



# HIVQUAL-US

## BRIEF

Volume 1, Issue 1

The following HIVQUAL-US Brief marks the first in a series of updates to be sent to participating grantees.

## Cervical Cancer Screening: Improving Rates and Subsequent Treatment Through Quality Improvement

### EASTERN PENNSYLVANIA REGIONAL GROUP

Regional Groups are a collective body of Ryan White grantees representing a particular geographic area that collaborate to build capacity for peer learning by sharing improvement strategies and best practices across their facilities' quality management program. Each group is assigned an experienced consultant who provides quality improvement expertise through facilitation, coaching and mentoring.

Established February 2006, the Eastern Pennsylvania Regional Group excluding Philadelphia includes seven Ryan White Parts C and D grantees. The Regional Group meets in-person quarterly with Nanette Brey Magnani, the HIVQUAL-US consultant for the region. WebEx conferencing continues throughout the given year as well as regular onsite visits and e-mail communications with the consultant.

The Eastern PA Regional Group identified cervical cancer screening as one of several topics for a shared quality improvement project. Previous research has demonstrated that cervical cancer may be the most common form of malignancy in HIV-positive women at two to three times the normal rate. Additionally, HIV-positive women tend to have higher rates for reoccurrence and death when treated with standard therapy.

In addition to the clinical implications, cervical cancer screening was chosen by the Eastern PA Regional Group for its prior-

ity-status in the PA Cross Parts Quality Management Program and the availability of HRSA Clinical Guidelines.

Clinics participating in the shared quality improvement project include Lancaster General Hospital, Lehigh Valley Hospital: AIDS Activity Office, Pinnacle Health Medical Services' REACCH Program, the Reading Hospital: Center for Public Health, Wright Primary Care Center, Scranton, Easton Hospital and St. Luke's Hospital and Health Network.

Several different quality improvement tools were used at each site to examine processes of care for cervical cancer screenings, including fishbone diagrams, flow diagrams, and various forms of brainstorming. Such strategies illustrate the challenges and opportunities for problem solving in a meaningful and visual way.

The Pinnacle Health Medical Services' REACCH Program developed the fishbone diagram shown on the next page to investigate gaps in performance for cervical cancer screening. This analysis demonstrated that 49% of women were not receiving annual cervical cancer screenings. As a result, the program found that the restrictive time slots designated for appointments and the patients' limited access to transportation and childcare were the leading contributing factors to low screening rates. As such, the REACCH Program was able to target these areas of concern for further quality improvement efforts.

## News: eHIVQUAL Launch

eHIVQUAL, a web-based interface for assessment of HIV clinical care, is now available for use by registered Ryan White Part C/D grantees.

Key features include: Highly secure, comprehensive import feature, extensive built-in reporting capabilities, and piloting linkage to CARE-Ware.

Various reports can be generated at any point before or after final data submission. There are forty-four different reports that might be created, each of which can be filtered by demographic or clinical parameters.

Reference materials are also available, including instructions, indicator guides, sampling methodology, chart abstraction tools, XML data import tools. A password is not required to access these materials.

For further information regarding eHIVQUAL registration and use, please contact Christopher Wells at cgw02@health.state.ny.us or Darryl Ng at dwn01@health.state.ny.us.

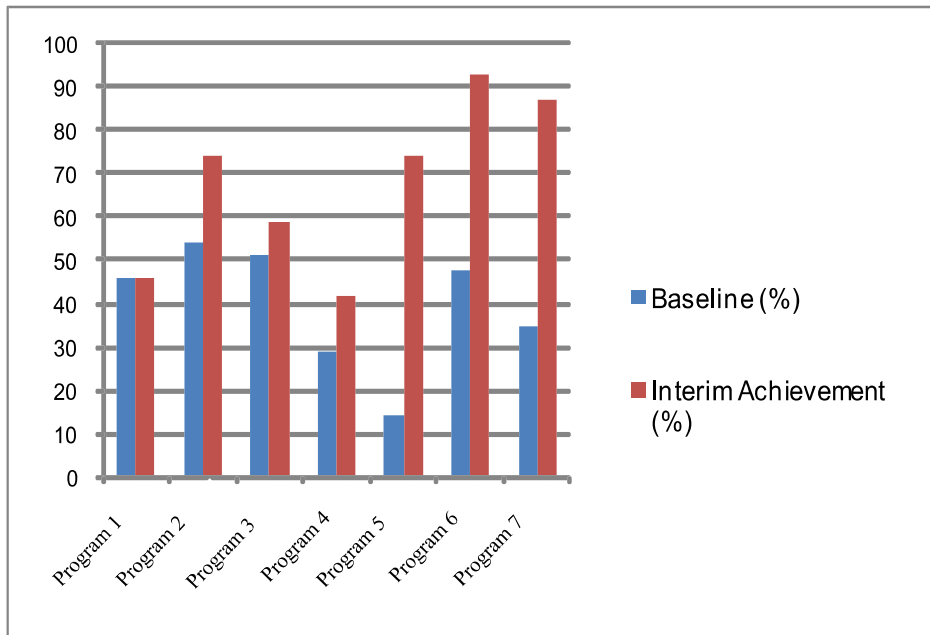
### Login Screen for <http://www.ehivqual.org>

