

Engaging Primary Health Care Providers to improve breast, cervical and bowel cancer screening participation at the General Practice-level

A PHN-led intervention

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Participation in cancer screening is currently sub-optimal in the Nepean Blue Mountains (NBM) region.

In 2014-15, breast, cervical and bowel cancer screening participation was lower in NBM compared to NSW. The NSW Primary Care Strategy for the bowel, breast and cervical screening programs recognises the influential role General Practitioners (GPs) have with their patients. In addition, a variety of factors are known

to influence a primary care provider's (PCPs) decision to recommend, or not recommend screening to eligible patients.

In February 2017, NBMPHN invited 18 General Practices from targeted locations in NBM to participate in, and commence implementation of a clinical audit and quality improvement in General Practice initiative. The program was designed to engage PCPs to improve cancer screening participation among their age-eligible patients.

IDENTIFYING
QI STRATEGIES



IMPROVING
DATA QUALITY



PRACTICE
QUALITY
IMPROVEMENTS

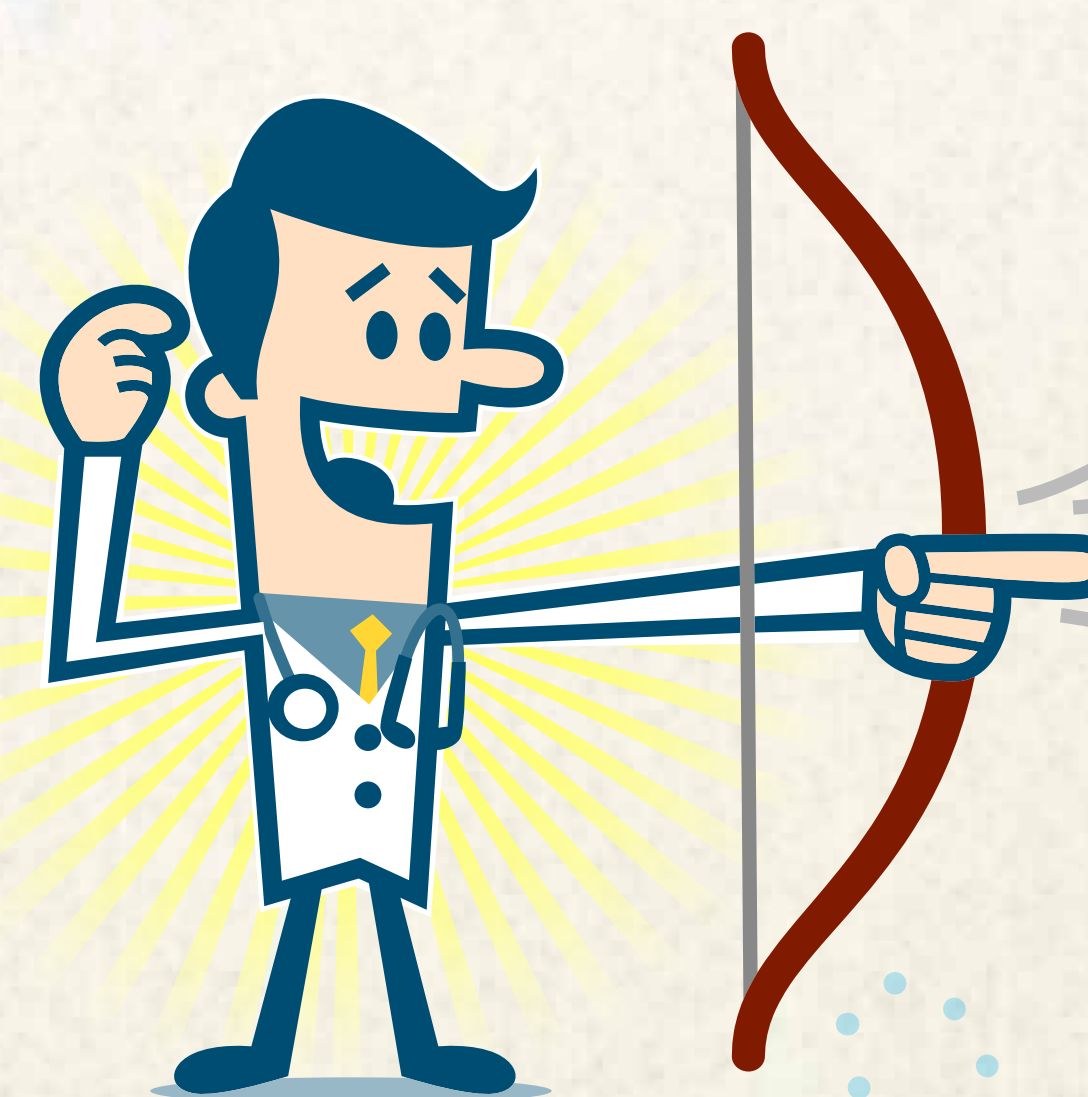


IDENTIFYING
OVERDUE
PATIENTS

PRACTICE
INCENTIVE PAYMENTS



EFFECTIVE
REMINDER SYSTEM



ACCURATE
RECORDING RESULTS INTO
CLINICAL
DATABASE!



A significant mis-match exists between cancer screening results data available within General Practice clinical software and publicly-reported cancer screening register participation data. Advancing current systems for notifying and recording cancer screening results within

Practice clinical software, and seamless identification of patients overdue for screening at the Practice-level warrants consideration by organisations seeking to strengthen the capacity of PCPs to further improve cancer screening.

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