

GE-NMF PRIMARY CARE LEADERSHIP PROGRAM



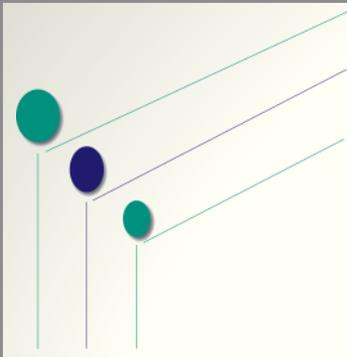
Adult Medicine Cervical Cancer Screening Trial at Watts Healthcare Corporation

Adrienne NH Baksh, Watts Healthcare Corporation, Los Angeles, CA



Introduction

- PCMH Special Funding for Cervical Cancer Screening
- Current projects to increase screening:
 - Reminder system set-up
 - CDSS Alerts in EMR
 - Two phone communications to patients to remind them up due pap smear
- Current protocol for Adult Medicine patients due for a pap smear:
 - Referral to Ob/Gyn by Adult Medicine provider, both in person and electronically in EMR
- Adult Medicine Cervical Cancer Screening Trial composed of two parts:
 - Test effectiveness of reminder system set-up
 - Test effectiveness of offering pap smear to Adult Medicine patients on same day as Adult Medicine appointments



Background

Between 2000 and 2009, incidence of cervical cancer in the United States decreased by two percent each year, but...racial and socioeconomic disparities persist.

- HPV-associated cervical cancer rates of **Hispanic/Latino and black women are 1.5 and 1.33 times**, respectively, that of white women
- **Women at or below 100% and at 100-200% of the poverty rate have respective cervical cancer rates 4.30 and 3.35 times** that of women with family incomes exceeding 600% of the poverty threshold
- Cervical cancer incidence and mortality rates in Los Angeles are, respectively, 1.2 and 1.4 times the national average, with **Latino and poor women having the highest rates.**
- **SPA6** has an alarmingly high cervical cancer death rate that is **2.1 times the LA County average and 4.8 times the national average** despite having slightly higher (1.1 times) reported rates cervical cancer screening in women 18-64

Methodology

Cervical Cancer Screening PDSA 1

PLAN	
Aim (What are we trying to accomplish?)	Increase cervical cancer screening rates for female patients between ages 21-64 from 67.1% to 75%. (2020 Goal: 93% (Healthy People 2020))
Measure (How will we know that a change is an improvement?)	Increase in screening rates that is measured in follow-up analysis.
Change (What change are we making to result in the improvement?)	Reminder System - First stages of the Quality Improvement Work Plan implementation (item c): a. Health maintenance alert feature in EHR implemented to remind providers to order cervical cancer screenings b. Various reminder calls/letters/postcards are generated for patients who are due for screening or who have not had a visit in the last 12 months (as of Jan 2013 the last visit is within three years)



DO
By December 2012, the following three procedures were adopted in an effort to increase cervical cancer screening rates:
<ul style="list-style-type: none"> • 1 week before appt: EMR health maintenance alert • 2 days before appt: Reminder call • 1 day before appt: Reminder call

Cervical Cancer Screening PDSA 2

PLAN	
Aim (What are we trying to accomplish?)	Increase cervical cancer screening for women between ages 21-64 with focus on increasing screening of Adult Medicine patients during their primary care/general appointments. <ul style="list-style-type: none"> ▪ 2011 UDS: 67.14% ▪ 2012 Goal: 85% ▪ 2020 Goal: 93% (Healthy People 2020)
Measure (How will we know that a change is an improvement?)	eCW (EHR) data reports can be analyzed to determine pap screening rates (fraction of qualified screening patients receiving pap).
Change (What change are we making to result in the improvement?)	For this particular 2-3 week cycle, the aim is to demonstrate the need for more cooperation b/w Adult Medicine and Ob/Gyn by <u>placing a non-MD Ob/Gyn staff member (nurse, PA, etc.) in adult medicine dedicated to providing adult female patients with pap screening tests</u> , adding closer interactions into the multi-disciplinary approach (Adult Med and Ob/Gyn interacting within appt instead of relying on computer referral system).



