





# **Cervical Screening Saves Lives!**

# A systematic approach to prevention using Bp Premier

Presented by: Katrina Otto Train IT Medical Pty Ltd <u>katrina@trainitmedical.com.au</u> <u>www.trainitmedical.com.au</u>

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# Acknowledgement of Country

Train IT Medical acknowledge the traditional owners and custodians of land and waterways we meet on today.

We wish to pay our respects to Aboriginal and Torres Strait Islander elders past, present and future.



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Cervical Cancer Screening

### Cervical Cancer Screening

Cervical cancer is one of the most preventable cancers. Routine cervical screening is your best protection against cervical cancer. The Cervical Screening Test is expected to protect up to 30% more women.

#### Cervical Screening has Changed

In December 2017, a number of changes were introduced to the National Cervical Screening Program (NCSP). These included:

- > Replacing the Pap test with the Cervical Screening Test, which detects infection with human papillomavirus (HPV)
- > Women whose Cervical Screening Test shows that they do not have oncogenic HPV are classed as 'low risk' and are advised to screen every five years
- > Women will be invited to start screening at 25 years of age and should have a final (exit) test when they are between 70 and 74 years of age
- > Establishing the National Cancer Screening Register (NCSR)

#### Resources

We support GPs with a range of primary care quality improvement activities.

#### Access webinars and courses

https://courses.trainitmedical.com.au/

#### PHN Enrolment Code: p8GsSTHo



Course Content	<i>₽</i>		<ul> <li>Expand All</li> </ul>
VEBINAR RECORDIN	NGS		Collapse
Section Content		50%	6 Complete   5/10 Steps
🕑 1 - 🔡 Nurse Connect - C	ovid19 - 9 April 2020		
🔵 2 - 🔡 Telehealth with He	ealthDirect Australia - 2	l April 2020	
🔵 3 - 🔡 Telehealth & MBS	Item Numbers - 19 May	2020	
🔵 4 - 🔡 Advanced Telehea	alth and Digital Health I	mprovements - 27 May 2	2020
🔵 5 - 📳 Telehealth for Spe	cialists & Specialist Prac	tice Managers - 3 June 2	2020
🕑 6 - 🔛 ePrescribing, Rest	ults and My Health Recc	ord - 10 June 2020	
💙 7 - 🔡 Electronic transfe	r of prescriptions using	MedicalDirector Clinical	- 17 June 2020
🕑 8 - 🔡 Electronic transfe	r of prescriptions using	Bp Premier - 8 July 2020	1
9 - 🔠 Maximise Benefit	s of Digital Health Chan	ges - 16 July 2020	
🔵 10 - 👪 Leading Quality I	Improvements during C	ovid 19 - 23 July 2020	

#### Further learning:

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#### NATIONAL

#### CERVICAL SCREENING

PROGRAM

A joint Australian, State and Territory Government Program



**Quality Framework** 

Download National Cervical Screening Program – Quality Framework

# Learning Objectives:

- 1. Develop a systematic approach to cervical screening using Bp Premier.
- 2. Build advanced understanding of features within Bp Premier & Pen CS relevant to cervical screening.
- 3. Differentiate between preventive health reminders and clinically significant recalls.
- 4. Use actions for proactive preventive health management.

All News Health

## Australia May Become First Country to Eliminate Cervical Cancer – Rate Drops From 22% to 1%

Learn more



"Western Sydney has one of the lowest screening rates in Australia.

Unusually large number of advanced cancer diagnoses recorded over the past 12 months

72% increase in stage III and stage IV diagnoses

More than 50% of these cases originated from foreign-born parents or disadvantaged communities"

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Read more: Cervical screening rates in Western Sydney

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Learning Objective 1:
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Develop a systematic approach to preventive health management and cancer screening.

