

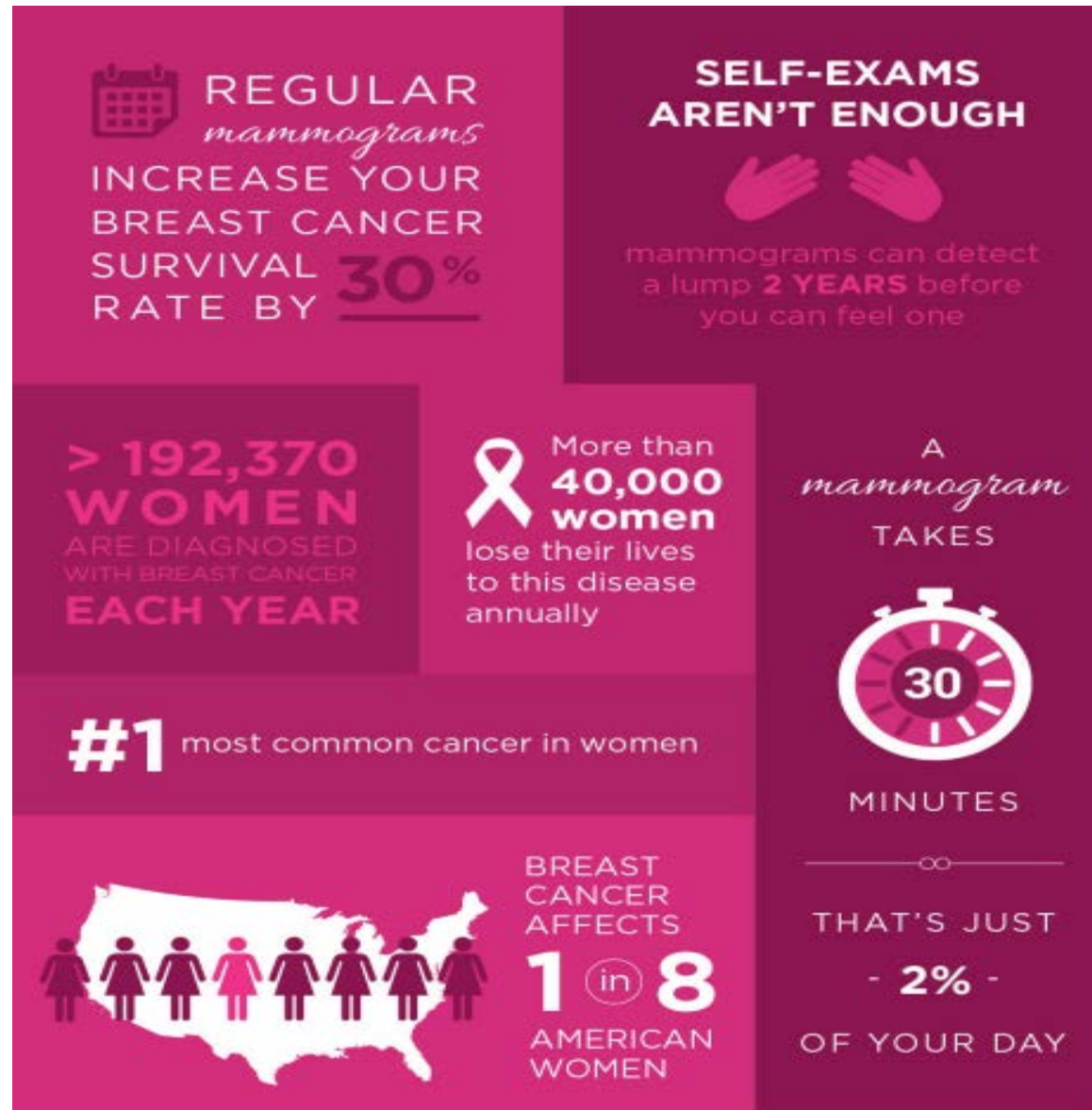
Increasing Breast Cancer Screening in the Primary Care Setting Utilizing a Team Approach

