

# Adaptation of Flu-FIT for Primary Care Aligned Teams

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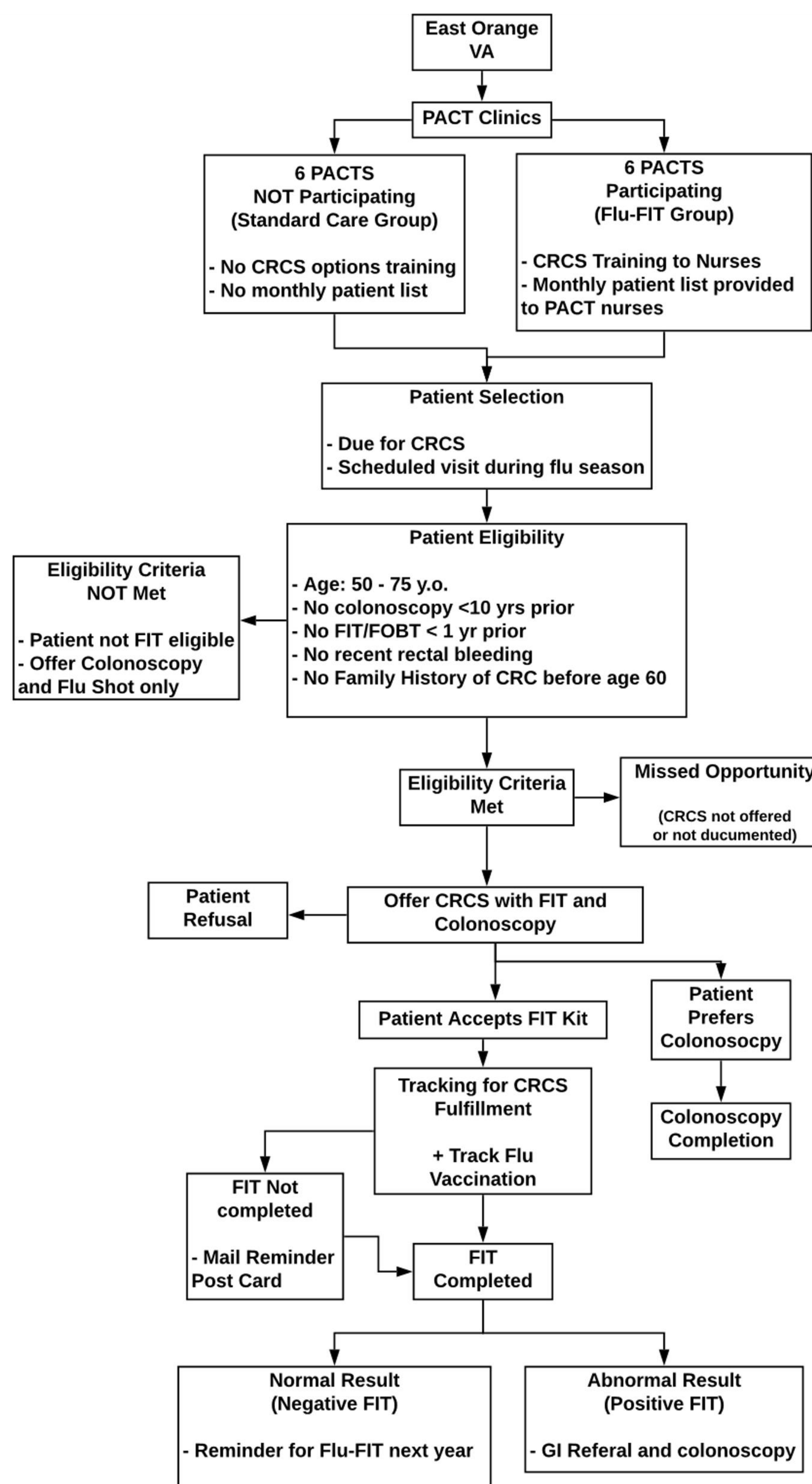
## BACKGROUND

- Colorectal cancer (CRC) deaths can be prevented with appropriate screening.
- Flu-FIT: a research-tested intervention program linking annual influenza immunization and colorectal cancer screening (CRCS) using a fecal immunochemical test (FIT).
- Currently the VA CRCS rate is 77%, they would like it to be higher, over the national VA rate of 82%.
- This is a second implementation of Flu-FIT as a quality improvement project for patient aligned care teams (PACT) at the US Department of Veterans Affairs (VA).

### Objective:

Implement the Flu-FIT project at the East Orange VA, to increase annual CRCS rates above 82% in participating primary care Flu-FIT teams during the 2019-2020 influenza season

## METHODS



- Six participating PACTs participated in the Flu-FIT project.
- Six other PACTs were only monitored and CRCS rates compared.
- Training session for participating nurses: detailed scripts for offering CRCS and educating patients on CRCS options.
- Patient charts pre-screened monthly; list of eligible patients provided to nurses.
- Patient data and FIT completion: October 1, 2019 to April 15, 2020.
- VA protocol remained unchanged:
  - Referral to colonoscopy for positive FIT
  - Documentation and medical record reminder system.
- Nurses provided FIT kits to eligible patients with a brief explanation of the test and verbal encouragement, such as:
  - “Just like a flu shot, you need to complete a colon test every year.”
  - “This test is free and could save your life.”
  - “You can complete the FIT today at home and send it tomorrow.”

