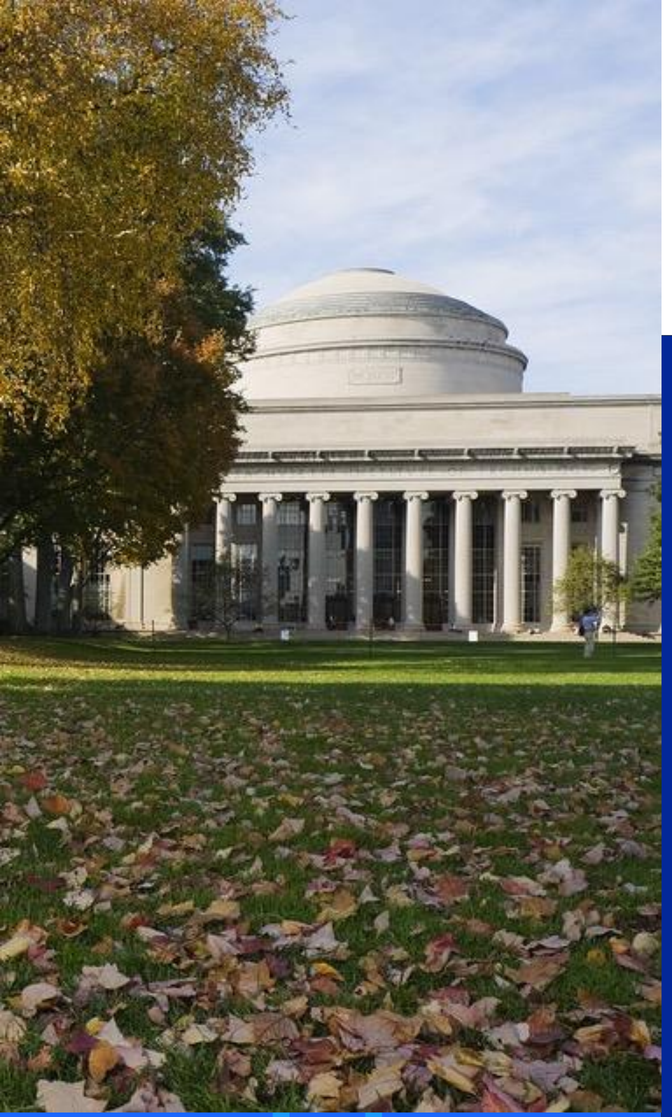

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MIT Health's Ambulatory Safety Net Colorectal Cancer Results

Investing in your health

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Authors

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Colorectal cancer is the third leading cause of cancer-related deaths in both women and men in the United States.

When colorectal cancer is found at an early stage before it has spread, the five-year relative survival rate is about 90%.