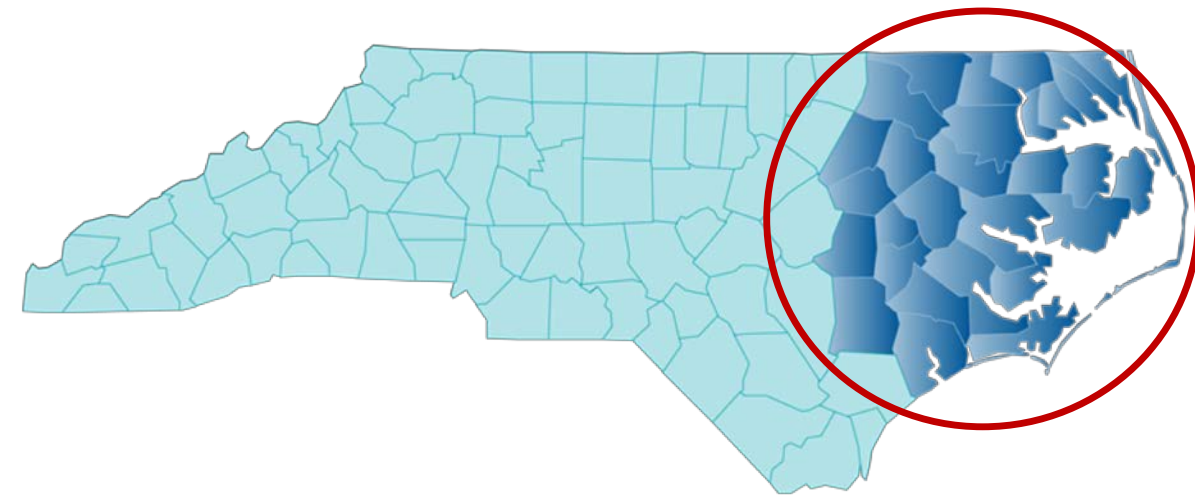
Drillious Gay RN, MSN

J. Todd Jackson, PharmD, MHA

Unified Quality Improvement Symposium February 6, 2019

Breast Cancer By The Numbers In The United States





Projected new cases in 2019

- North Carolina 10,946
- Eastern N.C. 1,474

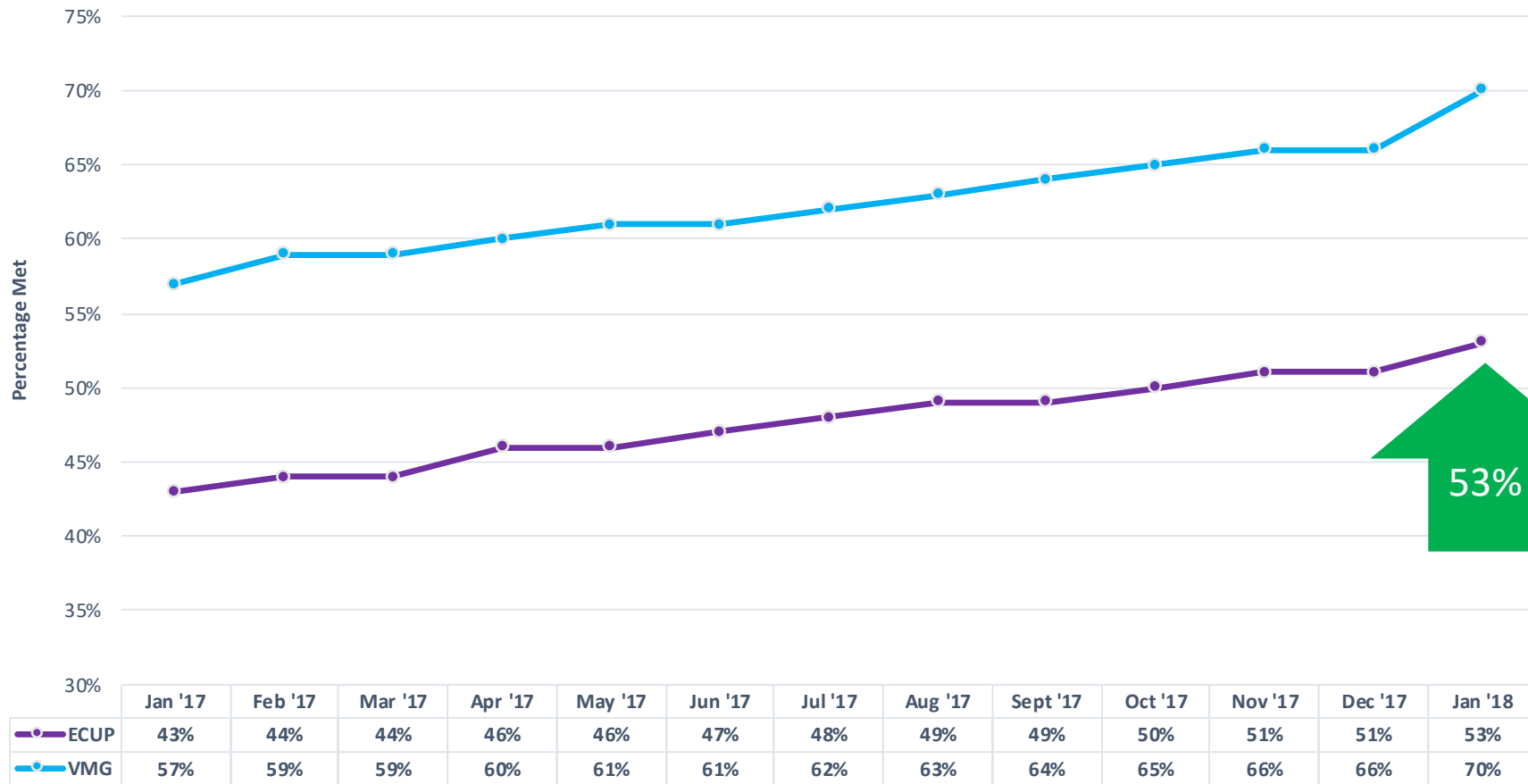
Projected Deaths in 2019

- North Carolina 1,467
- Eastern N.C. 203

*Data Source: N.C. State Center for Health Statistics
Updated 12/2018*

Moving Towards the Goal

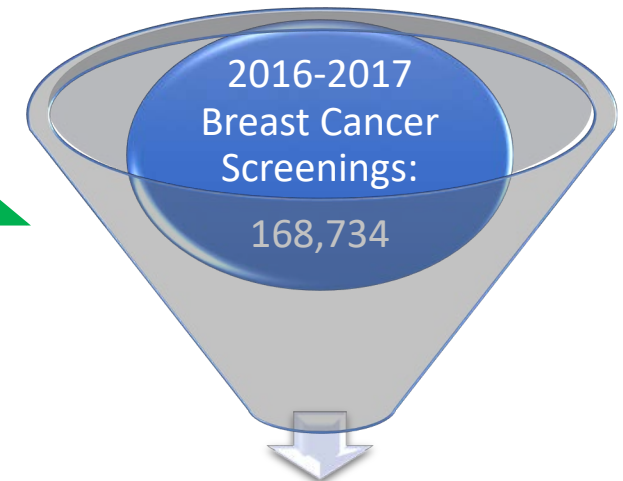
Breast Cancer Screening



Goal > 80%

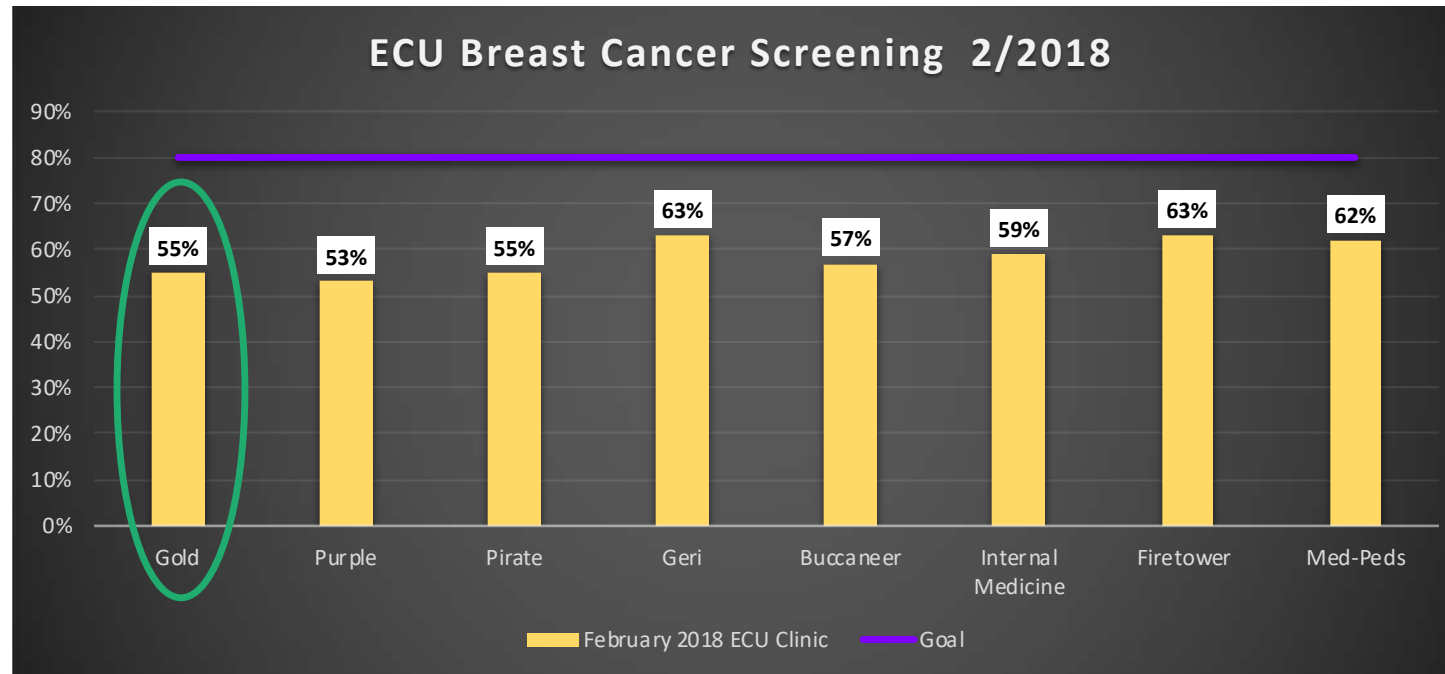
Enterprise Peer Comparison

61% Compliance



9% Enterprise Improvement in the last year

ECUP Primary Care Clinics Breast Cancer Screening Rates



Percentage of women aged 50 through 74 years who had a mammogram to screen for breast cancer within 27 months.

What do we want to accomplish?



Improve early detection of breast cancer for women in eastern North Carolina



Develop a sustainable model in the Family Medicine Gold Module that utilizes a team approach to achieve a 10% increase in documentation of completed breast cancer screening mammograms for women ages 50 to 74 years old over a five month period of time.

Collaborative Team Members

Judith Wade, RN, BSN

Nurse Manager, Gold Module

Renada Wooten

Medical Office Assistant, Gold Module

Jennifer Blizzard, RN, BSN

Nurse Administrator, Family Medicine

Lane Wilson, MD

Director of Clinical Services, Family Medicine

Lisa Rodebaugh, RN, BSN

Nurse Specialist, Office of Quality and Analytics

Marie Lewis

Patient Services Access Manager, Family Medicine

Artamisha Marshall

Administrative Support, Family Medicine



How will we know if we have made an improvement?

Short term improvement/goal

Breast cancer screening rates will increase on the Family Medicine gold module positively impacting the over all ECUP breast cancer screening rate



Long term improvement/goal

ECUP breast cancer screening rates will align with national screening rates to support evidenced based quality care and improve early detection of breast cancer in eastern NC resulting in improved quality of life for women impacted