### Searches, screening and systems



### Review test result & action

following your practice results/Inbox Management' system



Download a blank flowchart here: http://trainitmedical.com.au/manuals-free-downloads/bp-software-resources-free-templates

### Add recall or reminder

following your practice 'recall & reminder' system



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#### Identify at risk groups/patients > Preventive Health Searches Under screened? Never screened? Hard to reach groups?

### Education & Engagement - what works?

## **PIP QI – Eligible data set - Improvement measures**

- 1. Proportion of patients with smoking status recorded
- 2. Proportion of patients with alcohol status recorded
- 3. Proportion of patients with weight classification.
- 4. Proportion of patients with up-to-date cervical screening.
- 5. Proportion of patients with diabetes with blood pressure recorded
- 6. Proportion of patients with diabetes with current HbA1c result
- 7. Patients with diabetes immunised against influenza
- 8. Proportion of patients COPD & immunised against influenza
- 9. Proportion of patients over 65 immunised against influenza 10. Proportion of patients with necessary risk factors to enable CVD assessment

### Criterion C4.1 – Health Promotion & Preventive Care

Adopting a **systematic** approach to health promotion and preventive care can include:

- reviewing and understanding the practice's patient population and their healthcare needs.
- establishing a reminder system
- maintaining a disease register
- conducting patient prevention surveys
- maintaining a directory of local services that offer programs to help patients modify their lifestyle.



**RACGP Standards** 

### Criterion C4.1 – Health Promotion & Preventive Care

- maintain a directory of local services

Community		😑 💥 Western Sydney	Q Search HealthPathways
HealthPathways	western Sydney	K HealthPathways	/ Women's Health / Cynaecology / Cervinal Screening
		Western Sydney	Cervical Screening
Welcome Sign in to HealthPathways Usemame Password Forgo	Username: health Password: w3stern	Surgical Women's Health Breastfeeding Contraception and Sterilisation Gynaecology Amenorthoes Cervical Polyps Cervical Polyps Cervical Scheening Endometrial Cells on Cervical Smears HPV Vaccination Dyamenorthoes Endometrial Cancer Low Risk Follow-up Pipelle Biopay Procedure Fernale Genital Mutilation (FGM) Abnormal Uterine Bleeding	See also: • Endometrial Cells on Cervical Smears • HPV Vaccination COVID-19 note During the COVID-19 outbreak, it is important to offer and encourage routine screening and follow-up where possible. If it is not possible to continue usual cervical screening. general practitioners should follow guidance from the National Cervical Screening Program [2] about when it may be suitable to defer screening appointments. New screeners who have recervity turned age 25 years will continue to receive letters to start cervical screening. It may be suitable to delay screening by 3 to 6 months in this cohort as it is thought to be low-risk. Higher-risk patients should continue to be reviewed without delay including: • women who present with symptoms of cervical cancer, • women who are on the Test of Cure pathway after treatment for HSIL (CIN 2/3), and • women who are due for follow up after an intermediate result (12-month follow up of human papillomavirus (HPV) non-16/18 positive with restring er towo carde contoner of although to be contended to the service of the pathway after treatment for HSIL

RACGP 5<sup>th</sup> Standards Criterion C4.1 - Health promotion and preventive care



"Some information may also be transferred to national / state-based registers (eg cervical screening etc)

Remind patients when they need to have another screening (do not rely on patients receiving reminders from these registers)."

Read RACGP 5th standards

National Cancer Screening Register

Learning Objective 2:

Build advanced understanding of features within

Bp Premier & Pen CS relevant to cervical screening.

