

Assessment of Patient Care Coordination to Improve Breast Cancer Screening Rate

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BACKGROUND

- Breast cancer is the second most common cancer among women in the United States
- Early detection using mammography has been shown to be associated with reduced breast cancer morbidity and mortality
- Since the COVID pandemic began in 2020, there has been a decline in breast cancer screening rates. St. John's has since begun outreach efforts in order to increase mammogram compliance rates
- This study assesses the various outreach efforts currently being implemented by St. John's providers/staff

OBJECTIVES

- Raise breast cancer screening rates by 20% by the end of 2022 by increasing outreach efforts such as educating staff and providers, providing patient education, and collaborating with program partners
- Assist with patient breast cancer screening consults and tracking compliance rates

METHODOLOGY

- Work with providers in clinic to identify patients that are eligible and due for screening and consult with the patient to provide bilingual education and referral during visits
- Met with St. John's medical leadership team to discuss implementation of provider prompts and reminders in patient's electronic health records
- Met with St. John's partners to discuss the implementation of global standing orders that would eliminate the manual referral process and reduce the steps in patient workflow to getting eligible patients screened per the requirements
- Analyzed sample size of 5,107 eligible patients that were outreached through telephone reminders by St. John's command center and quality improvement team

RESULTS

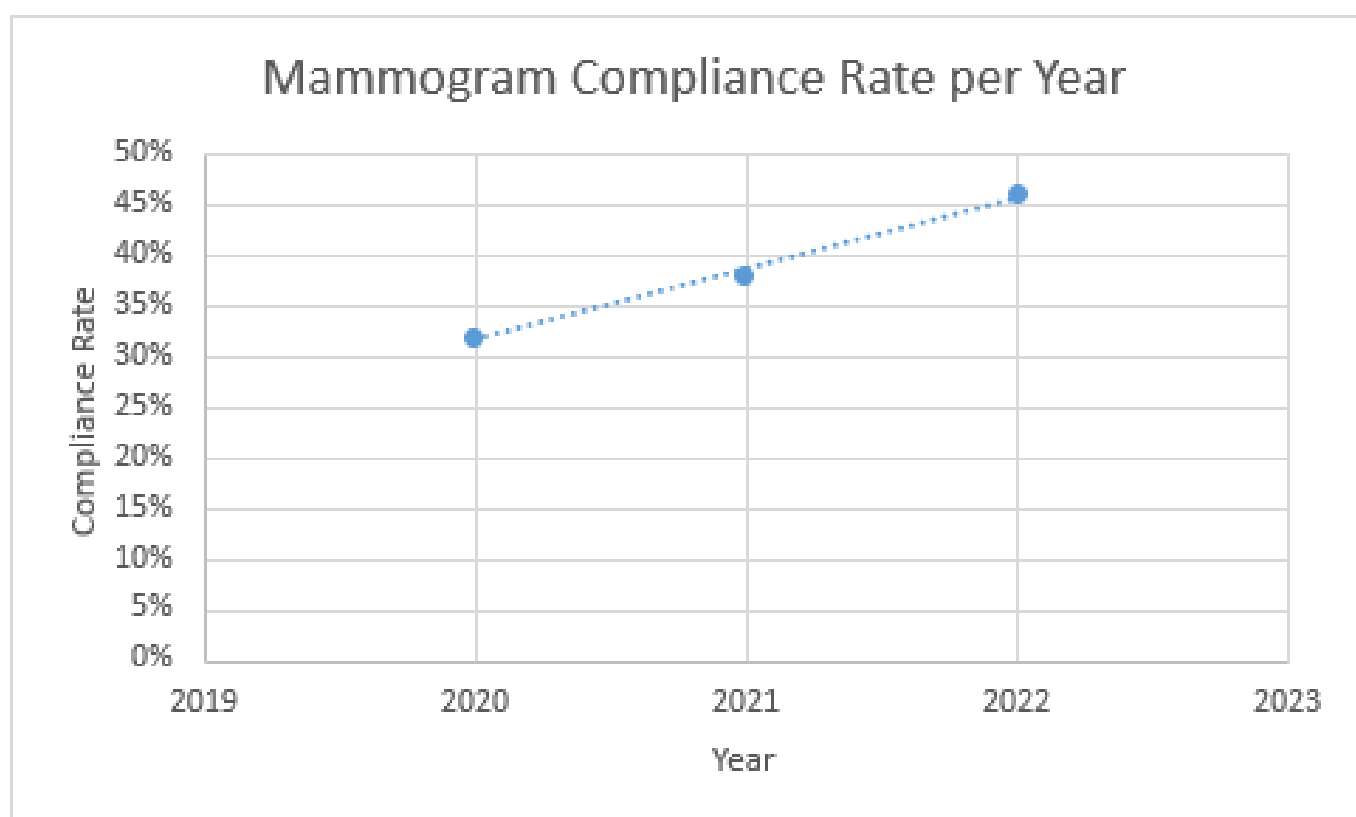


Figure 1.

St. John's breast cancer screening compliance rates decreased to 32% in 2020 and have since increased to 38% in 2021 and 46% in 2022.

