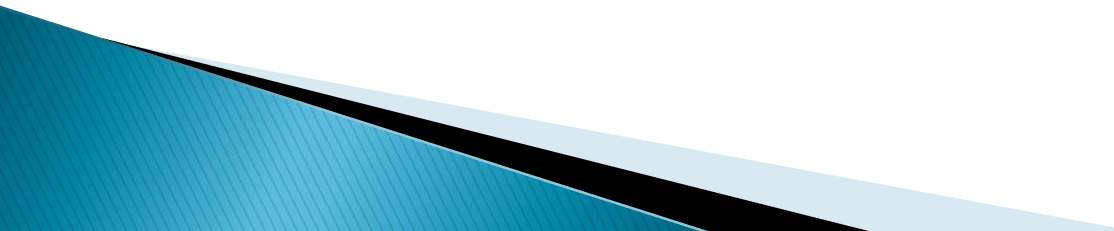


Quality Improvement: Screening Tools

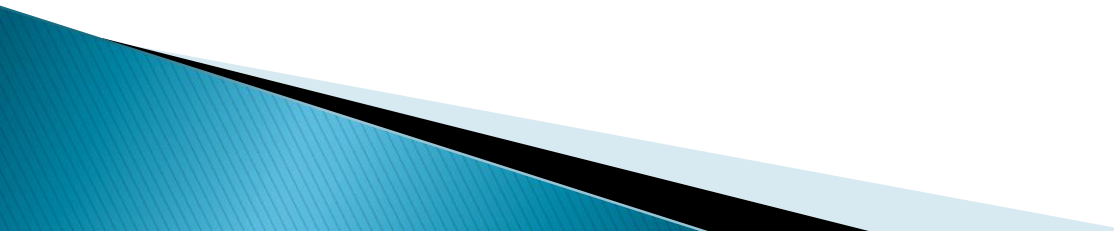
Allana Hearn, Moses Li, Kaitlin Kirkpatrick



The project

- ▶ We worked with Downtown Community Health Centre to streamline and update various screening tools
 - ▶ Researched health promotion, benefits and consequences of screening in vulnerable populations and health literacy
 - ▶ Created clinician and patient educational tools
 - ▶ Presented to Quality Improvement Committee at DCHC
- 

Health Promotion: Screening

- ▶ Screening as health promotion strategy
 - ▶ Benefits and Risks
 - ▶ Efficacy
 - Sensitivity vs specificity
 - Outcome measures
- 

Frameworks

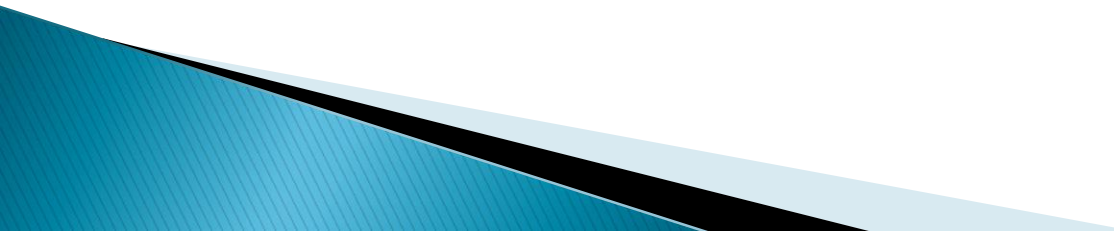
Patient

- ▶ Provide education, facilitate informed consent
- ▶ Provide patient with resources within the community
- ▶ Consideration of health literacy Concise delivery of evidence-based facts

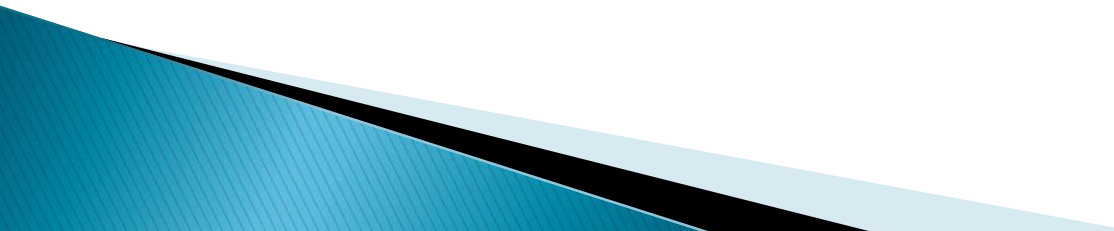
Clinician

- ▶ Provide up to date information on current standards
- ▶ Provide answers for common patient questions
- ▶ Implications for nursing practice and workload


Depression – PHQ9 + PHQ2

- ▶ Controversy of universal screening
 - ▶ Lack of evidence showing screening significantly reduces outcomes
 - ▶ Lack of evidence that is generalizable to the DTES
- 

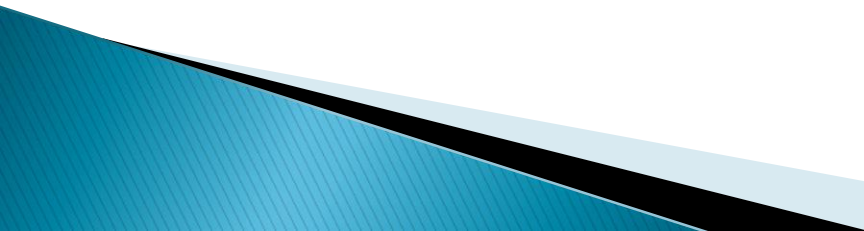
Prostate – PSA + DRE

- ▶ Lack of evidence showing screening significantly reduces mortality
 - ▶ Burden of treatment
 - ▶ Trauma-informed care
 - ▶ Who and when to screen
- 

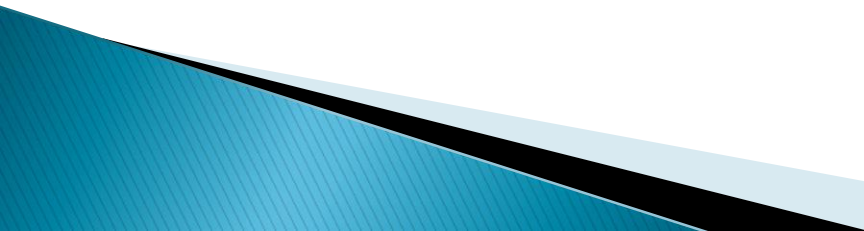
Cardiovascular Risk – HTN and Framingham

- ▶ Standardizing Framingham screening throughout clinic
 - ▶ Ensuring proper documentation of BP measurements and follow-up protocol
 - ▶ Discussing lifestyle education through a harm reduction lens
 - ▶ Use of “cardiovascular age” as a way to engage patients
- 

Cervical Cancer – Pap Testing

- ▶ Want to provide common terminology used in lab results report
 - ▶ Inform who and when screening should/should not take place
 - Hysterectomy
 - Following HPV vaccine
 - Not sexually active
- 

Health Promotion Calendar

- ▶ Way to promote screening within the DCHC through monthly campaigns
 - ▶ Used national and provincial health promotion days/weeks to guide planning
 - Use pre-existing social marketing campaigns to enhance chosen screening months
 - ▶ Hope to implement calendar within DCHC in the near future
 - Next steps – creating/gathering resources and generating staff awareness
- 

Moving Forward

- ▶ Framework can be applied to future topics of interest
 - Colorectal cancer
 - Breast cancer
- ▶ Working on algorithm for workflow
 - Need staff input and feedback