

Help Save Lives with FluFIT

The FluFIT Program helps clinical teams increase access to colorectal cancer screening by offering home tests to patients at the time of their annual flu shots. Colorectal cancer is the second leading cause of death throughout the country and could be prevented through routine screenings. Fecal immunochemical tests (FIT) are the least invasive and least expensive form of screening that can be done annually in the patient's home.



Why initiate a program?

- Annual colorectal cancer screening tests are under-used, annual flu-shot activities are an opportunity to reach large amounts of patients that may need a screening;
- Kits can be provided by flu-clinic staff;
- Colorectal cancer screening rates will increase; and
- Flu-FIT programs can spark other initiatives for screening interventions.

How to Initiate a FluFIT Program

- 1. Select your team together**
 - a. Select your team members- MA, Nurse, Manager, etc.
 - b. Define and assign roles and responsibilities
- 2. Begin planning process of program**
 - a. Order supplies and promotional materials
 - b. Consider self-addressed pre-stamped envelopes to ease the return mailing burden
 - c. Patient communications
 - d. Staff training
- 3. Complete training for staff members that are not as familiar with FIT and Flu**
 - a. Ensure staff understand the importance of flu-shots and colorectal cancer screening
 - i. Flu shot facts:**
 1. Flu is often mild but a very serious illness
 2. CDC estimates 3,000-49,000 Americans die of complications from the flu each year
 3. Flu-shots do not cause the flu

4. Flu-shots are recommended for everyone over the age of 6 months

Find more facts and flu-shot information on the CDC's [seasonal flu webpage](#)

The CDC has free training programs for those that provide flu-shots. Access them [here](#).

ii. Colorectal Cancer Screening facts:

1. Second leading cause of cancer in the United States
2. Colorectal cancer is often preventable through screening
3. Early detection and treatment saves lives
4. Colorectal cancer screening is recommended between the ages of 50-75

Find more facts and colorectal cancer screening information on the [CDC's Colon Cancer webpage](#) and the [US Preventative Taskforce webpage](#).

b. Generate workflow process for staff

i. Overview

1. Train staff to offer FIT immediately before or during administration of flu-shots
2. Designate a separate workstation/exam room if your practice has high patient volume- designate a separate flu-shot and FIT station if necessary
3. Ensure staff is familiar and has access to educational material for patients, all workstations are stocked with kits, instruction hand-outs are ready, etc.

ii. Assessing eligibility without a physician

1. No FIT/FOBT in the last year
2. No colonoscopy within 10 years
3. Generate a patient list prior to start of program

iii. Train staff on how to discuss completion of FIT with patients

1. **Use talking points to suggest the test to patients:**
 - a. "We have something extra to offer you today!"
 - b. "It looks like you are due for a home colon test"
 - c. "It's very easy, you can do in the privacy of your home and mail it in"

2. Discuss the instructions with the patient

- a. Walk the patient through the process
- b. Offer patient videos: FIT [English](#) and [Spanish](#)

3. Give patients reminders/tips

- a. "Put the kit in the bathroom so you'll be ready to use it"
- b. "Mail the kit in as soon as you have completed the kit"
- c. "Try to complete the kit in the next week if possible"
- d. "Call us if you have any problems or questions"

iv. Train staff on documentation and follow-up

- 1. Record which patients were given the FIT test in the EHR or through a log-sheet. [See log-sheet in appendix](#)
- 2. Establish reminders for test return dates- set up alerts to remind patients to return their completed test - [See reminder postcard in appendix](#)
- 3. Establish alerts for patients who have not completed and returned the test
- 4. Establish follow-up procedure for informing patients of test results [See tracking sheet example in appendix](#)

4. Establish times and locations

- a. Determine when the program will begin- typically when flu-shot season begins
- b. Determine if the program will have specific Flu-FIT clinic days
- c. Determine the location where the program will take place: during clinic days at designated sites, within the office in exam rooms, in designated vaccination/lab exam room, etc.
- d. Promote the program- flyers, postcards, clinic newsletter, automated phone-call, etc.
 - i. [See flyer/posters/promotion materials in appendix.](#)
 - ii. [Click here for other samples](#)
 - iii. [Click here to access flyer created by American Cancer Society](#) (English and Spanish)

