

AUT Health, Counselling and Wellbeing

Cervical Smears

PHO and Facilitator: Jean Lyle, Auckland PHO

Team members: Alison Brown, Shona McLeod, Susie Poon,
Stella McFarlane

Organisational “Buy - In”

Aim: to improve cervical smear screening rates and recording of same

Buy-in

- Involving the team in discussions about hard-to-reach patients – in particular –
 - no longer students
 - 20 – 25 years olds
- Best contact methods for students
- Use of Mohio and opportunistic screening

Change Ideas

Driver Diagram

Change Concept 29: ensuring demographic information is correct – email and postal address

Change concept 40 – use of email and text for patient communication



Change concept 51 – consider an advanced form
- review current recall and results procedure

What Changes have you tested?

	Change Tested	Outcome
1	Created text templates for informing patients about cervical results. One txt for normal results and one for abnormal results	Predict less returned mail and improved contact to patients
2	Mapping screening and outcome codes to better reflect clinical findings	Predict improve screening rates as reporting will reflect more accurate data e.g outcome being done elsewhere – outcome normal with note being done elsewhere

Most Successful PDSA Cycles?

Completed PDSA from Trigger tool:

Cohort: Patients females 55 and over, males 45 and over, seen in last three months

Results

- No real harm occurred to these patients
- Issue of non-response from patients who had attended after hours or hospital and needed follow up
- Difficult if no longer students

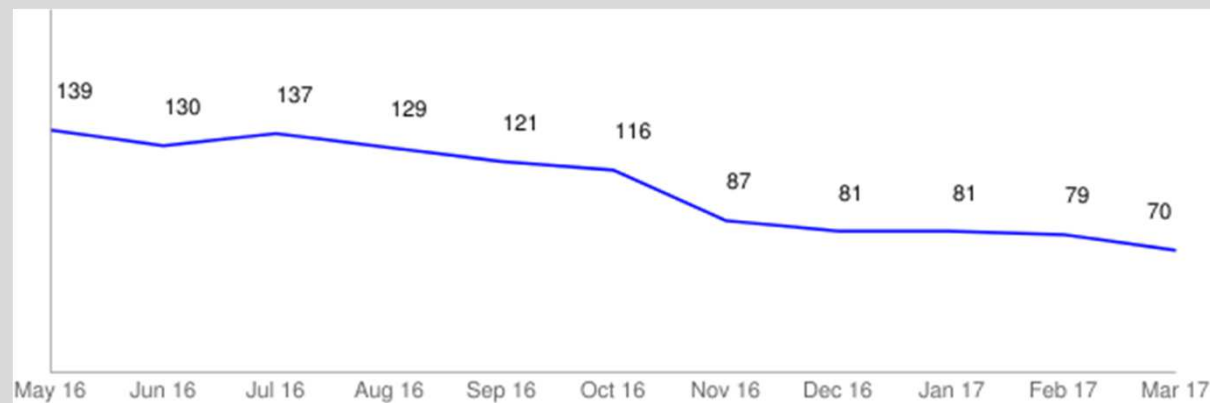
Change

- Already use variety of methods to contact
- Recheck details when being seen

Measures Summary

Women eligible for CX screening and not screened as of March 2017 (Dr Info):

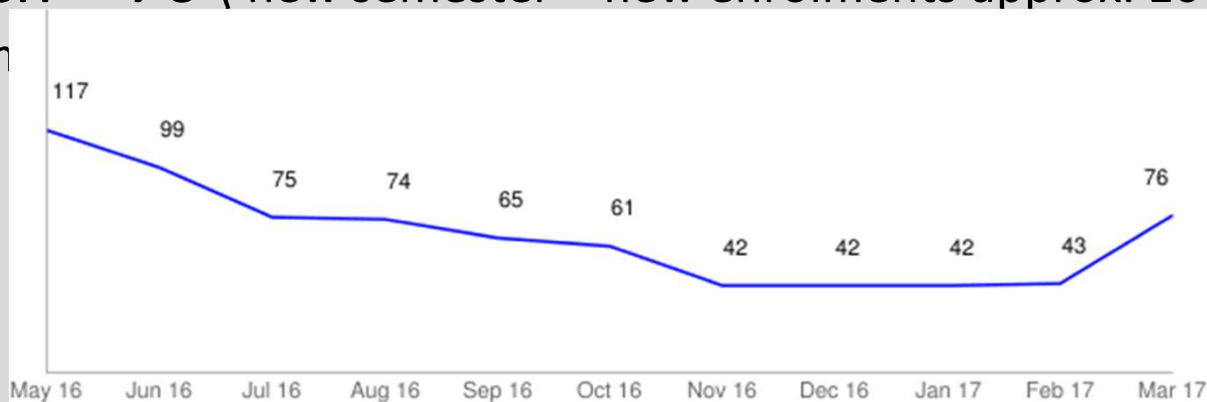
- 1 year ago – 139
- 6 months ago – 87
- Current - 70



Measures Summary

Women eligible for CX screening and not on a recall (Dr Info)

- 10 months ago – 117
- 3 months ago – 42 (PHO support and improved coding)
- March – 76 (new semester – new enrolments approx. 10 per day – awaiting



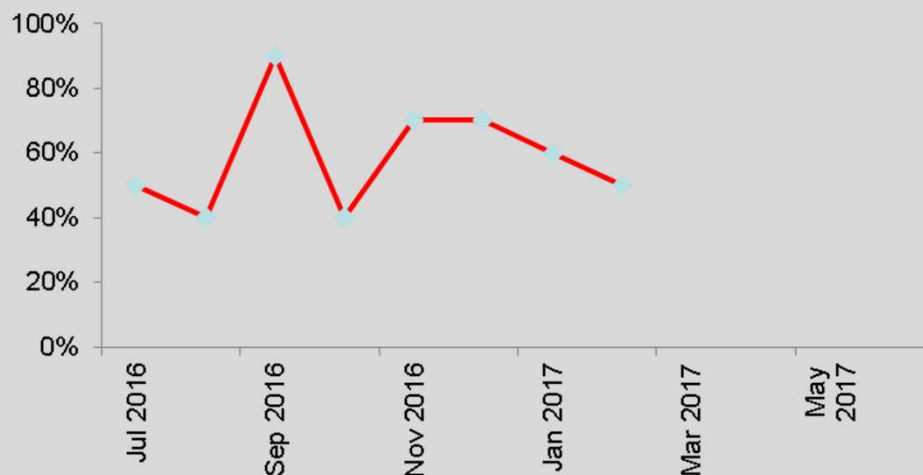
Measures Summary

September – Cervical screening month – promotion with grocery voucher draw

Decline November to February – end of academic year , students and staff away from University

October – exam time

Cervical Smears Overall Compliance



Highlights and Lowlights

- Review of nursing tasks with better clarification and accountability
- Generic email option – solution now found – process to be mapped and implemented
- PHO facilitator support

Highlights and Lowlights

- Team working together to solve an ongoing problem. Team understand their role in improving cervical screening
- Improved nursing coverage
- National Enrolment scheme supporting correct demographic data
- *Need to address lack of recall on 40 patients*

Achievements to date

- Problem solving process identifying issues for PDSA and prioritising
- Creating change champions
- Creation of cervical screening result text templates
- Improvement on patients having smears according to Dr Info reports
- Improvement on number of patients not on smears

Any other achievements?

Add any thing else you'd like to share here:

- Reviewed Recall procedures for patients who are not sexually active
- Starting to think about changes to NCSP in 2018
- Completed the safety climate survey with positive results
- Complete the 1st round of the trigger tool