3 PDSA Cycles to Achieve the AIM

Improve Breast Cancer Screening Rates

Cycle 1: Data Management

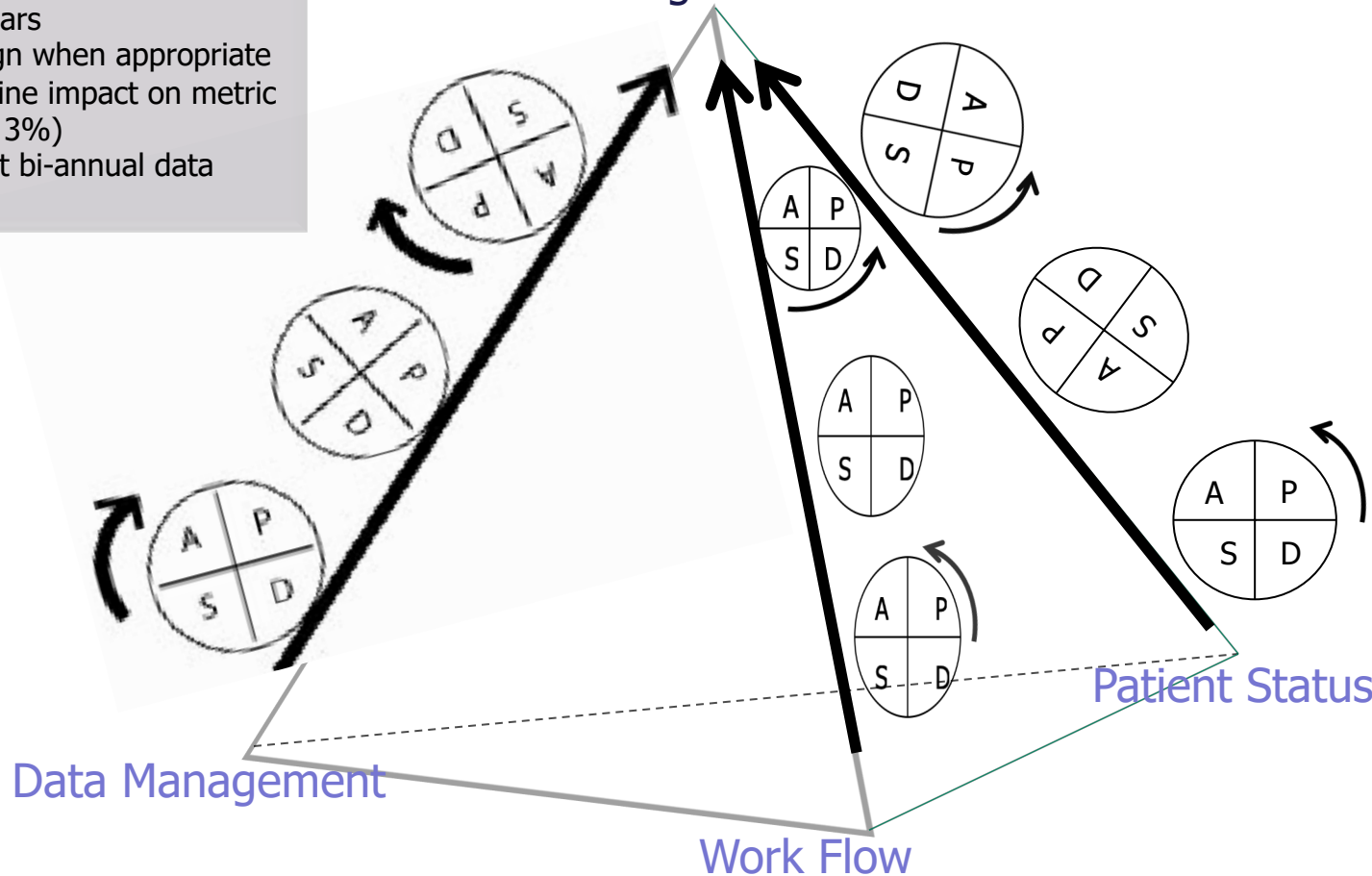
- P:** Identify patients with last visit ≥ 3 years
- D:** Unassign when appropriate
- S:** Determine impact on metric (improved 3%)
- A:** Conduct bi-annual data cleanse

Cycle 3: Patient Status

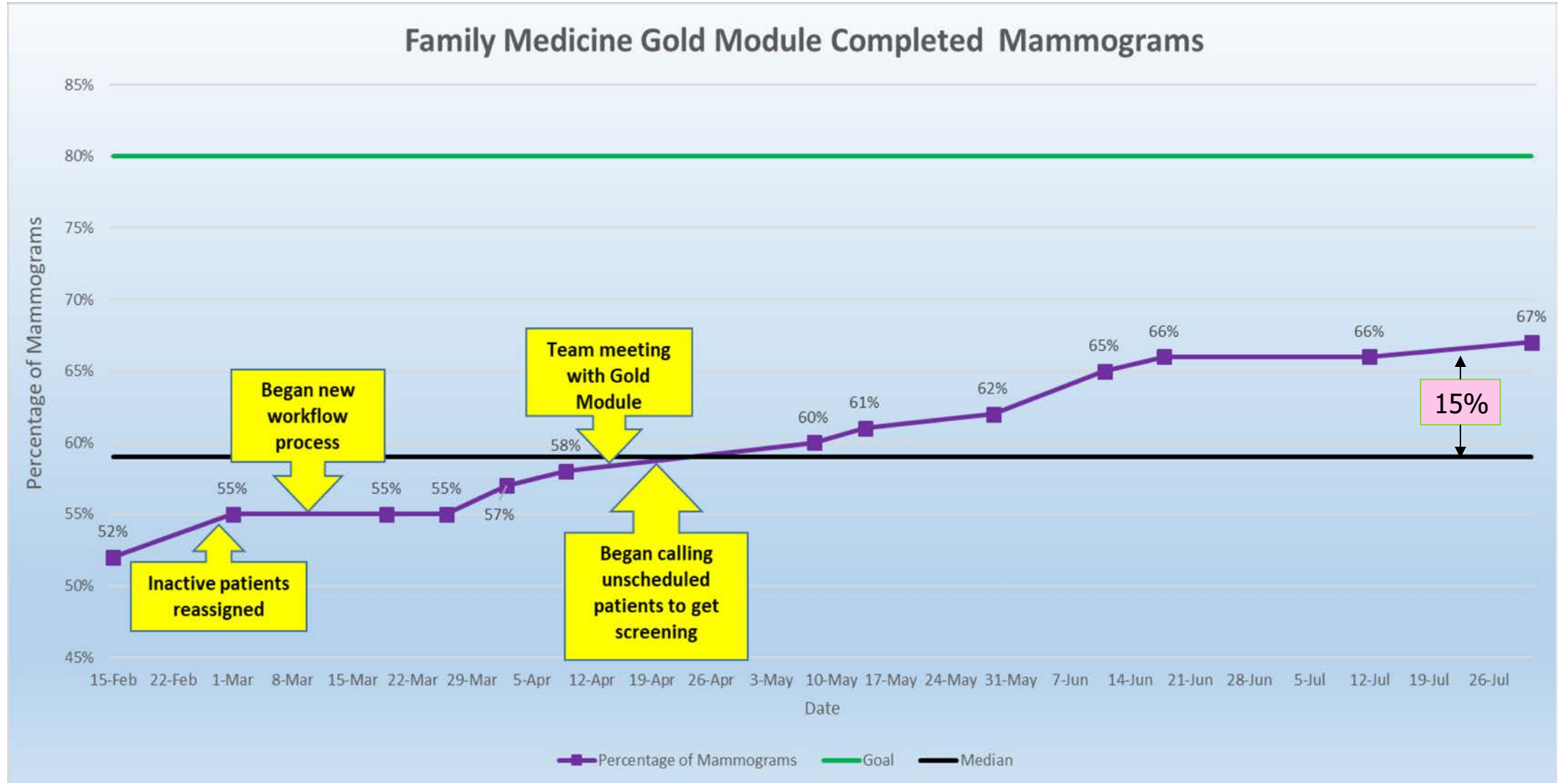
- P:** Patients categorized by appointment status and need for mammogram
- D:** 1. Pending clinic appointment- prompt patient at visit
2. No appointment due-contact patient via phone/letter and prompt
- S:** Determine impact on metric for both methods of contact
- A:** Continue outreach via both methods of contact