### Pen Clinical Systems



# **Screening and Prevention**

#### Easily identify all eligible patients who have NOT had a Cervical Screening Test (CST)



Find patients eligible for cervical screening

PIP **q** 

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#### **PIP QI 10 Measures**





#### **Cervical Screening searches**



🖉 Cervical	screening								×
Name:	ws Jennifer Andrews			D.O.B.:	20/04/19	70	Age:	50 yrs	
Address:	2 Kennedy Road Bundaberg 4670			Phone:			Mobile:		
No longer	requires pap smears		pt out of cerv	rical screeni	ng Reason:				~
Pap Smear	s								
Smear Date	Result	Endocervical cel	ls HP	/ Per	formed by		Comment		
20/01/1997	Negative	Yes	No	Not	performed her	e			
27/08/2008	Negative	Yes	No	Not	performed her	e			
27/08/2010	Negative	Yes	No	Not	t performed her	e			
22/08/2012	Negative	Yes	No	Not	performed her	e			
<									>
Cervical So	creening Tests								
Screen Date	HPV 16	HPV 18	HPV Other	LBC R	esult			Endocer	vical cell
									>
•									
Patien	t			Add	Edit	t	Delete	Close	

### Cervical Screening searches

### Run SQL queries to find patients whose previous test may not have been 'coded'



- Female Patients 18-69 years with Pap test recorded over 2 years ago.
- Female Patients 18-69 years with Pap test recorded within past 2 years.
- ✓ Female Patients 18-69 years with no Pap test recorded.



Female Patients 50-74 years with Mammogram recorded over 2 years ago.
 Female Patients 50-74 years with Mammogram recorded within past 2 years.
 Female Patients 50-74 years with no Mammogram recorded.

#### Bowel Cancer Screening

- ✓ Patients 50-74 years with FOBT recorded over 2 years ago.
- ✓ Patients 50-74 years with FOBT recorded within past 2 years.
- ✓ Patients 50-74 years with no FOBT recorded.



Email <u>enquiries@trainitmedical.com.au</u> to access these specially written SQL queries. Download the cheatsheet for entering breast, bowel and cervical screening results

### Coded data is important

ltem Nil known	R	Reaction S	everity	Type Preventive h Preventive h Preventive h Preventive h	ealth () ealth () ealth () ealth () checked repo	Due )2/09/2020 )2/09/2020 )2/09/2020 )2/09/2020 outs for this patier	Reason A Cervical Screening Influenza vaccinatior Vaccination against j A smoking history sho	Test is due! n should be considered! oneumococcus should be ould be recorded!	considered!			
Expand	Collapse			Add	Edit	Delete	Print					
	rs Jennifer Andrews	s		No longer requi	res cervical s	creening	Opt out of cen	vical screening Reaso	n:	~		
	Today's notes		Par	Smears								
÷	Vast visits		S	reen Date	Smear Re	es ult		Endocervical cells	HPV changes	Performed by	Comment	
	Current Rx		20	)/01/1997	Negative	oun		Yes	No	Not performed here	Commone	
÷ 🏾	Past history		27	7/08/2008	Negative			Yes	No	Not performed here		
E	Active		27	7/08/2010	Negative			Yes	No	Not performed here		
	<b>&gt;</b> 17/08/2	2012 Asthma	22	2/00/2012	Negative			165	NO	Not performed here		
	🕬 ┝ Inactive											
÷%	Immunisations											
÷… /	Investigation rep	ports										
	Correspondence	e In										
÷	Correspondence	e Out										
÷	Past prescription	ns										
	Observations											
-8	Family/Social hi	istory	Cer	rvical Screen	ing Tests							
6	Clinical images		Sc	creen Date	HPV 16	HPV 18	HPV Other	LBC Result		Endocervical cells	Performed by	Comment
±€	Obstetric history	<b>/</b>										
÷ §	Cervical screeni	ing										
÷	Enhanced Prima	ary Care										

### **Ordering CST**

Ordering a test automatically adds an 'Outstanding Request' to your list in the patient record.

You can also add an 'Action' if clinically

Type	Due	Reason	
Action	02/09/2020	Follow up request: Cervical Screening Test	
Outstanding requests	02/09/2020	There is 1 outstanding request for this patient!	
Preventive health	02/05/2020	A straking history should be recorded?	

Remove 'outstanding requests' and 'actions' when results are received.

