

Presenter Information

Poster Title: Education and Reminders to Increase Cervical Cancer Screening: An Evidence-Based Practice Project

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Abstract

Purpose of the Project: The purpose of this EBP project in progress is to increase cervical cancer screening (CCS) rates in the underserved population at a federally qualified health center (FQHC) with six clinic locations in Northwest Indiana; the primary site is a clinic in Porter County.

Background and significance: Cervical cancer is the second most common cancer in women worldwide. Regular screening can find abnormalities early and prevent morbidity and mortality. But CCS rates are low in the U.S. and at the project site. A comprehensive review of the literature was conducted to find evidence-based interventions to increase CCS rates. Language-specific, mailed education increased uptake of CCS significantly in underserved populations (Duffy et al., 2017; Jayasekara, 2020). Also, phone and email reminders significantly increased uptake of cancer screening, and multiple interventions were more effective than single ones. (Duffy et al., 2017; Muller et al., 2009).

Method/procedures: Participants include female patients due for CCS. Patients of all six clinics received an educational email on CCS, Pap and HPV testing as well as an appointment

reminder. Two weeks after the initial email, patients who had not yet scheduled an appointment received a reminder email. Starting five weeks after the reminder email, phone calls were made to patients whose usual provider is at the primary site who have not made an appointment, which is a pilot site. Other patients of that clinic received another email reminder. For patients who have identified Spanish as the preferred language, emails and phone calls were in Spanish.

Major outcomes: Data on CCS completed are being collected from patient charts every two weeks for five months after the initial email is sent; differences from pre-intervention and historical groups will be assessed using descriptive statistics. The primary outcome of this project will be an increase in CCS uptake in women due for screening receiving care at the primary site. A secondary outcome will be CCS uptake in women receiving care at the other five locations of the FQHC.

Conclusions and implications: Preliminary outcome data show that the interventions will increase CCS uptake at the FQHC. As of four months from the first email being sent, 67 of the 470 participants in the pilot group, who received two emails and one phone call, have completed CCS. Once data collection is completed, statistical analysis will compare the effectiveness of each intervention. If the project increases CCS rates, the recommendation will be to continue the phone call and email interventions on an annual basis at all six clinics.

References

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- Muller, D., Logan, J., Dorr, D., Mosen, D. (2009). The effectiveness of a secure email reminder system for colorectal cancer screening. *AMIA 2009 Symposium Proceedings*, 457-461.