Cycle 2: Work Flow

- P:** Create a list of patients agreeable to receive a mammogram
- D:** Submit the list to each imaging center weekly so the center can follow-up with scheduling appointment
- S:** Determine impact on metric (improved 15%)
- A:** Continue workflow and roll-out to other primary care clinics



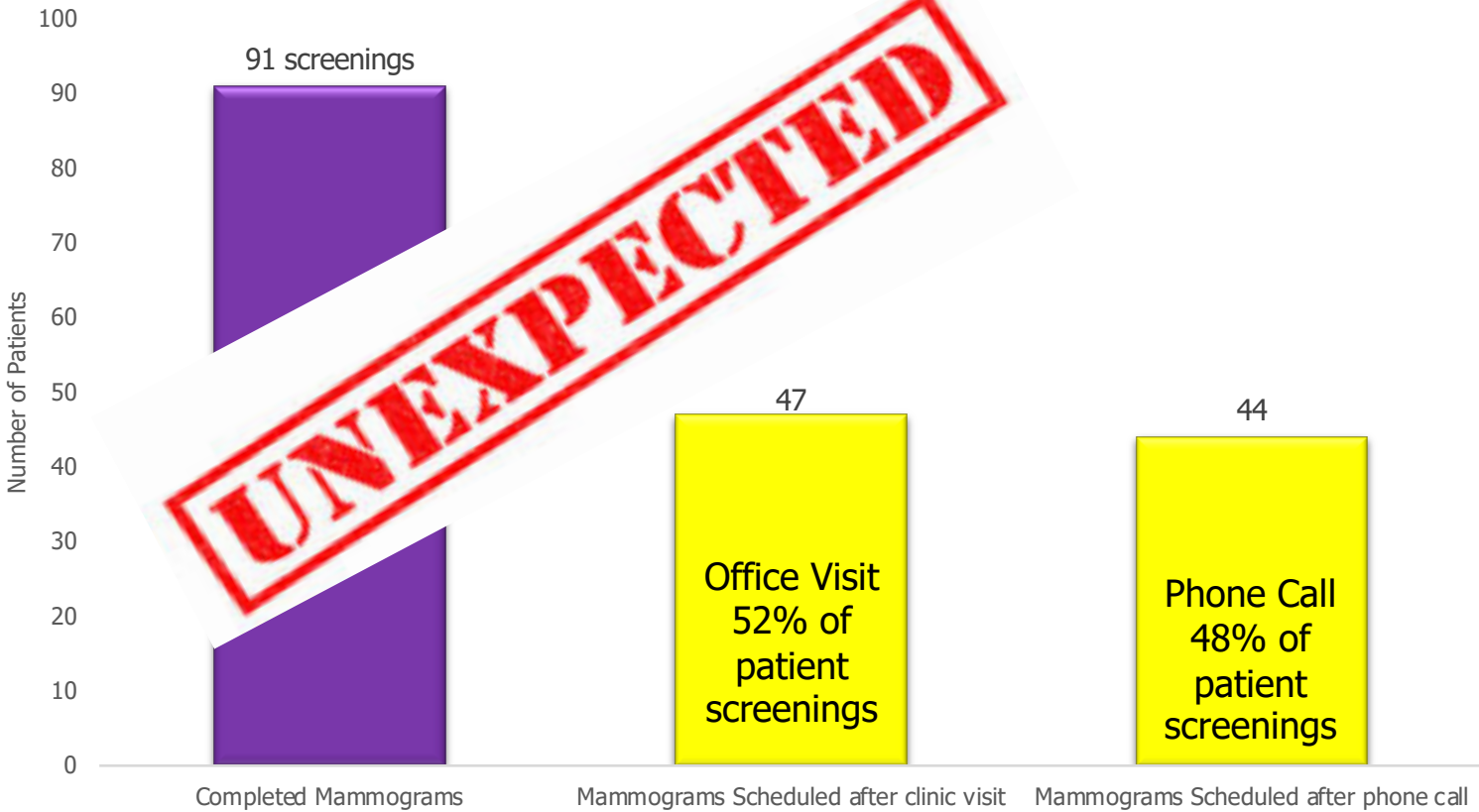
Outcomes



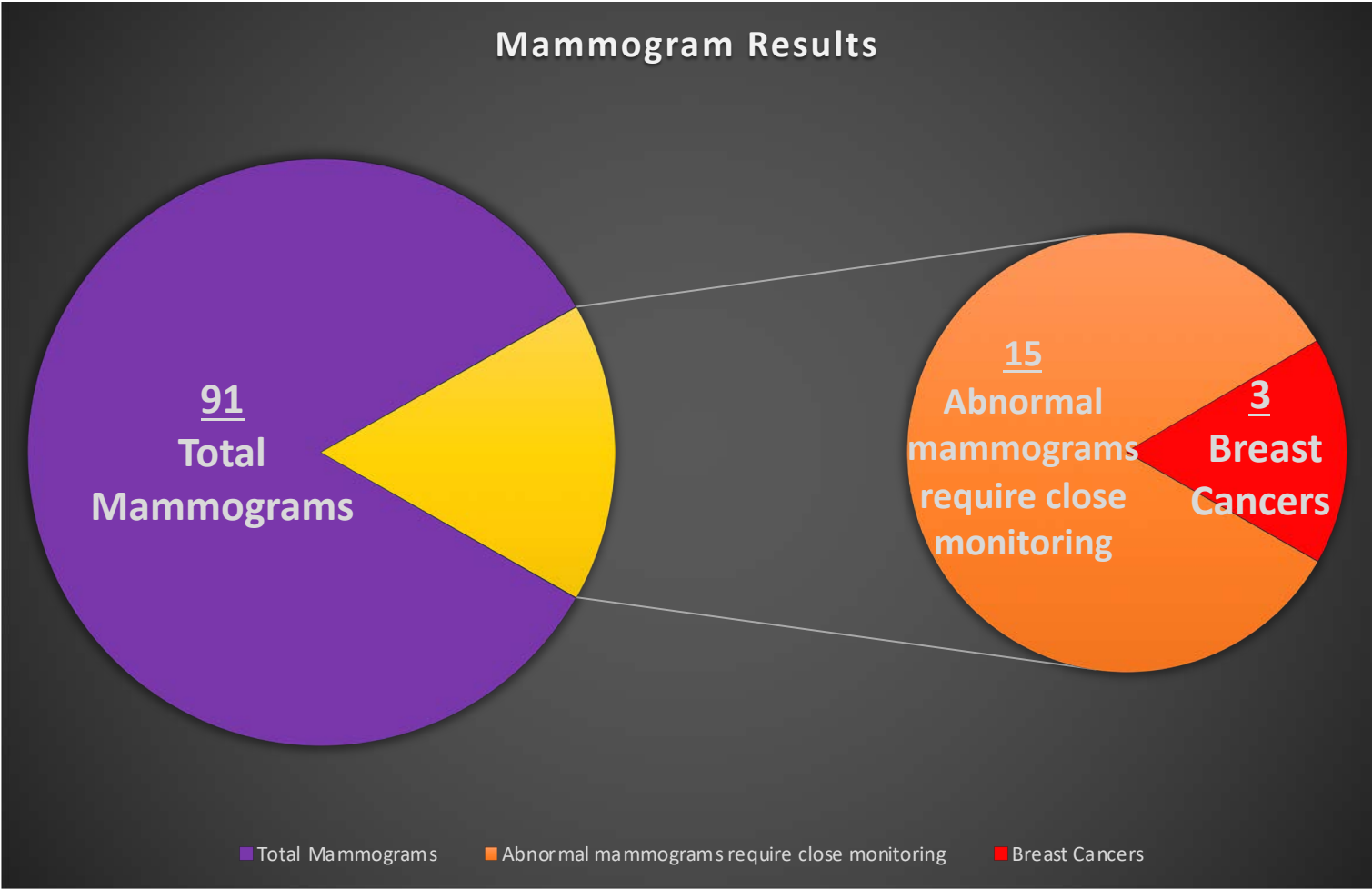


- Patients did not keep their scheduled appointments for their screening mammograms or follow up testing when mammograms were abnormal
- Patients had outdated contact information in EHR making it difficult to contact them