From the Main Screen at any time access lists:

View > Investigation Requests Clinical > Outstanding Actions

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🏓 Pathology request	×
Request date:       2/09/2020       Labo         Request       Favourite tests       Ervical Cytology         Details       E/LFTs       ESR         Details       HbA1C       HbD2Cholesterol         Histology       PSA       TSH         Urine M/C/S       Urine M/C/S	ratory:   Search:     Test name     CA:19.9     Carbiamazepine   Carbiamazepine   Cardiac Enzymes   CEA   CEA   Cervical Screening Test   Chlamydia (Direct Examination)   Chlamydia (Direct Examination)   Chlamydia PCR, Swab   Chromosome studies   Chromosome studies   Chromosome studies   Chrical Screening Test     Last Pap smear on 22/08/2012 - Result:
Previous results Clinical details: Clinical deta	Cervical screening:         Site:       Symptomatic:       Past history:       Other:         O Cervix       Postmenopausal Bleeding       Hysterectomy       Post-Menopausal         Vaginal vault       Intermenstrual Bleeding       Adenocarcinoma in situ       Post-Natal         Vagina       Postcoital Bleeding       HSIL (Test of cure)       HRT         Appearance:       Vaginal discharge       Immunodeficient       OCP         Benign       Dyspareunia       DES Exposure       IUCD         Suspicious       Radiotherapy         Erosion       Flags:       Ectropion         Drevious result unsatisfactory       Self collected         Follow up of previous abnormal result       Due on:       2/09/2020
	Print Cancel

#### Process when receiving results into the Inbox



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Andemon, David	0.6.6.0000	(B) (B)			
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1 23/97/2004 HPV DNA			-		
👗 Nork, Fred					
- (3 01/09/2006 INF					11. MA
- O 01/06/2006 INF				TEST-REN, CLAU 1043 DAUDENDIG R	IDID ID. CLATTOR. 3160
01/06/2006 FBE				Birthdate: 16/0 Your Belerance:	05471 Lab Reference: 10-2653257-595-0
Andrews, Heather				Laboratory: AUST	DALIAN CLISICAL LARS
todaya bada				DETARINENT	inge fest sinists betweenent - Mereired byt - restime
A 11/12/2011 NATIONAL CERVICAL SCHE				Nome of Test:	MATIONAL CERVICAL SCREES
Anderson, Penny				sedmand: set	teraoro consectent arrange esperient errora
O 71/12/2018 NATIONAL CERVICAL SCRE				CLENECAL HOTES:	
					NATIONAL CERVICAL SCREENING
				Risk	: low risk
				Collection By Specimen Site	: Fractitioner : Cervical
				Sample Type Reason for Test Test Nethod	: FreservCyt Solution : Dther Co-test as per-publines : Abbot: Real Time BB HFV
				HPV 10 MPV 10 Other HPV	i But Deterned 2 Not Deterned 1 Not Deterned 1 Not Deterned
				Specimen Type	: Liquid based specimes
				RESULT	: REGATIVE FOR INTRACPITABLIAL LESION OR MALIGNARCY
				18C Reading Beason for Test	: Hangally Read : Other Co-test as per guidelines
anding requests -took if returned.				WICLOBCOBA	<ul> <li>Ho abnormal squamous epithelial cells are seen. Endocervical component present.</li> </ul>
				RECOMMENDATION	/ Headreen im 5 years
				511de Bo) 2019-	-81201
				SVI-S LBC-R HFV-R	HLB-R
				All tests on this	request have now been completed
ment:	This result in:	Action to be taket:	Store result in:	Store for location: 14	am sungery 🦳 👻
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	() Accestable	O Doctor to advice	Concerning of	No. of Concession, Name	
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keiden	C Being treatest	Nonugent apportment	Add Action Add	ST mult	2000
	C Under suecialit care	O liget apprintent	COMPANY OF	and the second second	Text

#### Step 1: Add CST result.

*Step 2:* Action result - following your practice protocol.

