

Implementing Quality Improvement Bullinah Aboriginal Health Service May 2019



Goal for Improvement <i>What are we trying to accomplish?</i>	Improve bowel cancer screening participation in the local Aboriginal community through health promotional activities			
Measures <i>How will we track achievement of our goal?</i>	Increased number of Faecal Occult Blood Test (FOBT) recorded from 1st January 2019 by 2%			
Ideas <i>What can we test to achieve this goal?</i>	Plan <i>How will we do it & who?</i>	Do <i>Did we do it?</i>	Study <i>What happened?</i>	Act <i>What is our next step?</i>
1. Promote the need for screening to the community	<ul style="list-style-type: none"> • During the New Year planning meeting the CSM scheduled February as the Bowel Cancer awareness month • RN and AHW will order promotional posters and flyers to decorate waiting area and consult rooms. • Admin and RN to review bowel cancer screening recall and reminder letters from a Health Literacy perspective • RN and AHW will promote on clinic's Facebook page and in the clinic's newsletter • Clinicians will initiate conversation during each consult • RN and CSM to run a PENCAT baseline search (Jan) to identify eligible patients for a targeted approach in addition to opportunistic engagement 	Yes, all plans were implemented accordingly	<ul style="list-style-type: none"> • The plan was implemented. • Flyers and posters encouraged and prompted conversation between clinician and patient • Some patients made appointments for the FOBT after receiving TXT messages and after speaking with their GPs (who gave out opportunistic FOBTs) • Admin and RN reviewed recall and reminder letters to ensure an appropriate level of Health Literacy • Social media engagement reviewed resulting in: 8 posts with a total of 1209 engagements (average of 152 engagements per post). 	Admin team to continue to contact eligible patients (as identified by previous PENCAT search) who have not responded to/not aware of health promotion activity and make an appointment

<p>2. Evaluate effectiveness of promotion</p>	<ul style="list-style-type: none"> RN to run a PENCAT search to compare January's baseline data to May's data to determine % of patients who participated in screening during promotional period 	<p>Yes, data was extracted</p>	<ul style="list-style-type: none"> Data extraction results: Baseline (Jan)- 12.8% recorded Post Prom (May)- 17.8% recorded 	<ul style="list-style-type: none"> Team met and reviewed approaches implemented. Team determined the approaches implemented were successful yielding a 5% increase in screening. Having a clear targeted single-message structured approach worked best for patient engagement Team will run a dedicated bowel cancer screening awareness month each February using above approaches
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CSM- Clinical Services Manager

RN- Registered Nurse

AHW- Aboriginal Health Worker

Implementing Quality Improvement Bullinah Aboriginal Health Service May 2019

<p>Goal for Improvement <i>What are we trying to accomplish?</i></p>	<p>Improve bowel cancer screening participation in the local Aboriginal community through increased clinical education and advocacy</p>			
<p>Measures <i>How will we track achievement of our goal?</i></p>	<p>Increased number of Faecal Occult Blood Test (FOBT) recorded from 1st January 2019 by 2%</p>			
<p>Ideas <i>What can we test to achieve this goal?</i></p>	<p>Plan <i>How will we do it & who?</i></p>	<p>Do <i>Did we do it?</i></p>	<p>Study <i>What happened?</i></p>	<p>Act <i>What is our next step?</i></p>
<p>1. Identify 'not recorded' target cohort through data extraction</p>	<ul style="list-style-type: none"> • RN and CSM to run a <i>baseline</i> PENCAT search (Jan) to identify eligible patients and determine % of recordedness • RN and CSM to run <i>May</i> PENCAT search to identify eligible patients and determine % of recordedness as comparison 	<p>Yes, all data was extracted accordingly</p>	<ul style="list-style-type: none"> • From the data search it was identified that >85% of eligible patients did not have FOBT recorded • Admin team, AHW and RN reviewed list of identified patients, recall added into system, patient was contacted offering apt. 	<ul style="list-style-type: none"> • Ongoing contact attempts and bookings offered to patients
<p>2. Provide professional development for clinicians on bowel cancer screening process and pathology</p>	<ul style="list-style-type: none"> • Clinical meeting was held to identify the in-house expert to support sustained implementation • External experts from Sullivan Nicholaides Pathology were engaged to provide education to clinicians and all staff • opportunistic screening 	<p>Yes</p>	<ul style="list-style-type: none"> • The emergence of an in-house bowel screen champion • Admin ordered additional FOBT kits • GPs encouraged and supported to actively provide opportunistic and targeted bowel screening education and FOBT 	<ul style="list-style-type: none"> • GPs actively providing opportunistic and targeted bowel screening education and FOBT

<p>3. Evaluate effectiveness of promotion</p>	<ul style="list-style-type: none"> RN to run a PENCAT search to compare January's baseline data to May's data to determine % of patients who participated in screening during promotional period 	<p>Yes, data was extracted</p>	<ul style="list-style-type: none"> Data extraction results: Baseline (Jan)- 12.8% recorded Post Prom (May)- 17.8% recorded 	<ul style="list-style-type: none"> Team met and reviewed approaches implemented. Team determined the approaches implemented were successful yielding a 5% increase in screening. Having a clear targeted single-message structured approach worked best for patient engagement Team will run a dedicated bowel cancer screening awareness month each February using above approaches
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