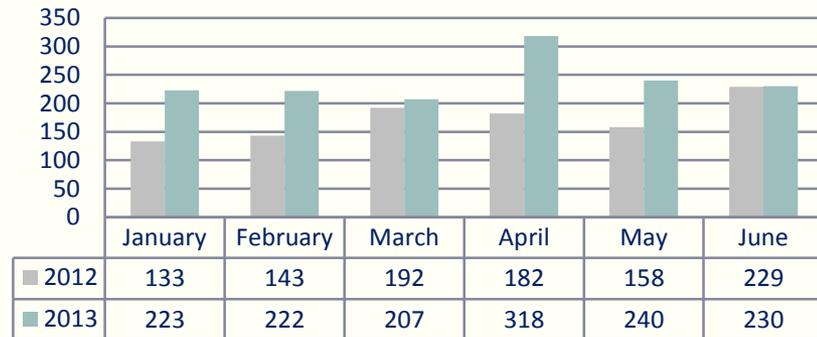
DO
Offer pap smears to eligible female patient visiting Adult Medicine clinic for non-gynecological complaint.

Results

Cervical Cancer Screening PDSA 1

- 63.5% cervical cancer screening rate
- 88% patients with updated pap screening visited Ob/Gyn
- 88% of patients with out-of-date pap smear visited Adult Medicine clinic
- WHCC will not be able to meet its PCMH Cervical Cancer Screening Program goals by focusing solely on screening patients within the context of a gynecological exam within the Ob/Gyn department
- If a minimum of **36 percent of Adult Medicine's unscreened population could receive a cervical cancer screening while they are still at the clinic, WHCC will be able to meet its goal rate of 75% screening.**
- SPA 6 patients increased by 29%

**Cervical Cancer Screening Jan-June
2012 vs. 2013**

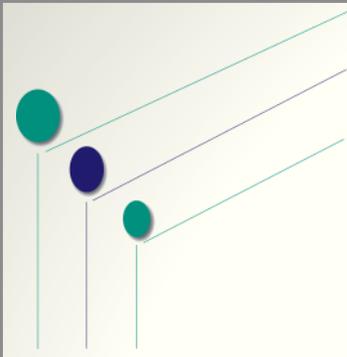


Results

Cervical Cancer Screening PDSA 2

- Total patients surveyed (sample size, n=104) accounted for 94.5% of eligible female patients
- During the trial, the cervical cancer **screening rate increased by 18.3% by giving a pap smear to 90.6%** of Adult Medicine patient population which exceeds the goals of the trial and even the Healthy People 2020 goal of 90%.

Adult Medicine Cervical Cancer Screening Trial Data:	Day				
	1	2	3	4	5
Female patients age 21-64 encounters	26	22	26	25	11
Female patients age 21-64 surveyed with no history hysterectomy	23	22	24	24	11
Surveyed patients who received pap smear within 3 years	18	17	18	21	9
Surveyed patients who received last pap smear more than 3 years ago	5	6	6	2	2
Surveyed patients who received pap smear >3yrs ago who received following adult medicine appointment	5	6	6	1	1



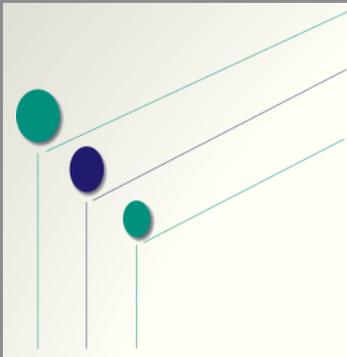
Discussion

- Reminder system results promising.
 - Now fully running, year end data will be more conclusive
- Adult Medicine female patients reachable and realistic target for increasing rate cervical cancer screening
 - AM and Ob/Gyn departments agree



Recommendations

- Integrate cervical cancer screening into Adult Medicine appointments
- Treatment options should be included and available for positive diagnoses
- Preventive medicine group appointments



Conclusion

*"In theory, there is no difference between theory and practice.
But in practice, there is."*

-Yogi Berra



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