5. Establish patient-flow and management plan

- a. Offer the FIT before giving the flu shot- most people are ready to leave following receipt of their shot
- b. Assess eligibility- age 50-75, no colonoscopy in the last 10 years, no FIT/FOBT in the last year. Information should be available in the chart through health maintenance, face-sheet, etc. Ask patient if information not available in chart

- c. Print out sheet of patients in need of screening prior to the start of the program and use as reference throughout the program

6. Develop process/system for follow-up of dispensed kits

- a. Select a kit that is easy for patient to follow and does not disrupt daily activities- medications, diets, etc. [See a list of brands here](#)
- b. Provide clear instructions for completing and returning kits-use, manufacturer instructions, generate additional hand-out instructions: [Access Insure brand instructions here](#). Access OC-Check Instructions here [English](#) and [Spanish](#). Access FIT instructional video here [English](#) and [Spanish](#)
- c. Provide a return envelope- provide return labels with postage
- d. Complete reminder phone calls or send reminder postcards to patients to return the completed kit. [See reminder postcard example in appendix](#)
- e. Establish protocol for FIT results
 - i. Provide patients with a follow-up phone call for good results
 - ii. Provide patients with a follow-up phone call for abnormal results
 - iii. Ask patients with abnormal results to come in to discuss further screening requirements-colonoscopy
 - iv. Track patients with abnormal results to ensure they received further screening

7. Final Steps

- a. Order flu-shots and FIT kits with return envelopes and postage
- b. Complete a walkthrough
- c. Ensure instructional material, resource information, and flyers/posters are ordered and on hand ready to-go.

8. Measure Results

- a. Generate reports from EHR prior to start of campaign of all patients due or eligible for FIT
- b. Generate reports following completion of the campaign of all patient that have successfully completed FIT
- c. Communicate improvements in monthly newsletter, meeting, etc.



APPENDIX

Flu Vaccination Authorization Record and FluFIT Log

This form must be **signed** by the vaccine recipient or by the parent, guardian, or other authorized person **on the date the vaccine is administered.**

I have read or had explained to me the "Influenza Vaccine Information Statement." I have had an opportunity to ask questions which were answered to my satisfaction. I understand the benefits and risks of influenza vaccine and request that it be given to me or to the person for whom I am authorized to make this request. If I am between the ages of 50 and 75 and being offered a FIT kit for colorectal cancer screening today, it has been explained to me.

Clinic Staff Initials	Flu Shot Site	Signature	Patient Name / Phone	FIT Eligible <ul style="list-style-type: none"> • Age 50-75; • No FIT/FOBT this year; and • No colonoscopy in 10 years 	FIT Given To Patient
		1.		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		2.		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		3.		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		4.		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		5.		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		6.		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		7.		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		8.		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		9.		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
		10.		<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No
___ Total Flu Shots Given			Total FIT: ___ Eligible ___ Given		

Reminder Postcard



Greetings from [name of healthcare facility]!

When you came in to get your flu shot, we gave you a home colon cancer test kit. **If you already completed it, thank you!**

If you haven't done your home colon stool test yet, please do it and send it back to us as soon as possible.

Thank you very much!

[Insert signature of the patient's PCP or of the medical director of the clinic here]

[Insert Clinic Address and Logo here]

**Insert Community Health Network
Logo**

Stamp here

_____, M.D.

[Insert clinic return address here]

Patient's last name, First name

Address _____

City, State, Zip code _____

Telephone Reminder Script

FIT Follow-up Phone Script for Average-Risk Individuals

Introduction:

Good Morning/Afternoon. May I speak with _____? (Note: Due to HIPAA regulations, the conversation should not proceed unless speaking directly with the patient.)

My name is _____ and I am calling from _____. You recently received a stool blood test for colon cancer screening. Did you have any questions about the test? We are calling everyone who received one of these to see if there is any way we can help you complete the test.

1. “Have you had the chance to complete and mail your kit?”