### **Screening Pathway**



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CLOSE

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Sample only - download blank flowchart to document your system with your practice team

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#### Add CST result from the Inbox

Add CST result

Vibos					
A CALL COLOR OF ALL AND THE					
	P	100			
20107/2004 HPV DNA     20107/2004 HPV DNA     20107/2004 HPV DNA     1005/2005 HPV     0105/2005 FWR     0105/2005 FWR				TENT-HER, CLAI	1010
Anderen, Houther     Anderen, Houther     Anderen, Journal of the Conversal scheme      Anderen, Journal of				Loss Countinees R Birthdate: 16/0 Your Reference: Laboratory: NUTE Addressen: TERT Home of Test:	D, CANTOR, 110 201795 Bar F Wedicare Funder: 201795 Bar F Wedicare Funder: 201795 Lab Seference: 12-20323-071-0 38210 CHILL LASS CHILD SEFERE SEENATHER: Beforenet by: Institut Test system sufficient convicul schemes
Asterson, Parry				Segueated: 31/1	1/2010 Cullected: 31/12/2010 Reported: 26/03/2019 11:21
SI/12/2018 NATIONAL CERVICAL SCRE				CLIBBCAL NOTES :	
				3992	BATIORAL CHEVICAL SCREENING
				Risk	: Low risk
				Specific Site	· Cecrical
				Sample Type Resson for Test Test Nothod	) Besasrvlyr Silution ) Other Ca-tar as per guidelines ) Rabots Real Time SE EPV
				STW 10 STW 10 Other HWV	: Not Beteched • Not Beteched • Not Beteched
				Specimen Type	+ Liquis based specimen
				BESTLY	· SECONTINE FOR INVESTIGATION CARDING OF MALTONAUCU
				15C Reading Research For Text	: Nervailly Read ) Other Co-test as per punchings
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annert .	This result is: C Hansel C Amoral C Stable	Action to be taken: O No action O Receptorito advise O Reme to advise	Store result in: the transportance of Consepondence of Chinal Insport	Store for incation: My	en sagent -
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	Clearing	Office-argent appointment	Add Actors Add	CST weat	
	21 peak menang here	Conduct Without one	Distance ?	Sec. Sec.	Finan.

Cervical screenir	ng result			×
Date performed:	26/02/2019	]-		Lookup Ix
Performed by:	Dr F. Findacure		✓ ☐ Include inac	ctive providers
	Cervical Scre	ening Test	O Pap smear	
	Unsatisfactor	y specimen		
HPV PCR:	HPV 16		Not detected	
	HPV 18	Oetected	Not detected	
	HPV not 16/18		Not detected	
LBC Result:	Negative			~
	Endocervical	cells present		
Other information:				^
				$\sim$
Add reminder			Save	Cancel

# Coding cervical screening results from the patient record

nem needoon Seventy	rype Freventive he Preventive he Preventive he	odti 02/09/2020 setti 02/09/2020 setti 02/09/2020 setti 02/09/2020	Heason A Cenvical Screening Influenza vaconation Vaconation against p A smoking history sho	Test is due! should be considered! neurococcus should be used be reconted!	consciented! & Censical screeni	ny iesult			
	e are uni	checked reports for this pati	ers!		Date performed	2/05/2020	]+		Lookup bi
Expand Collapse	Add	Edit Delete	Firs		Performed by:			🥪 🗌 include ina	ctive providers
Mrs Jennifer Andrews Today's notes Past visits Current Rx Past history Active Nactive Introduced in the points Investigation reports Correspondence In Correspondence Out Past prescriptions	No longer requi	Smear Result Negative Negative Negative Negative Negative	☐ Opt out of cerv	Endocervical cells Yes Yes Yes Yes	HPV PCR: LBC Result: Other information: Add remunder	Cervical Sort     Unsatafacto     HPV 16     HPV 18     HPV not 16/18     Endocervica	eening Test ny specimen Detected Detected Detected	Pap smear	Cancel
- Observations								_	
Family/Social history	Cervical Screen	ing Tests		11.2011-25.0					
Clinical images	Screen Date	HPV 16 HPV 1	8 HPV Other	LBC Result		Endocen	vical cells Pr	eformed by	



**Tip**: If a women no longer needs screening tick the relevant boxes so she no longer appears in searches

Download the cheatsheet for entering breast, bowel and cervical screening results

## Add reminders from patient record or Inbox

Reminder			
To see:	Dr Frederick F	indacure	$\sim$
At location:	Main surgery		$\sim$
Reminder Type:	All		$\sim$
Reminder reason	:		
Reason		Default interval	^
Asthma review		1 year	
BP Check		1 year	
Breast check		1 year	
Care plan		1 year	
Cervical screen	ning	5 years	
Cervical Screer	ning Test (Cli	1 year	
Cholesterol che	eck	1 year	
Colonoscopy		1 year	
Diabetes review	N	1 year	
DVA review		1 year	
Faecal Occult I	Blood	1 year	~
Other reason:			
Reminder comme	ints:		
			$\cap$
			$\sim$
These comments	will NOT be co	mmunicated to the	
patient			

#### CONTROL YOUR LIST!

PA	ŀ
PAP PAP - 1 YEAR	
PAP - 2 YEAR PAP - ABNORMAL	
PAP - CYTOLOGY	
PAP - RECALL PAP - REMINDER	
PAP & BREAST CHECK	
PAP SMEAR TEST	
PAP TEST PAP TEST FOLLOW UP WITH DR JACKSON	
PAP TEST REMINDER PAPP	

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# Learning Objective 4:

Differentiate between preventive health reminders and clinically

significant recalls.

# 3 Top Tips for Recall & Reminder Success



- 1. Define your system
- 2. Control your list (Configuration > Reminders)
- Differentiate between
   'Clinically Significant Recalls' and preventive health
   'Reminders'

13 Dear Karen, This letter is a reminder that according to your medical record, you are due to see the GP in If you have followed this up with another GP at another medical centre, please let us know so we Please contact us with any queries. Regards,

### Label 'Clinically Significant Recalls'





#### Tips:

1. Once you have your 'Recall & Reminder System' in place, untick 'Allow Free text reminders'

2. Allow free text comments to minimise need for duplicate reasons on the list. Patients will not see free text comments.

3. Ensure you have a symbol in your appointment book to clear identify patients who have been recalled.

### Clean up reminders

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#### Generate Recall and Reminder Lists



Clinically significant tickbox

Piter by type. All	<ul> <li>✓ User</li> </ul>	
Reason Genth Immunisation Care plan Diabetes review Fluvax Fluvax Health assessment Hepatitis B Immunisation	Dr F. Finda	cure
<ul> <li>Influenza Vaccination</li> <li>Pap Smear</li> <li>Pneumovax</li> <li>Prostate check</li> </ul>	Select all Location	Deselect al
Select all Deselect all	Select all	Deselect al
Due between: 26/06/2019	Include over Include inact	due reminders. Ive patients

Select parameters

trainitmedical.com.au

### Follow up Recalls and Reminders



Follow up remi	inders												σ	×
File Help View	н					_								
14 1	5													
Filter by action:	Unactioned o	niy ~	Show all patient	s 🗌 include inactiv	re patients	s 🗌 Show Clinically sign	nficant only Ad	tions for highlighted r	reminder:					
By provider:	Al	Y	By location:	Al	~	Reason: Al	~	Contact notes	Book appointm	nent.				
Sent on or after	26/06/2018		Sent on or before:	26/06/2019	D.	Send listed reminder	rs again	Performed	No longer requ	ired.				
Name		Reason		Doctor		Location	Sent	Sent as	Contac	Actioned	Action	Actioned by	Statu	15
lobott, Alan		Health assessment		Dr F. Findacure		Main surgery	21/03/2019	Letter	1	11			Sent	
inderson, Penny		Blood Test (Clinical)	y Significant)	Dr F. Findacure		Main surgery	21/03/2019	Letter	1	11			Sent	
nderson, Penny		Breast check		Dr F. Findacure		Main surgery	21/03/2019	SMS	1	11			Delivered	đ
nderson, Penny		Cervical Screening	Test	Dr F. Findacure		Main surgery	21/03/2019	Letter	1	11			Sent	
ndrews, Heather		Cervical Screening	Test	Dr F. Findacure		Main surgery	21/03/2019	Letter	1	11			Sent	
ridrews, Sasha		Asthma review		Dr.F. Findacure		Main surgery	28/05/2015	Letter	1	311			Sent	