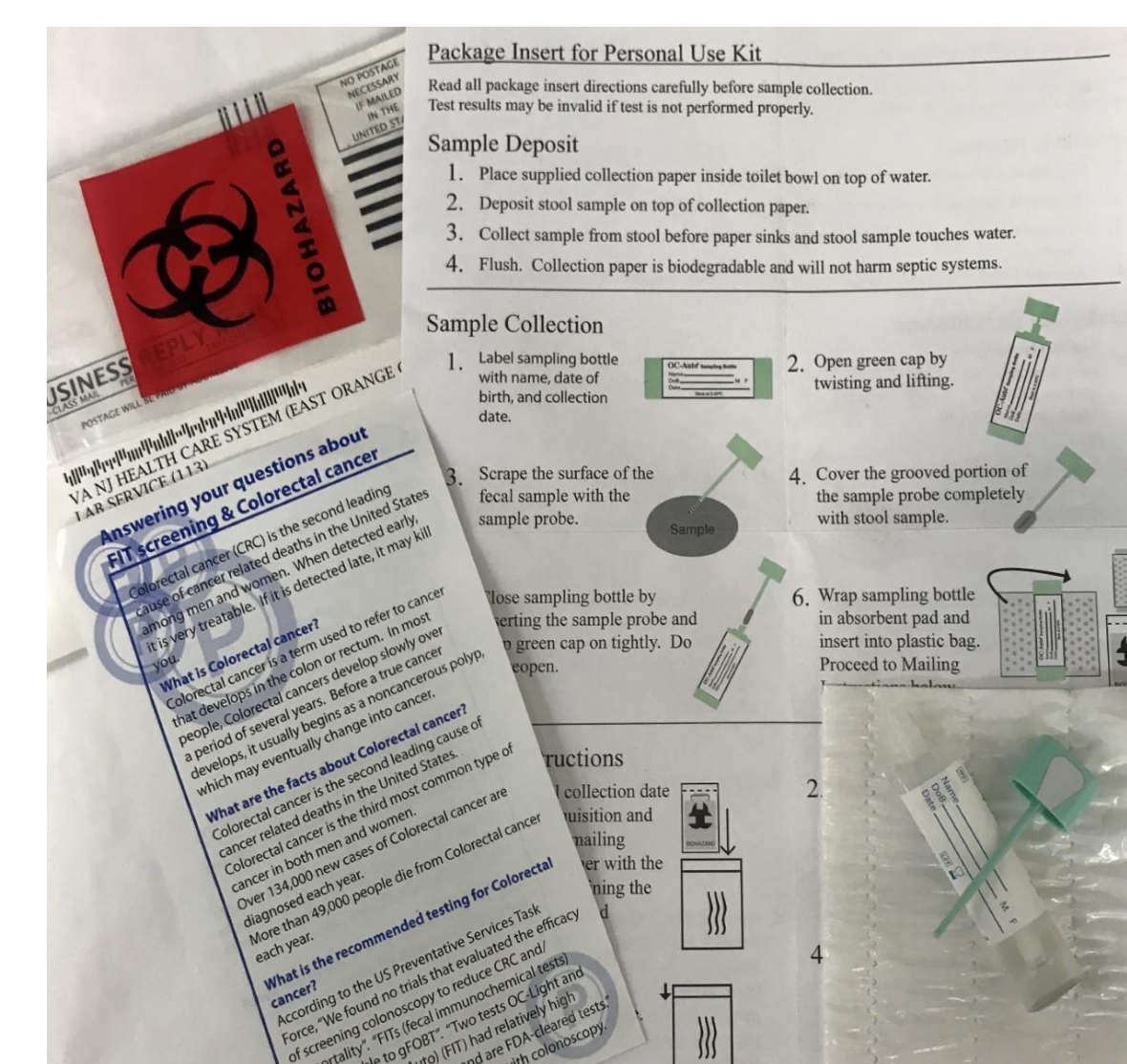
## RESULTS

	Standard Care (n=267)	Flu-FIT (n=242)
<b>Age</b>		
mean (SD)	65 (7.26)	66 (7.21)
<b>Gender</b>		
Male, no. (%)	225 (84.27)	231 (95.45)
Female, no. (%)	42 (15.73)	11 (4.55)
<b>Race/Ethnicity, no. (%)</b>		
Black or African American	140 (52.43)	139 (57.44)
White	87 (32.58)	58 (23.97)
Hispanic	12 (4.49)	17 (7.02)
Other	28 (10.49)	28 (11.57)

	Standard Care (n=267)	Flu-FIT (n=242)	OR (95% CI)	p
Eligible for FIT	193 (72.3)	175 (72.3)	1.00 (0.68, 1.48)	0.99
Accepted FIT	51 (19.1)	88 (36.4)	2.42 (1.62, 3.62)	<0.001
Completed FIT	26 (9.7)	36 (14.9)	1.62 (0.95, 2.77)	0.07
Prefers Colonoscopy	50 (18.7)	48 (19.8)	1.07 (0.69, 1.67)	0.75
Completed Colonoscopy	6 (2.3)	15 (6.2)	2.87 (1.09, 7.53)	0.02
Received Flu Vaccine	163 (61.1)	135 (55.8)	0.81 (0.57, 1.15)	0.22
CRCS Up-to-date	32 (12)	51 (21.1)	1.96 (1.21, 3.17)	0.006

## DISCUSSION

- Statistically significant increase in FIT acceptance and colonoscopy completion in clinics using Flu-FIT program
- Overall increase in CRCS rates with use of both FIT and colonoscopy from a 77% pre-intervention rate to:
  - 79.8% for standard care group
  - 81.9% in Flu-FIT group**
- Limitations:
  - Lack of randomization of the Flu-FIT and standard care patient groups
  - Results not generalizable as project took place in an integrated healthcare system with unique patient population (Veterans)
- Implications for future projects
  - Only 36 out of 88 patients accepting a FIT kit in study group completed the testing
  - Project reach limited to the patients visiting the clinic during the influenza season, but protocols may be adapted to run year-round in future implementations



**References**

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