

IMPLEMENTATION GUIDE

El Proyecto de Salud Colorectal, The Colorectal Health Project

*Using an Evidence-Based Program to develop
a process model for program delivery in the practice setting*

Note: Refer to “Putting Public Health Evidence in Action”. Review the appropriate Modules and the handouts provided in each, in order to modify and evaluate this program to meet the needs of your organization and audience.

“Putting Public Health Evidence in Action” is available online at:
<http://cpcrn.org/pub/evidence-in-action/>

I. Program Administration

Medical Director

- Supports program implementation and responds to questions or concerns from clinical staff to overcome implementation barriers

Promotor Manager/Operations Manager

- Participates in training of promotor (health promotor)
- Monitors program implementation
- Provides overview of the program and introduces the program to clinic staff
- Reviews monthly reports of data collected by the promotor
- Supervises the promotor

Promotor (Health Promoter)

- Participates in promotor training and implements the program as outlined in the training handbook
- Identifies patients due for colorectal cancer screening from a review of medical records
- Mails letter to patients with instruction card and fecal occult blood test (FOBT) card
- Conducts outreach and reminder telephone calls to prompt colorectal cancer screening
- Schedules and conducts visits to patients’ homes
- Manages patient contact and encounter information in tracking system or medical records

II. Program Delivery

For additional information on modifying program materials, refer to the appropriate Module(s) for program adaptation from “Putting Public Health Evidence in Action”.

A. Program Materials *(All listed materials can be viewed and/or downloaded from the RTIPs Products Page):*

- **FOBT Instruction Card (available in English and Spanish):** This 1-page card provides instructions for completing the FOBT with images showing the five steps (i.e., prepare card, collect stool, place stool on card, close the cover, repeat).
- **FOBT Training Handbook (available in English and Spanish):** This 24-page training handbook is designed to guide the promotores in conducting patient outreach, educating patients on colorectal health, making follow-up telephone reminders to assess screening status, and conducting home visits.
- **Colorectal Display Flipchart:** This 11-page bilingual (in English and Spanish) educational brochure is designed to be used as a visual aid by promotoras during the home visits to educate patients on colorectal cancer screening. The brochure is double-sided, containing information in English on one side and in Spanish on the other.
- **Letter mailed to households (available in English and Spanish):** This 1-page letter, signed by the medical director, encourages patients to complete the FOBT.

B. Program Implementation:

The steps used to implement this program are as follows:

Step 1: The promotor manager/operations manager trains the promotor on program implementation. The training includes a definition of colorectal cancer; strategies for prevention and early detection of colorectal cancer; guidance on how to use rubber models of a colon with precancerous polyps; how to use FOBT instruction cards; and how to document procedures to track program implementation activities.

Step 2: The promotor reviews clinic medical records to identify Hispanic patients (self-identified as being of Mexican, Central American, South American, or Puerto Rican descent) who are aged 50–79 years and have not had a sigmoidoscopy or colonoscopy within the previous 5 years or FOBT within the past 15 months.

Step 3: The promotor mails each patient the letter, instruction card, and FOBT card.

Step 4: The promotor contacts the patient by telephone to confirm that the patient has received the mailing and to encourage screening if the completed FOBT card has not been returned to the clinic within 2 weeks. A second telephone reminder is conducted if the patient does not return

the FOBT card 2 weeks after the first telephone call. This telephone reminder also serves to schedule the home visit with the patient.

Step 5: During a home visit, the promotor follows the guidance in the training handbook to deliver the educational intervention to the patient. He or she uses the flipchart as a visual aid during the visit. The promotor also reviews the instructions on how to complete the FOBT card and mail it to the clinic.

Step 6: The promotor documents patient encounters and telephone reminders in patient medical records or in a tracking database. The promotor tracks completed FOBT cards and reviews laboratory records to document test receipt dates, the result of the test, and other relevant information about the testing procedure. Any concerns are discussed with the promotor manager/operations manager.

III. Program Evaluation

For additional information on planning and adapting an evaluation, review the appropriate Modules for program implementation and evaluation from “Putting Public Health Evidence in Action”.

<http://cpcrn.org/pub/evidence-in-action/>

For further assistance in designing and conducting an evaluation, consider communicating with members of NCI’s Research to Reality (R2R) Community of Practice who may be able to help you with your research efforts. Following is a link to start an online discussion with the R2R community of practice, after completing registration on the R2R site:

<https://researchtoReality.cancer.gov/discussions>.