

PRIMARY CARE DISCOVERY

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PDSA: Increasing Cervical Screening rates in eligible women

(QIM 9 Cervical Screening - The Number of female patients who are aged 25-74 years who have not had a hysterectomy and who have had a cervical screening test within the previous 5 years (HPV).

Clinic:	Date:		
Title:	Number:		
<p>Goal: What is the overall goal you wish to achieve? Increase the number of eligible women being screened for Cervical Cancer Ensure we are recording Cervical Screening correctly in our Clinical Information Systems (Data Quality) Improve: Cervical Screening rates in our practice and ensuring the rates of cervical screening remain high in our eligible patients. (sustainability)</p>			
<p>Idea: An estimated 900 women were diagnosed with cervical cancer, and 237 died of the disease in Australia in 2021. Cervical cancer is preventable. By making sure patients regularly attend the practice for cervical screening, precancerous cells can be detected and removed before they develop into cancer. The number of women who have had their cervical screening has decreased during COVID pandemic. Practices need to ensure they are recording cervical screening in their Clinical Information Systems correctly and have systems in place to identify eligible women for screening.</p>			
<p>PLAN:</p> <ol style="list-style-type: none"> 1) Ensure Cervical screening is entered correctly in the Clinical Information System (check current process) 2) Perform a POLAR audit to check data (If your screening rates are low this may indicate incorrect recording) 3) Improve access to Cervical Screening information through integration of the national portal (National Cancer Screening Register) which allows direct access using PRODA and is integrated into Best Practice and Medical Director. https://www.ncsr.gov.au/content/ncsr/en/healthcare-providers/RegisterAccess.html#clinicalsoftware 4) Identify eligible women who have not had their cervical screening and recall them for testing. 5) Track Progress 			
<p>Please note there are multiple PDSAs in the Cervical Screening activities the tasks below are only examples choose or add which ones are applicable for each PDSA.</p>			
List the tasks necessary to complete this test (what)	Person responsible (who)	When	Where
Run a baseline search to track progress (see walkthrough on using POLAR to get baseline data)			
Run POLAR search for eligible patients (see walkthrough Cervical Screening)			
Discuss the implementation at a practice meeting			
Resources (rooms, clinician availability) How many could we do every week?			
Recall eligible patients			

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Print poster and patient brochures to be displayed at reception.			
Follow up recalled Patients			
Continue to Run POLAR searches to monitor progress.(see walkthrough on using POLAR to get baseline data)			
After screening add a reminder to Clinical Software.			
Ensure the practice is recording cervical screening correctly in the Clinical Information System. (training)			
Implement integration of the national cancer screening register into BP or MD. (Train providers to connect)			
Install WALRUS tool use the PIP QI prompts for cervical screening)			

3) What do you predict will happen?

You may identify that cervical screening is not being consistently recorded in the Clinical Information System.
The number of eligible patients having their cervical screening increases through correct recording and connection to the National Cancer Screening Register
The number of eligible patients being screened increases through recalling.

DO: Was the cycle carried out as planned? Yes No, if not why?

STUDY: Record, analyse and reflect on results. Did the results match your predictions?

ACT: Decide to Adopt, Adapt or Abandon.

	Select		Describe
	Adopt	Select changes to implement on a larger scale and develop an implementation plan and plan for sustainability.	
	Adapt	Improve the change and continue testing plan. What will be next PDSA cycle?	
	Abandon	Discard this change idea and try a different one.	

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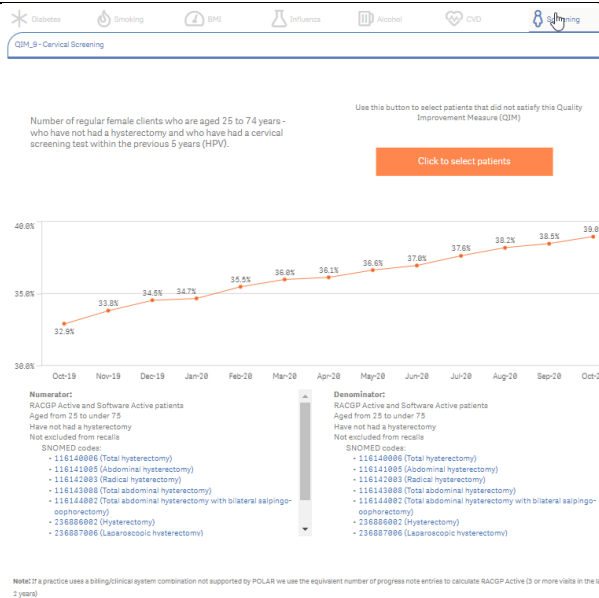
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WALKTHROUGH: Using POLAR to get baseline data for Cervical Screening

