

## Continuous Quality Improvement (CQI) Project Example – Identifying eligible female patients

## for Cervical Screening using CAT4 with BP Premier Clinical Software

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| **CQI steps** | | **Ask-Do-Describe** | |
| **Data report 1 - baseline** | **First CQI meeting** | **Why do we want to change?** | |
| * Gap | Low participation rates for cervical screening in eligible women. |
| * Benefits | Early detection and treatment of cervical abnormalities results in a reduction in the incidence of invasive cervical cancer and associated mortality. |
| * Evidence | Population-based cancer screening is an organised, systematic and integrated process of testing for signs of cancers or pre-cancerous conditions in populations without obvious symptoms. Programs target specific populations and/or age groups where evidence shows screening to be most effective [(AIHW, 2019)](https://www.aihw.gov.au/reports-data/health-welfare-services/cancer-screening/overview). Cancer screening is a cost-effective and valuable population health intervention.  Cervical cancer is one of the most preventable cancers. Routine cervical screening is the best protection against cervical cancer. The Cervical Screening Test (CST) which detects HPV infection is expected to protect up to 30% more women than the previous Pap test. CST is more effective than the Pap test at preventing cervical cancers because it detects the human papillomavirus (HPV) which may lead to cervical abnormalities, whereas the Pap test looked for cell changes in the cervix. HPV is a common infection that can cause cervical cell changes that may lead to cervical cancer [(National Cervical Screening Program, 2020)](http://www.cancerscreening.gov.au/internet/screening/publishing.nsf/Content/cervical-screening-1).  85% of women in Australia who develop cervical cancer have either not had a Pap test or been inadequately screened in the past 10 years. Women aged over 50 years are still under-screened [(RACGP Guidelines for preventive activities in general practice 9th edition).](https://www.racgp.org.au/FSDEDEV/media/documents/Clinical%20Resources/Guidelines/Red%20Book/Guidelines-for-preventive-activities-in-general-practice.pdf) |
| **What** do we want to change? | |
| * Topic | The proportion of eligible women offered cervical screening |
| * Scope | All women eligible for cervical screening |
| **How much** do we want to change? | |
| * Baseline | To be determined from report  [CAT4 Recipe Identify eligible female patients for cervical screening](https://help.pencs.com.au/display/CR/Identify+eligible+female+patients+for+cervical+screening) |
| * Sample | All eligible women for recommended cervical screening |
| * Target | Proportion of eligible women in practice population are offered appropriate cancer screening. Increased proportion of eligible women in practice population screened for cervical cancer |
| * Preparedness | All staff believe this is a priority activity for the practice and their patients |
| **Who** are involved in the change? | |
| * Leads   Contributors | Practice Manager/Lead GP  GPs/Practice Nurses/Receptionists |
| * External | PHN Practice Support |
| **When** are we making the change? | |
| * Deadlines | Baseline data report generated (date)  Implementation between (date range)  Review meeting (date) |
| **How** are we going to change? | |
| * Potential solutions | * Identify eligible patients through CAT4 * View/access your eligible patients screening history through either of the following: * The National Cancer Screening Register (NCSR) through the Healthcare Provider Portal in PRODA – [Healthcare Provider Portal User Guide](https://www.ncsr.gov.au/content/ncsr/en/healthcare-providers/RegisterAccess/hcp-portal-user-guide.html#patient-results) * NCSR Hub through BP Premier – [Using the NCSR Hub in Bp Premier](https://kb.bpsoftware.net/bppremier/saffron/ThirdPartyInterfaces/NCSR/UsingNCSR.htm) * Contacting the NCSR via phone – [NCSR Contact Us](https://www.ncsr.gov.au/content/ncsr/en/contact-us.html#:~:text=Any%20information%20relating%20to%20future,centre%20on%201800%20627%20701.) * Promote cervical screening test via SMS alerts, posters and pamphlets * Flag eligible patients and book with GP and RN * Opportunistic cancer screening with patients current booked appointments |
| * Select | Combination of all five options was selected |
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| * **Implementation** | | * Implement | 1. *Identify eligible patients using CAT4 –* [*CAT4 Recipe Identify eligible female patients for cervical screening*](https://help.pencs.com.au/display/CR/Identify+eligible+female+patients+for+cervical+screening) 2. *View/access your eligible patients screening history through either of the following:*  * *The NCSR through the Healthcare Provider Portal in PRODA –* [*Healthcare Provider Portal User Guide*](https://www.ncsr.gov.au/content/ncsr/en/healthcare-providers/RegisterAccess/hcp-portal-user-guide.html#patient-results) * *NCSR Hub through Bp Premier –* [*Using the NCSR Hub in Bp Premier*](https://kb.bpsoftware.net/bppremier/saffron/ThirdPartyInterfaces/NCSR/UsingNCSR.htm) * *Contacting the NCSR via phone –* [*NCSR Contact Us*](https://www.ncsr.gov.au/content/ncsr/en/contact-us.html#:~:text=Any%20information%20relating%20to%20future,centre%20on%201800%20627%20701.)  1. *List provided to receptionist to add a recall for patients and/or flag eligible patients to maximise opportunistic cervical screen tests* 2. *Enter patients Cervical Screening Test Result in clinical software (*[*Best Practice*](https://trainitmedical.com.au/wp-content/uploads/2017/10/Bp-Summary-Sheet-Enter-Cervical-Screening-Test-CST-Result-Train-IT-Medical-V03-2017.pdf)*)* 3. *Monitor participation using excel spreadsheet and/or CAT4* |
| * Record, share | [*CQI Practice initial and final meeting minutes*](https://gcphn.org.au/wp-content/uploads/2020/02/CQI-Practice-Meeting-Template.docx) |
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| **Data Report 2**  **Comparison** | **Final CQI meeting** | **How much** did we change? | |
| * Performance | *Did you achieve your target? If not, identify why not.* |
| * Worthwhile | *Was the effort to complete the improvement activity worth the outcome?*  *Did the team value the improvement activity?* |
| * Learn | *What lessons learnt could you use for other improvement activities?*  *What worked well, what could have been changed or improved?* |
|  | **What next?** | |
| * Sustain | *Implement new processes and systems into business as usual* |
| * Monitor | *Review CAT4 data report monthly/quarterly and initiate corrective measures as required* |