- Determining who is responsible for ensuring patients get screened and additional follow up when screenings are abnormal

MAMMOGRAMS COMPLETED DURING PROJECT



Greatest Success!



Mammogram Workflow Process Rollout



- Family Medicine
- Firetower Medical Office
- General Internal Medicine
- Adult and Pediatric Medicine



Medicare Wellness Team

Primary Care Health Coaches



**Flu Season – make sure to
vaccinate patients**

February 2019

Sunday

Monday

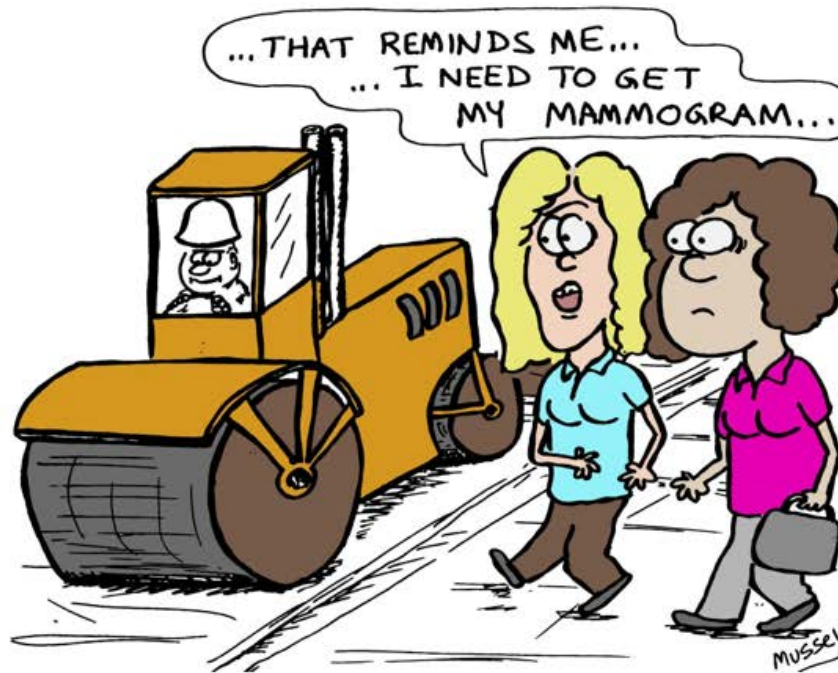
Tuesday

Wednesday

Thursday

Friday

Saturday



1 in 8 women will develop breast cancer in their lifetime

Carolina Breast Imaging Specialists: 252-565-8951
Eastern Radiologists: 252-752-5000
Walk-in Mammograms Offered