1. Open POLAR and Select PIP QI Report



2. Select the Screening Tab
This is your percentage of eligible women being screened.



3. You can also use the overview table on the left to see eligible counts and screened counts under QIM 9

Overview

QIM Group	Metric	Patient Counts	Current Proportion	Trend
Diabetes	QIM_1.1	18 / 28	64.29%	
	QIM_1.2	202 / 272	74.26%	
	QIM_1.3	54 / 86	62.79%	
	QIM_1.0	187 / 359	52.09%	
Smoking	QIM_2.1	886 / 5,111	17.34%	
	QIM_2.2	1,232 / 5,111	24.10%	
	QIM_2.3	2,993 / 5,111	58.56%	
	QIM_2.4	5,111 / 6,038	84.65%	
BMI	QIM_3.1	506 / 1,187	42.63%	
	QIM_3.2	398 / 1,187	33.53%	
	QIM_3.3	266 / 1,187	22.41%	
	QIM_3.4	17 / 1,187	1.43%	
	QIM_3.5	1,187 / 6,038	19.66%	
Influenza	QIM_4	842 / 1,411	59.67%	
	QIM_5	188 / 347	54.18%	
	QIM_6	70 / 103	67.96%	
Alcohol	QIM_7	2,989 / 6,038	49.50%	
CVD	QIM_8	1,095 / 2,869	38.17%	
Screening	QIM_9	958 / 2,458	38.97%	

4. You can also use your EMPHN POLAR practice report to see where you practice is benchmarking against the EMPHN catchment and the National benchmark for QIM 9 on page 5.

PIP QI Improvement Measure	Measure Recorded (Numerator)	Eligible Patients (Denominator)	Practice %	EMPHN Top 10 Average % [^]	EMPHN Catchment Average % ^{^^}	Australia Average % ^{^^}
QIM 9 - Proportion of regular female clients with an up-to-date cervical screening test record in their GP record within the previous 5 years	0	38	0%	76.32%	35.5%	37.4%

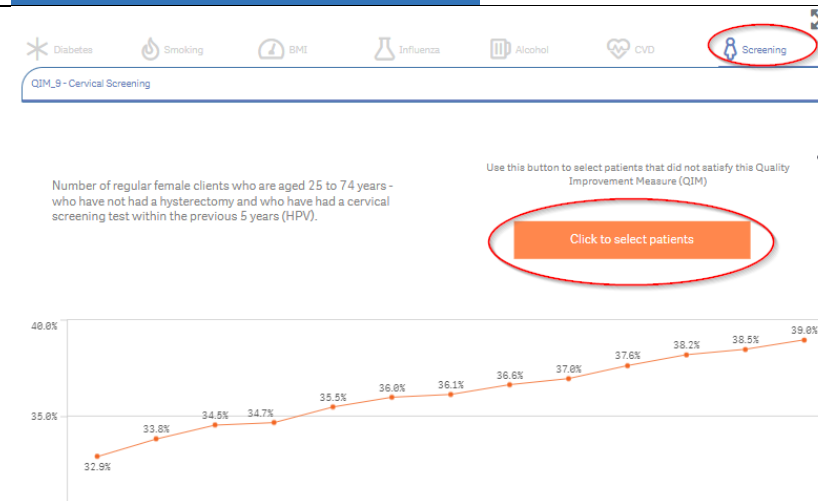
This is your baseline data.

Walkthrough: Using POLAR to find patients eligible Cervical Screening

1..Open POLAR and from Reports Select PIP QI Report



2 Select the Screening Tab
Then select the orange button titled click here to select patients



3.The patient list will load on the right hand side to export this list go to patient list up the top right hand side and export to excel for sorting and filtering.

Patient List

Patient ID	Name	Count
Totals		1,500

Patient List

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Notes:

