

# RURAL INNOVATION IMPROVES CRC SCREENING RATES

## BACKGROUND

Fort Thompson Community Health Clinic, a rural Federally Qualified Health Center in South Dakota, serves primarily American Indian patients who face multiple barriers to colorectal cancer (CRC) screening. These include historical mistrust of medical systems, cultural stigma around bodily functions, poverty, lack of private bathrooms, and limited transportation, factors that contribute to low screening rates and delayed diagnoses. The community's CRC mortality rate is nearly twice that of the White population in South Dakota, and with the nearest endoscopy center over an hour away, access to colonoscopies is limited.

## SOLUTION

To overcome these barriers, the clinic implemented a “poop on demand” strategy using immunochemical fecal occult blood tests (iFOBTs). Rather than asking patients to complete the test at home, they were encouraged to provide stool samples during their clinic visit, using the reliable, private bathroom onsite. This eliminated the need for follow-up visits or at-home collection, addressing both logistical and cultural obstacles.

## OUTCOMES

In 2023, the clinic's CRC screening rate rose from 35.66% to 61%—a 25.34% increase. This outcome reflects significant improvement in screening adherence and demonstrates the power of culturally sensitive, patient-centered strategies in rural healthcare settings. The approach helped rebuild trust, reduced delays in preventive care, and may ultimately contribute to lowering CRC mortality in the population served.

## LESSONS LEARNED & NEXT STEPS

Offering point-of-care testing that aligns with the patient's visit, lifestyle, and comfort can drastically improve preventive health outcomes. The success of the “poop on demand” model suggests that similar strategies could be applied in other rural or underserved clinics facing cultural or logistical screening barriers. Future efforts may focus on training additional clinic staff, integrating electronic health record (EHR) prompts to standardize the approach, and exploring funding to sustain and expand the model across other tribal or rural clinics.

### Contact Information

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