MYCHART

- Don't forget to offer MyChart to ALL patients including previously declined
- Educate patient on MyChart features

Monthly clinic level CAHPS reports available February 1

Quarterly provider level CAHPS reports available February 15

Feb 1 – 14: Perform PCP attribution cleanup– use HM Depression measure drilldown (Nursing/PAS)

1. Sort/identify patients that have not been seen in > 3 yrs
2. Change PCP to “Doctor Unassign”

Feb 15 – 28: Run HM Drilldown - Breast Cancer Screening (Nursing/PAS)

1. Sort report by ACO status and work ACO patients first
2. Identify patients with overdue breast cancer screening
3. Schedule patient for mammogram or office visit for discussion
4. Track mammogram completion/ensure report in chart

Next Steps (cont.): Data Analytics Support

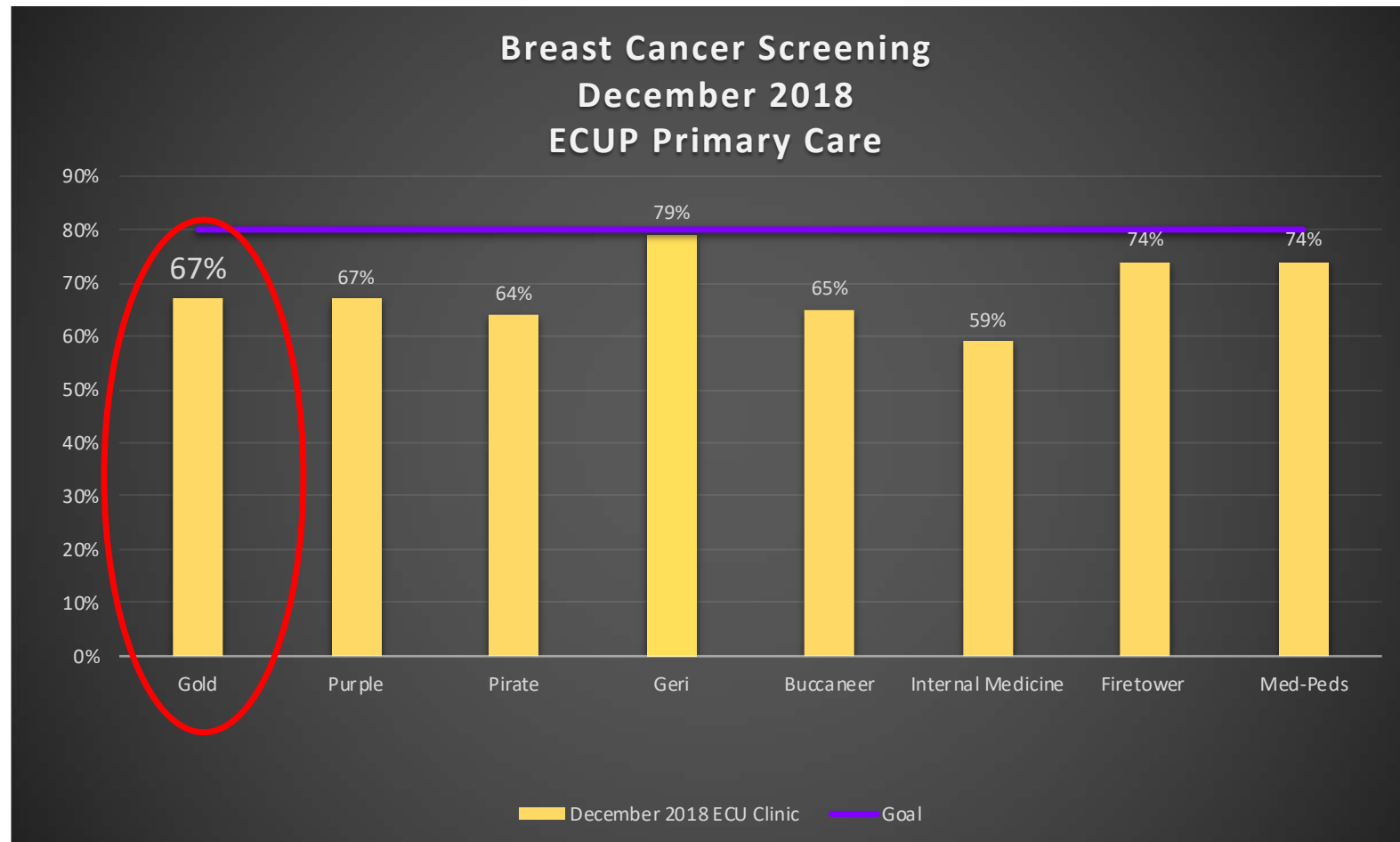
Provide Data on Breast Cancer Screening to Primary Care Clinics

Panel Metrics ECU Family Medicine Center

	Oct 18	Nov 18	Dec 18	MTD
Diabetes: A1c in One Year	84 %	87 %	87 %	86 %
Diabetes: Poor Control A1c > 9%	23 %	22 %	23 %	23 %
Diabetes: Nephropathy Screening in One Year	85 %	85 %	85 %	84 %
Diabetes: Foot Exam	53 %	55 %	56 %	57 %
Diabetes: Eye Exam	24 %	28 %	31 %	18 %
Hypertension: BP < 140/90	57 %	60 %	59 %	58 %
Cervical Cancer Screening	55 %	59 %	60 %	60 %
Breast Cancer Screening	65 %	66 %	67 %	67 %
Colorectal Cancer Screening	71 %	71 %	71 %	71 %
Smoking Tobacco Screening/Counseling in Two Years	82 %	86 %	86 %	85 %
Screening for Future Fall Risk	69 %	70 %	71 %	72 %
Medication Reconciliation Post-Discharge	86 %	89 %	89 %	89 %
Screening for Clinical Depression and Follow-Up Plan	54 %	61 %	61 %	59 %
Influenza Immunization	64 %	66 %	75 %	70 %
Pneumonia Vaccination Status for Older Adults	82 %	83 %	85 %	85 %