Interventions included improving documentation of outside cervical cancer screening results, administering pre-encounter forms to the nurse before the visit, attaching the results of a cervical cancer screening to the chart, increasing the number of referrals, completing follow up call for no shows, ordering different size specula to be used in the screening, conducting appointment reminders using a newly established EMR, printing a list of patients in need of cervical cancer screening for Mid-level Provider to review daily and update monthly, inserting education messages into reminders and follow-up calls and designating a women's health clinic with a female NP.

Programs' individual annual screening rates for cervical cancer subsequently increased by as much as sixty-percent from baseline values. Wright Center for

Primary Care, Scranton saw the most improved performance in this area of care by 60% (14% at baseline to 74% at follow-up).

Baseline and Interim % Rates for Cervical Cancer Screening



Source: Eastern PA Regional Group

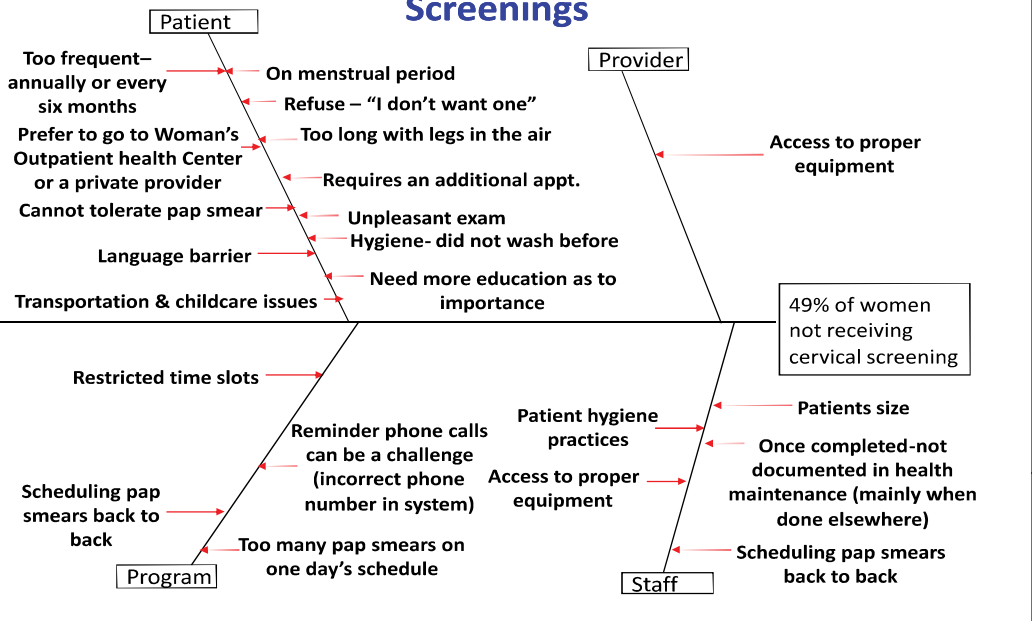
Because the Eastern PA Regional Group follows the principle of continuous improvement, programs will implement future changes to achieve further success. For example, St. Luke's and Easton hospital programs will expand upon their quality improvement work in cervical cancer by exploring other indicators such as the percentage of patients with detectable viral loads and no-show rates. To sustain their achieved gains, both programs have maintained month-to-month updated lists of women who have not yet been screened in order to target these patients for educational calls regarding the importance of cervical cancer screening, etc. Wright Primary Care Center, Scranton has found a need to increase the overall number of visits in order to increase their screening rates.

At a Pennsylvania-wide Ryan White Cross Parts Summit meeting this September the Eastern Pennsylvania Regional Group presented their data as well as an overview of the Regional Group mission and quality improvement methodologies used for the project.

These regional group activities reinforced sustained performance improvement and strengthened the institutional culture of quality improvement across individual programs. The group will soon identify a topic for the next shared quality improvement project.

For more information regarding the Eastern Pennsylvania Regional Group please contact Nanette Brey Magnani, consultant, at [breymagnan@aol.com](mailto:breymagnan@aol.com).

### PHMS REACCH Program's Root Cause Analysis of Cervical Screenings



Source: Pinnacle Health MS: REACCH Program, Eastern PA Regional Group

HIVQUAL-US is supported through US Department of Health and Human Services, Health Resources and Services Administration. For more information on HIVQUAL-US or the HIVQUAL-US Briefs, please contact Amanda Bowes at [acb11@health.state.ny.us](mailto:acb11@health.state.ny.us).