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Overview

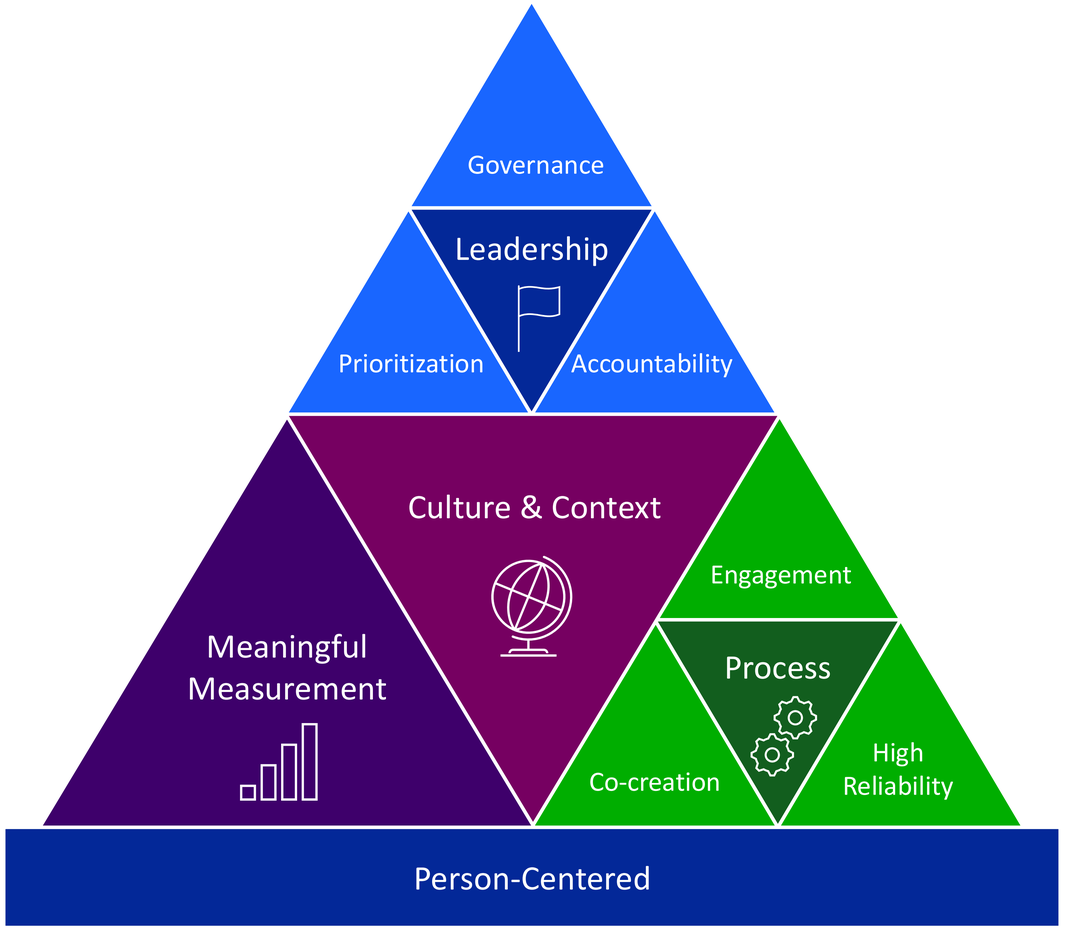
Delays and errors in cancer diagnoses pose significant patient safety risks and can have devastating effects for patients and their families.

In many cases, these errors can be attributed to failures in communication and breakdowns in the loop-closure process — a patient receives an abnormal test result, but the necessary follow up is not completed, and a potential cancer diagnosis is missed.

Overview

MIT Health was awarded a four-year grant by CRICO to establish an Ambulatory Safety Net (ASN) Program for high-risk colorectal cancer screening.

Ambulatory safety nets help provide a safeguard against these errors. An ASN provides a backup system for following up on abnormal test results when the standard follow-up process fails.



