

Practice Improvement Plan

Please use the correct plan based on the target population you selected previously, either young women (between 21 and 26 years old) or on middle-aged women (between 50 to 65 years).

Women age 21–26 years old ONLY

It's time to select a practice improvement strategy. Below are pathways that you can choose from to improve the preventive cancer care of your female patients. Within each pathway there are several interventions. **To complete this module, you will need to select a minimum of one intervention to implement in your practice.**

Cancer Prevention: Implementing team-based, planned visits to improve vaccination rates for HPV in young women.

Summary: Cervical cancer is unique in that almost all cancers can be prevented by immunization. In spite of this, HPV immunization rates are appallingly low with less than half of young women receiving the complete series. By taking a proactive approach and involving all members of the care team, it is possible to address the barriers to immunization within your practice and greatly improve immunization rates for your patients.

Interventions :

- Implement standing orders for HPV vaccination
- Use a team based approach at the time of visit to educate patients about the value of HPV vaccination
- Query your medical record or use a vaccine registry to identify patients who are due for HPV vaccination, then contact the patient to encourage them to have the HPV vaccination

Cancer Screening: Implementing clinical decision support and using team based care to improve cancer screening rates.

Summary: Early detection of cancer or precancerous lesions is vital for the successful treatment of breast and cervical cancer. Appropriate screening includes pap testing every three years (or five years with HPV testing for women 30 and over), and screening mammography every two years. Empowering team members to help ensure that patients receive needed screening and implementing decision support within your practice, can improve screening rates for your patients.

Interventions :

- Use your medical record to determine women due for cancer screening, then have team members contact patients to schedule a health maintenance visit
- Start utilizing a health maintenance visit template or a clinical decision support tool to ensure that women receive appropriate cancer screenings

Avoiding unnecessary procedures: Educate team members and patients about appropriate screening intervals or implement clinical decision support within your record system.

Summary: Unnecessary testing/over-screening increases the total cost of care and increases the risk to the patient of unnecessary cost, pain, and emotional distress due to false positive screening tests. Over-screening would include screening pap more frequently than every three years, screening HPV testing prior to age 30, and mammography more than every two years. Educating staff and patients about appropriate screening intervals and implementing clinical decision support can reduce over-screening.

Interventions :

- Educate all team members about appropriate cancer screening intervals for women
- Have a patient education initiative to inform patients about the risk of over-screening
- Start utilizing a clinical decision support tool within your record to ensure that women receive cancer screenings at appropriate intervals

Practice Improvement Plan

Please use the correct plan based on the target population you selected previously, either young women (between 21 and 26 years old) or on middle-aged women (between 50 to 65 years).

Women age 50–65 years old ONLY

It's time to select a practice improvement strategy. Below are pathways that you can choose from to improve the preventive cancer care of your female patients. Within each pathway there are several interventions. **To complete this module, you will need to select a minimum of one intervention to implement in your practice.**

Cancer screening: Implementing clinical decision support and using team based care to improve cancer screening rates.

Summary: Early detection of cancer or precancerous lesions is vital for the successful treatment of breast and cervical cancer. Appropriate screening includes pap testing every three years (or five years with HPV testing for women 30 and over), and screening mammography every two years. Empowering team members to help ensure that patients receive needed screening and implementing decision support within your practice, can improve screening rates for your patients.

Interventions :

- Implement standing orders for screening mammography
- Use your medical record to determine women due for cancer screening, then have team members contact patients to schedule a health maintenance visit
- Start utilizing a health maintenance visit template or a clinical decision support tool to ensure that women receive appropriate cancer screenings

Avoiding unnecessary procedures: Educate team members and patients about appropriate screening intervals or implement clinical decision support within your record system.

Summary: Unnecessary testing/over-screening increases the total cost of care and increases the risk to the patient of unnecessary cost, pain, and emotional distress due to false positive screening tests. Over-screening would include screening pap more frequently than every three years, screening HPV testing prior to age 30, and mammography more than every two years. Educating staff and patients about appropriate screening intervals and implementing clinical decision support can reduce over-screening.

Interventions :

- Educate all team members about appropriate cancer screening intervals for women
- Have a patient education initiative to inform patients about the risk of over-screening
- Start utilizing a clinical decision support tool within your record to ensure that women receive cancer screenings at appropriate intervals