Use 'Send listed reminders again' button to generate additional letters Use 'Performed' to flag the reminder as performed. Use 'No longer required' to remove the reminder from the list

### Sending options





leason:	All	<ul> <li>Method:</li> </ul>	All	$\sim$	Message status:	Al		~	Refresh mes	sage statuses
letween:	26/05/2019		26/06/2019		Location:	Al	~ ~	Show	only contact no	tes with replies
Date 26/06/2019 26/06/2019 26/06/2019 28/05/2019 28/05/2019 28/05/2019	Reason Reminder Reminder Reminder Corresponden Corresponden	Method SMS SMS SMS ce In SMS ce In SMS ce In SMS	Recorded by Dr Frederick Findacure Dr Frederick Findacure Dr Frederick Findacure Dr Frederick Findacure Dr Frederick Findacure Dr Frederick Findacure	Commen	ts	Note no 1 1 2 1 1	Replies 0 0 0 0 0	Message : Sent/Pend Sent/Pend Sent/Pend Sending Fa	status ling Delivery ling Delivery siled siled	Location Main surger Main surger Main surger Main surger
t ] Show dek	eted			Add	Vie	w	Delete	Pnr	t R	esend messag

the states

## Consent is important

Consent Options This patient consents to receive the following electronic reminders/messages (consent settings selected on the Bp Comms confiuration screen are enabled) Appointments Clinical Communication (Results & Clinical message)	Consent Status Mobile Phone: 0410600697 SMS: Not Enabled Dris patient cannot receive reminders (messages via SMS)	
Clinical Reminders Health Awareness (Leaflets & Database search)	Verify Di	sable
Signed consent status: Not Linked Import and link the signed patient consent form using the buttons below		
Open Bulk Document Import Link to signed consent		
		<u>O</u> K

#### When patient returns: delete recall

pe	Due	Reason						
on	06/12/2017 20/10/2017	Follow-up referral Check BSL						
ninder due standing requests	27/10/2017 20/10/2017	Skin check						
ventive health	20/11, 🖉 R	eminders						
	The	following reminders are in the database	for this patient:	Show sent reminders				
	See Due	Reason	Doctor	Location				
	27/10 Visit 25/05	//2017 Skin check i/2019 Pap Test - Reminder	Dr F. Findacure Dr F. Findacure	Main surgery Main surgery				
	visit							
	Ar							
					Maur	E Ja	Demons	

#### Audit trail of contact

#### BEST PRACTICE - REMINDER MANAGEMENT PROTOCOL - SAMPLE 1



# An effective practice system is vital



Download a blank flowchart here: <u>http://trainitmedical.com.au/manuals-free-downloads/bp-software-resources-free-template</u>



## RECALLS

WILL MET PALL NOT PRIME

I will remember to remove the recall. I will remember to remove the recall.

# Learning Objective 4:

Use actions for proactive preventive health management.

### Use Actions as a reminder for you

ine releving e				
Date due	Action	Entered by	Priority	Entry date
01/09/2017	Follow-up referral	Dr F. Findacure		25/05/2017
19/07/2017	Discuss smoking cessation	Dr F. Findacure	Medium	19/07/2017
Comment:				^



# Plan | Do | Study | Act

#### DO

With assistance from practice staff, implement the recall/reminder (or other) strategy designed in Cycle 2 to encourage identified patients to make an appointment to discuss or participate in cervical screening.