- a. **If the answer is YES**, get the approximate date to ensure that the test will be valid, and get the approximate date of receipt. Thank the participant and let them know that you will mail them their results.
- b. **If the answer is NO**, ask the following question.
Mr./Ms. _____, is there any reason why you have not completed your kit? (Document reason; possible reasons are listed below.)

- Diet and drug restrictions
- Test is difficult and disgusting
- I haven’t had the time
- Changed my mind
- Received other colorectal cancer testing
- Believe it is not effective way of screening
- Health insurance/doctor

2. Emphasize the benefits of screening and program services.

“Colorectal Cancer can affect anyone – men and women alike – and your increases with age. Colorectal Cancer is highly preventable, treatable and often curable. There are several screening tests for colorectal cancer. These tests not only detect colorectal cancer early but can prevent colorectal cancer.

Beginning at age 50, men and women should be screened regularly for colorectal cancer. If you have a personal or family history of colorectal cancer or colorectal polyps, or personal history of another cancer or inflammatory bowel disease, you should begin screening earlier.

3. If patient indicates that they prefer a colonoscopy, ask, “Do you have health insurance?”

If they are insured, suggest a visit to an endoscopist (gastroenterologist or general surgeon) for a colonoscopy. If they do not know a gastroenterologist, give physician referral phone number and appropriate form.

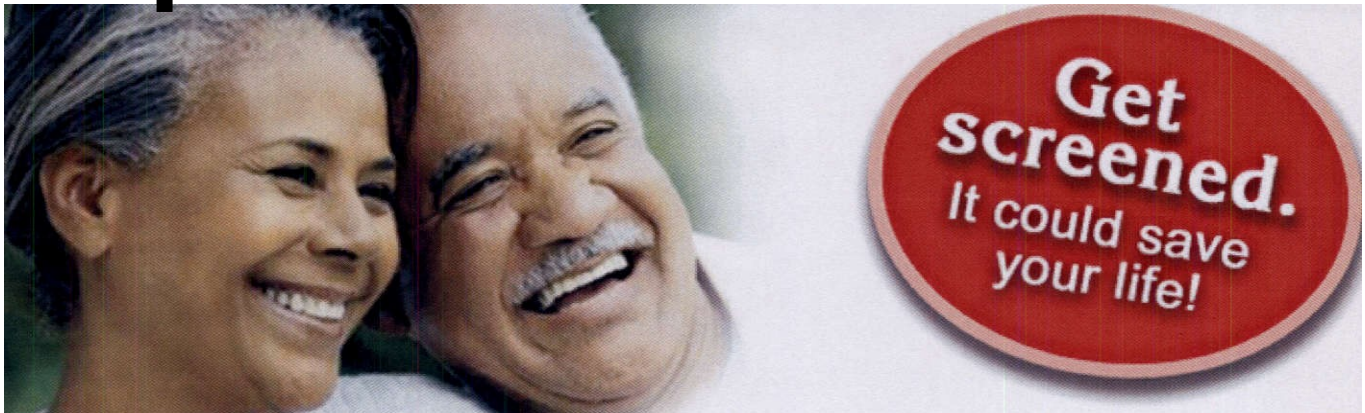
If they are uninsured, follow you Screening for Life (SFL) eligibility processes.

Mr./Ms. _____, thank you for your time today. Do you have any questions? If you need further assistance with completing your kit or have any questions, please give us a call at _____.

Source: Adapted from materials of the Maryland State Cancer Program, and the Montgomery County Cancer Crusade, 2001.



Flu is Preventable! Colon Cancer is Preventable!



Just like the FLU, COLON CANCER is PREVENTABLE and also TREATABLE and BEATABLE when found EARLY!

- Colon screening is recommended for healthy men and women aged 50 to 75.
- One recommended colon screening test is a yearly test that can be done at home.
- Other Recommended Colon Tests include:
 - Colonoscopy every 10 years or Flexible Sigmoidoscopy every five years

YEARLY HOME STOOL TESTS ARE EASY TO DO!

YEARLY HOME STOOL TESTS COULD SAVE YOUR LIFE!

If you are due for colon screening today and have a regular doctor,

WE WOULD LIKE TO OFFER YOU A FREE HOME COLON TEST!
