Colorectal Cancer Screening at Scappoose: an Improvement Science Project

**Problem**
32.8% percent of all OHSU Family Medicine at Scappoose patients eligible for colorectal cancer (CRC) screening (50 – 75 years) were up-to-date on screening based on healthcare maintenance in OCHIN as of October 2015.

**Aim**
By June 1, 2016, 50% of all Scappoose patients eligible for CRC screening will be up-to-date on screening based on review of healthcare maintenance in OCHIN.

**Background**
The residents at Scappoose set out to increase the rates CRC screening among eligible patients, as documented in OCHIN, from a baseline of 32.8% to a goal of 50%. After 4 PDSA cycles, the screening rate has increased to 43%.

**PDSA Cycle #1**
P: Obtain CRC screening baseline data  
D: Scrub OCHIN healthcare maintenance  
S: Less than 33% of eligible patients screened  
A: Obtain clinic buy-in for project

**PDSA Cycle #2**
P: Engage clinic staff in discussions on CRC screening improvement  
D: Presented project to clinic leadership and at staff meetings  
S: Reviewed clinician and staff recommendations  
A: Ensure clinician ownership of CRC screening

**PDSA Cycle #3**
P: Track clinician CRC screening rates, starting with residents  
D: Resident chart review and update of healthcare maintenance for panels  
S: CRC screening rates improved 10% clinic-wide  
A: Gather best practices for clinic-wide workflow

**PDSA Cycle #4**
P: Create clinic-wide workflow based on best practices  
D: Created document to outline process  
S: Gathered input from staff regarding workflow; accepted by staff  
A: Implement workflow

**Next Steps**
- Implement and optimize clinic workflow  
- Discuss with other OHSU family medicine clinics regarding best practices and workflows  
- Communicate workflow updates with clinician leadership and staff  
- Trend data to guide next steps  
- Model effective workflow to improve healthcare maintenance efforts clinic-wide

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