Record any practice strategies and recall/reminder actions each GP took with their identified twenty patients in the tables below.

Tick any practice strategies	that were applied	
Waiting room patient education resources	Opportunistic conversation with other eligible patients	Other (please specify)

	Identified patie	ents were remin	ded via (tick all tha	t apply)
Letter from practice	Phone call from GP/ practice nurse	SMS from practice	Face-to-face conversation with GP/ practice nurse	Other (please specify)

Plan Do Study Act Cycle Activity for Cervical Screening | Cancer Council WA

## Ideas for engagement

- Display materials in waiting room.
- Opportunistic education including data on effectiveness.
- Culturally and linguistically appropriate information

<u>Consumer resources</u> are available and have been translated into 24 languages including Mandarin, Vietnamese, Cantonese, Arabic, Korean, Greek, Thai, Khmer, Italian, Spanish, Turkish, Persian, Macedonian, Dari, Japanese, Serbian, Assyrian, Nepali, Croatian, Samoan, Gujarati, Sinhalese, Urdu and Bengali.

Resources have also been developed specifically for Aboriginal and Torres Strait Islander people in English and translated into <u>six indigenous</u> languages: Alyawarra, Arrente, Luritja, Pitjantjatjara, Torres Strait Creole and Warlpiri.

- Work with small group of patients to co-design.
- o GP recommendation
- Practice Nurses / Special clinics
- Follow up any literature with phone call.
- Allow time to discuss and address concerns.
- Add promotion to website/facebook etc



Australia is on track to eliminate cervical dancer by 2035

#### **Access webinars and courses**

#### https://courses.trainitmedical.com.au/

#### PHN Enrolment Code: p8GsSTHo



Course Content	$\mathbf{b}$		✓ Expand All
WEBINAR RECORD	INGS		🚫 Collapse
Section Content		50% Compl	ete   5/10 Steps
🕑 1 - 🔡 Nurse Connect - (	Covid19 - 9 April 2020		
🔵 2 - 📕 Telehealth with H	lealthDirect Australia - 21	April 2020	
🔵 3 - 🐮 Telehealth & MBS	S Item Numbers - 19 May 2	2020	
🔵 4 - 🐮 Advanced Telehe	alth and Digital Health Ir	nprovements - 27 May 2020	
🔵 5 - 📱 Telehealth for Sp	ecialists & Specialist Prac	tice Managers - 3 June 2020	
🕑 6 - 🐮 ePrescribing, Res	sults and My Health Reco	rd - 10 June 2020	
💙 7 - 📰 Electronic transfe	er of prescriptions using N	VedicalDirector Clinical - 17 June	2020
🕑 8 - 📰 Electronic transf	er of prescriptions using E	3p Premier - 8 July 2020	
🕑 9 - 📕 Maximise Benefi	ts of Digital Health Chang	ges - 16 July 2020	
🔵 10 - 🗳 Leading Quality	Improvements during Co	wid 19 - 23 July 2020	

# Bp Premier | Saffron

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# **Further Information**



#### National Cancer Screening Register (NCSR) & Cervical Screening Program

#### Cervical Cancer Screening | WentWest

<u>Cheatsheets for entering cervical screening results in Bp Premier |</u> Train IT Medical <u>Cancer Screening & Prevention – Free Resources</u> | Train IT Medical

Cervical Screening | Pen CS

Guidelines for Preventive Activities - Cervical Screening - The Red Book | RACGP

Cancer Institute NSW 'Information for Health Professionals'

Untold Stories – Culturally diverse women share their stories of cervical cancer

screening | Youtube | Family Planning NSW

Arabic, Assyrian, Dari, French, Hindi, Karen, Khmer, Mandarin, Nepalese & Vietnamese.



# We're here to help you!

katrina@trainitmedical.com.au

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