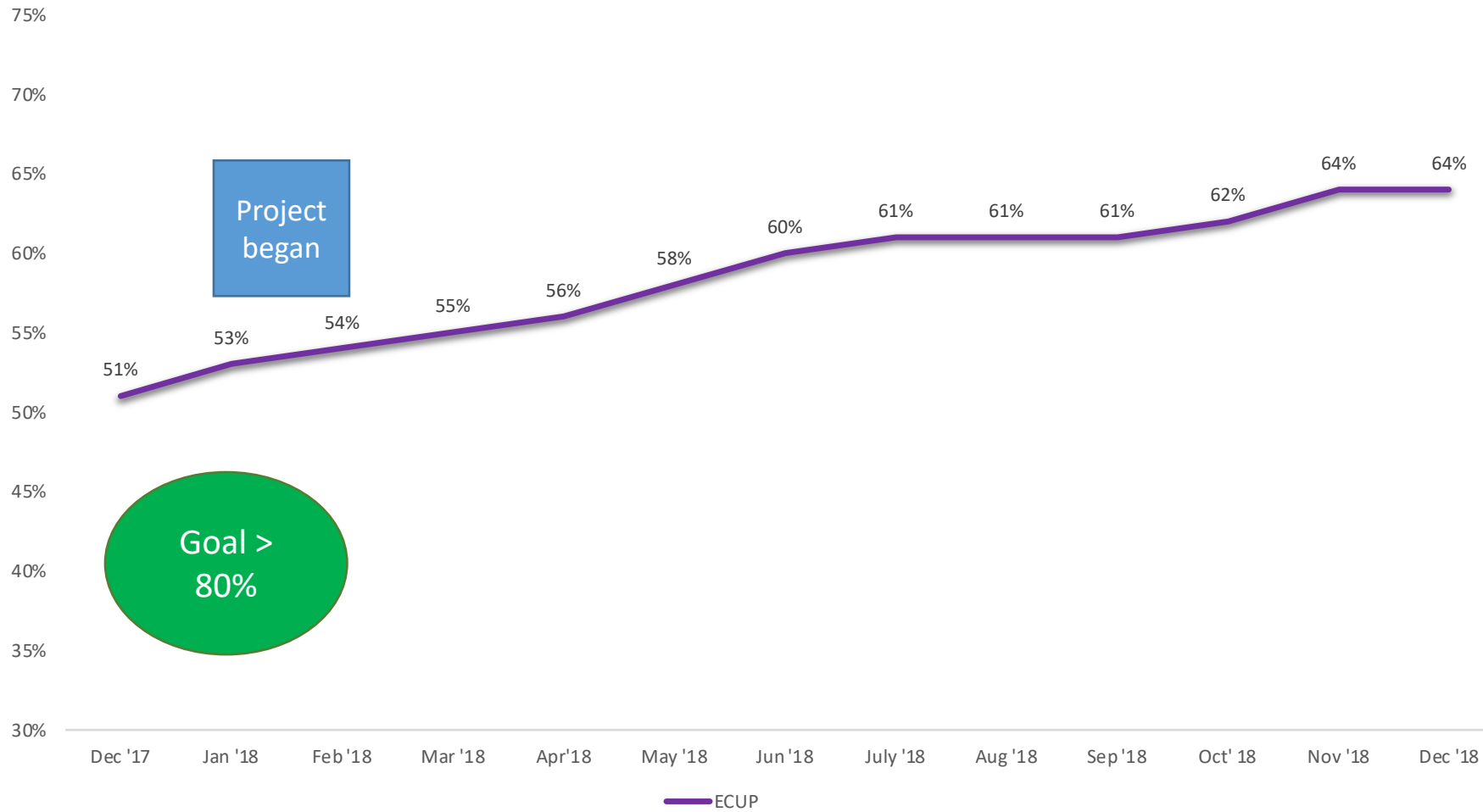
Breast Cancer Screening Goal >80%	Patients Needed to Reach Goal
Gold	122
Purple	116
Pirate	143
Geriatric	-
Buccaneer	123
Internal Medicine	70
Internal Medicine Residents	213
Firetower	114
Med-Peds	36

Continued Monitoring and Feedback

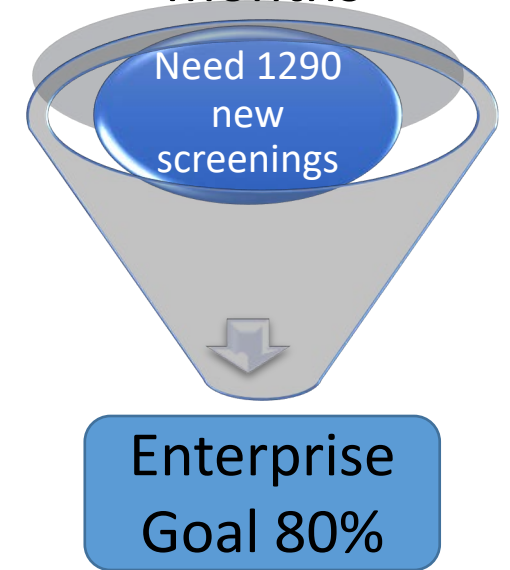


We Keep Improving

ECUP Breast Cancer Screening



ECUP Overall
Improvement of 13%
in last twelve
months



Questions?

Get those puppies checked!



LONG bois & the House Hippos

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