or 50-75% of the eligible population were up-to-date with CRC screening. We identified 16 total clinics to focus our year 1 mailed outreach efforts. Individuals within these clinics who were 50 to 75 years old, spoke English or Spanish, and did not have a history of CRC, colectomy, or the following health conditions (inflammatory bowel diseases, advanced cardiopulmonary diseases, and metastatic cancer) were eligible for this year’s outreach. As previously noted, we have since translated program materials into additional languages and will include these populations in future outreach.

Based on the eligibility criteria (Figure 1), FIT kits were mailed to 9,716 patients between March 2022 and June 2022.

<table>
<thead>
<tr>
<th>Eligible Patients</th>
<th>Eligible Facilities</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ages 50-75</td>
<td>Selected from Harborview Medical Center, Hall Health, and UW Medicine Primary Care Clinics (previously known as Neighborhood Clinics). Clinics were triaged as follows:</td>
</tr>
<tr>
<td>A primary care encounter at a UW Medicine facility in the past 3 years</td>
<td>• Clinics with less than 50% of eligible population up-to-date (UTD)</td>
</tr>
<tr>
<td>English or Spanish speaking</td>
<td>• Clinics with 50-75% of the eligible population UTD</td>
</tr>
<tr>
<td>Due for CRC screening as of December 31, 2021</td>
<td></td>
</tr>
<tr>
<td>Without advanced comorbidities</td>
<td></td>
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</tbody>
</table>

Figure 1. Site and patient eligibility criteria for mailed FIT outreach

The program will complete all initial outreach attempts by July 31, 2022. Preliminary data (Figure 2) reveals that to date, 25% (n=2,448/9716) FIT kits have been completed and returned. One hundred forty-two (142) FITs have abnormal results reported, with seventeen (17) patients completing a diagnostic colonoscopy to date. As differences in outcomes are noted when a colonoscopy is not completed within one year of an abnormal FIT result, this group will be a key focus of upcoming reminder efforts. These numbers do not include the individuals who opted to complete a colonoscopy outright, a choice offered in our screening program. Above all, this data represents individuals who might not have completed CRC screening otherwise!

<table>
<thead>
<tr>
<th>Mailed FIT Data</th>
</tr>
</thead>
<tbody>
<tr>
<td># FITs mailed</td>
</tr>
<tr>
<td># FITs resulted</td>
</tr>
<tr>
<td>FIT return rate</td>
</tr>
<tr>
<td># Abnormal FITs</td>
</tr>
<tr>
<td>Dx Colonoscopy completed</td>
</tr>
</tbody>
</table>

Figure 2. Data on mailed FIT outreach as of July 22, 2022.
We identified barriers to program implementation in year 01 and solutions that we will work towards in year 02.

**Inclusion of uninsured patients**
- **Barrier:** Lab processing fees for FIT kits prohibited some uninsured or underinsured patients from participating in screening
- **Solution:** Develop a process between FHCC and UW to ensure patients who are uninsured or underinsured do not incur upfront lab fees

**Streamlining data management**
- **Barrier:** Lack of processes for cross-institutional data management
- **Solution:** Work with the new FHCC Chief Data Officer to streamline data access and management

**Epic limitations**
- **Barrier:** Our electronic health record (Epic) lacks a program to enable efficient tracking of patients throughout the CRC screening process
- **Solution:** Work with UW Medicine IT team to build a program to effectively track patients throughout the CRC screening process

**Endoscopy backlog**
- **Barrier:** Backlogs in endoscopy suites due to scheduling staff shortages and the COVID-19 pandemic
- **Solution:** Develop a workflow to enable members of our team to schedule direct access colonoscopies and triage patients to FHCC endoscopy suites scheduled to open in Jan 2023
LOOKING AHEAD

YEAR 2 PLANS

OPTIMIZE PROGRAM INFRASTRUCTURE
❖ Build a sustainable program within Epic for program operations
❖ Improve program monitoring and quality improvement tracking mechanisms

EXPAND PROGRAM POPULATION
❖ Include patients ages 45-49 in mailed FIT outreach
❖ Reach patients with preferred languages other than English and Spanish

ENGAGE STAFF ACROSS HEALTH SYSTEMS
❖ Increase visibility of the program across UW Medicine and Harborview Medical Center
❖ Nurture established relationships and build new allies in support of the program

BUILD COMMUNITY PARTNERSHIPS
❖ Host our second annual CRC community awareness event in March 2023
❖ Attend other community events to promote CRC screening and awareness

SHARE OUR FINDINGS
❖ Publish a manuscript on CRC screening program implementation

EXPAND RESEARCH PROGRAM
❖ Apply for a grant to support expansion of the CRC screening program

July 2022
Conclude phone outreach for this year’s cohort

Aug 2022
Initial data analysis

Fall 2022
Review results and incorporate improvements into program

Jan 2023
Generate list of eligible patients due for CRC screening

Feb 2023
Begin mailed FIT outreach

Mar 2023
Host CRC community awareness event

Aug 2022
Initial data analysis

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Review results and incorporate improvements into program

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Generate list of eligible patients due for CRC screening

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Host CRC community awareness event
THE POPULATION HEALTH
COLORECTAL CANCER
SCREENING TEAM

From left to right: Victoria Fang, Amanda Kimura, Rachel Issaka, Jerry Wood, Nkem Akinsoto, Ari Bell-Brown.
Photo by Robert Hood / Fred Hutch News Service