Patient Safety Adoption Framework

Process

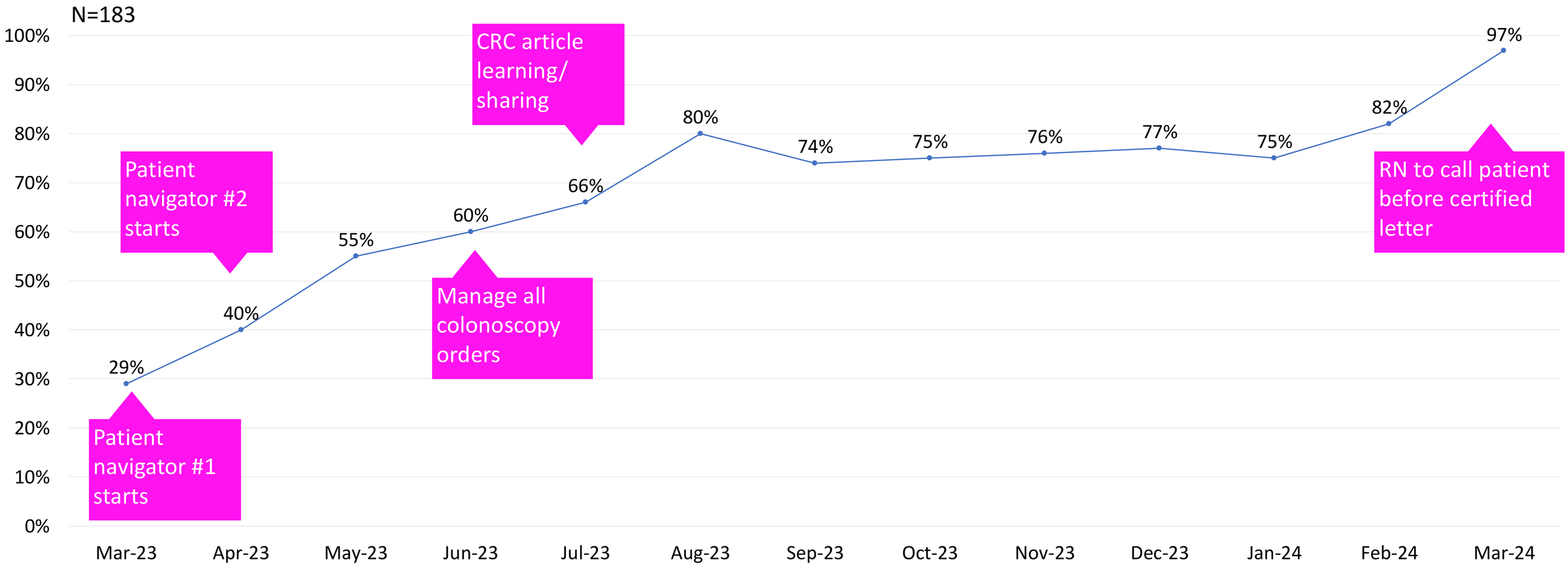
AIM

Implement a colorectal cancer ambulatory safety net to **identify high risk individuals** and ensure 80% of eligible patients complete (or schedule) their colonoscopy.

Interventions

- Create a high-risk registry
- Outreach by patient navigators
- Identify and eliminate barriers
- Provider support and education

Scheduled or completed colonoscopies **increased from 29% to 97%**



Fast Facts

We successfully contacted 92 percent of patients in our registry (n=448)

- The top three barriers were:
  - Scheduling limitations
  - Fear
  - Transportation

Meet the team

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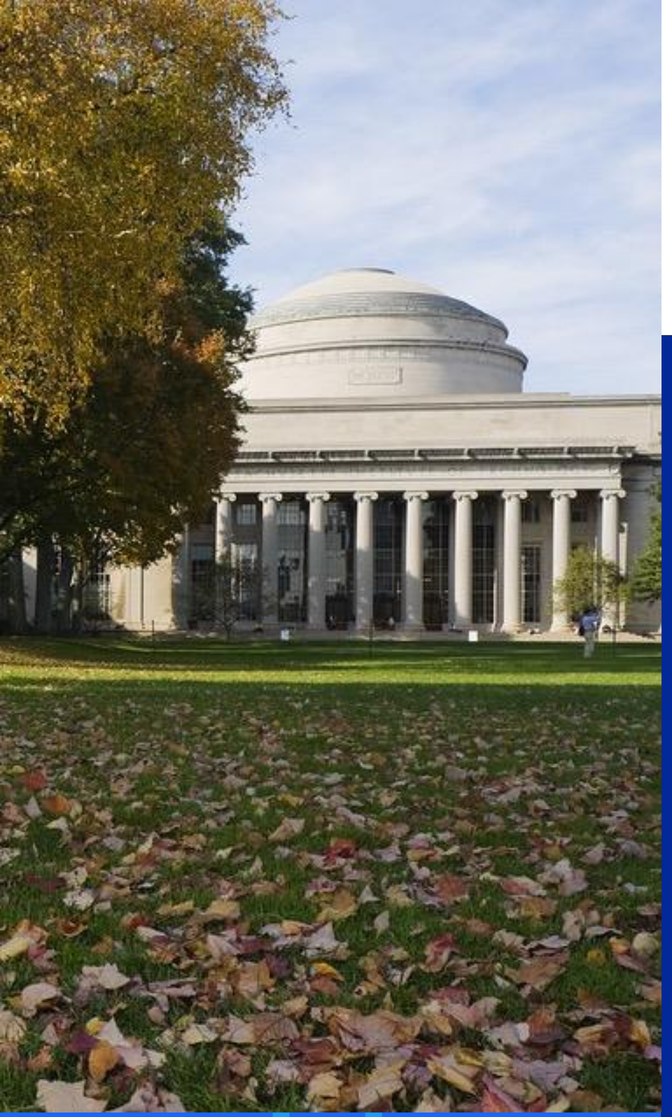

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Thank you!