Using Screening Activity Report (SAR) Data to Increase Cancer Screening Rates

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Background

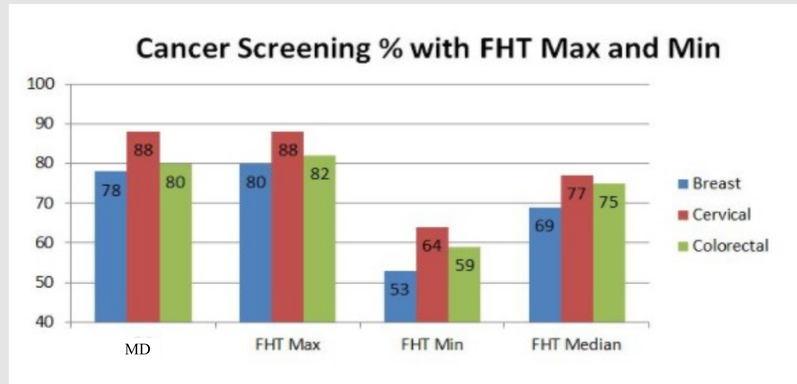
- At SETFHT, physicians who reviewed their SAR reports regularly, had higher cancer screening rates than the FHT average
- Rates were 14% higher than the FHT mean of 74% for cervical screening rates, and 10% higher than the FHT mean of 70% for colorectal screening rates
- All 23 doctors at SETFHT have access to SAR cancer screening data
- SAR data is currently more accurate than our EMR data
- Purpose: to utilize SAR data to increase cancer screening rates

Objectives

- To increase cancer screening rates by using SAR data
- To increase physician engagement using SAR reports

Methods

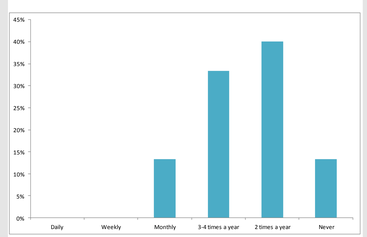
- Assigned Quality Improvement-Information Management Coordinator to be SAR delegate for 23 MD's
- Every 3 months, provided each MD monthly screening rates compared to the FHT median and the data of the highest and lowest performers (with no identifiers)
- Asked MD's about frequency of using SAR reports before and after data was provided to them



Results

Before

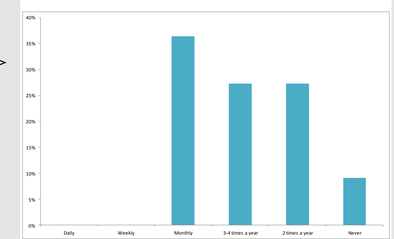
15/23 responses

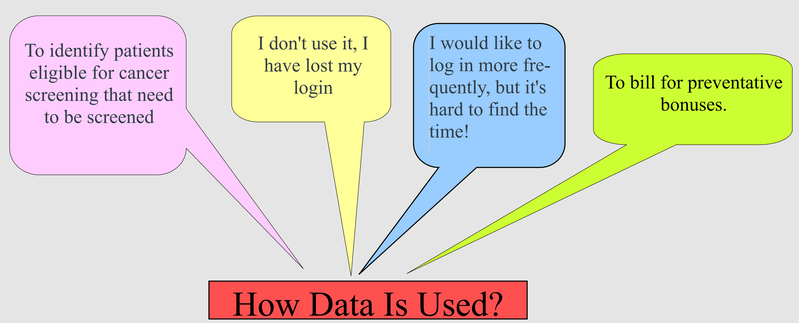


SAR data provided

After

11/23 responses





Conclusion

- Sending MD's up-to-date cancer screening rates compared to the highest and lowest rates and the mean, increased how often the SAR reports were reviewed
- Time constraints and access seem to be a barrier to checking SAR regularly
- Conclusions regarding cancer screening rates will be summarized by the end of October using group SAR data

Future QI

- Because physicians have identified time constraints as a barrier to regularly checking SAR reports, it is suggested that a delegate review the reports equally and frequently. This could lead to improved cancer screening rates.
- Receiving group SAR data will be helpful to observe the impact of quality improvement projects on cancer screening rates