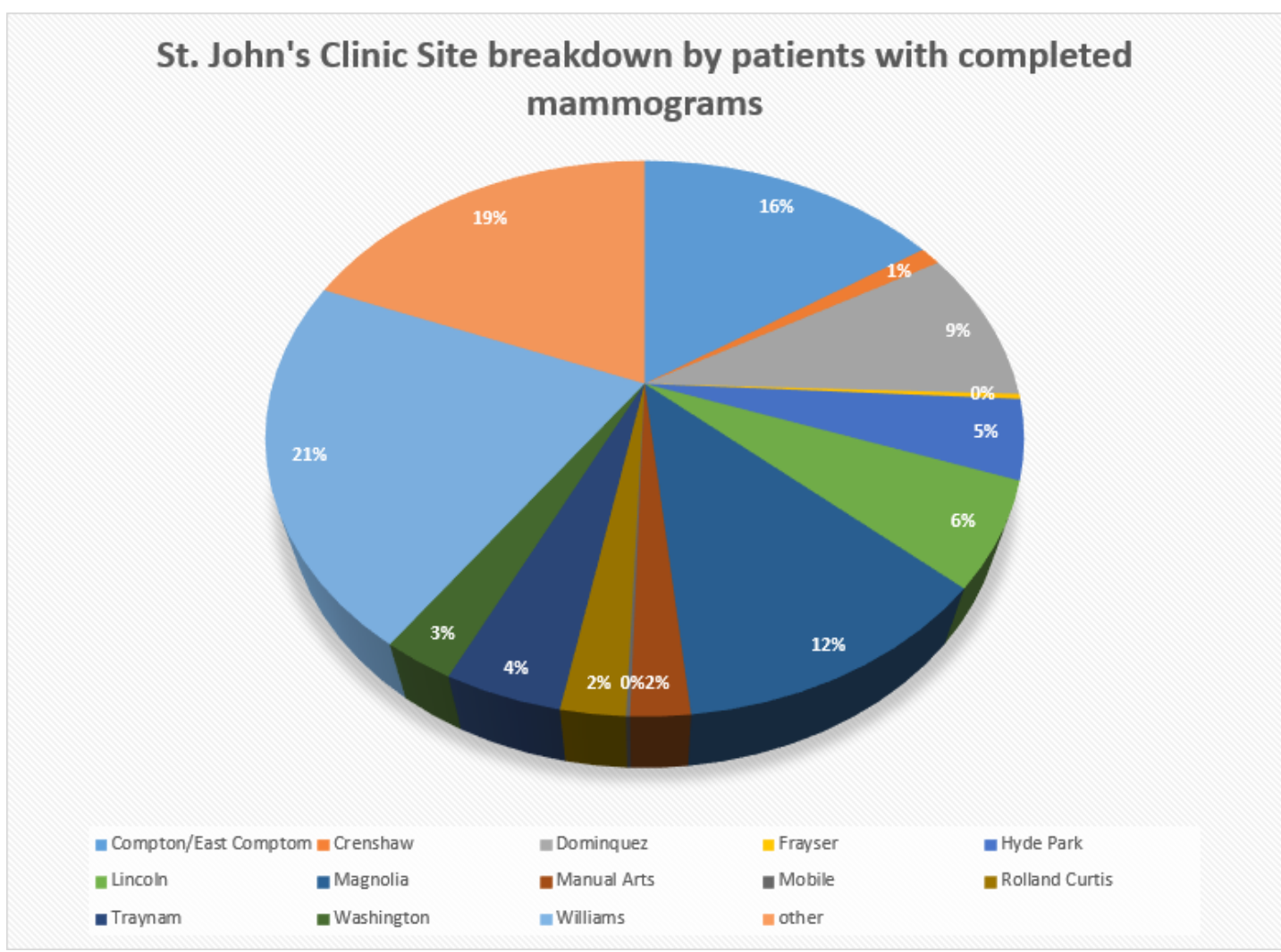


Figure 2

Of the 1,401 completed mammograms done between 10/2020-6/2022, Figure 2 shows the percentages of patients who were screened based on their St. John's default clinic site.

| Outreach type | Mammography incomplete | Mammography complete | Patient total | % Outreach success rate |
|---|------------------------|----------------------|---------------|-------------------------|
| Patient called and not reached, not able to leave message | 54 | 13 | 67 | 19.4 |
| Patient called and not reached, message was left | 230 | 69 | 299 | 23.1 |
| Patient called and reached, advised to schedule mammogram | 216 | 88 | 304 | 29.0 |
| Other (clinical/provider intervention) | 2108 | 904 | 3012 | 30.0 |
| Total | 2608 | 1074 | 3682 | 29.2 |

Table 1. Outreach success rates based on outreach effort type

CONCLUSION

- Eligible patients that were called and either reached or left a message had better compliance rate outcomes
- Clinical/provider intervention for breast cancer screening during a clinic visit also lead to better compliance rate outcomes
- Some of St. John's Clinic sites have more patient screening compliance than others. The top being Williams, Compton, and Magnolia sites.
- Mammogram screening rates are increasing since the decline in 2020 due to St. John's outreach efforts

RECOMMENDATIONS

- Continue on-site outreach efforts to educate patients regarding the importance of regular breast cancer screenings
- Provide transportation for patients that are not able to get to their scheduled appointments or who live far from imaging sites
- Conduct mammograms at St. John's clinic site so patients can have mammograms completed at same place as their clinic appointments
- Partner with imaging centers that can provide weekend appointment availability for patients not able to take a weekday off work to be screened because of economic barriers

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