Cancer Prevention and Treatment

A perspective from the Chronic Care Initiative

June 18, 2008

Cancer Prevention and Treatment

- Share successful system changes for prevention of cancer.
- In a busy clinic, improvement of all screenings must be addressed. How do we facilitate this screening across types of cancer.
- Methods for testing and implementing change ideas for integration into a busy practice.

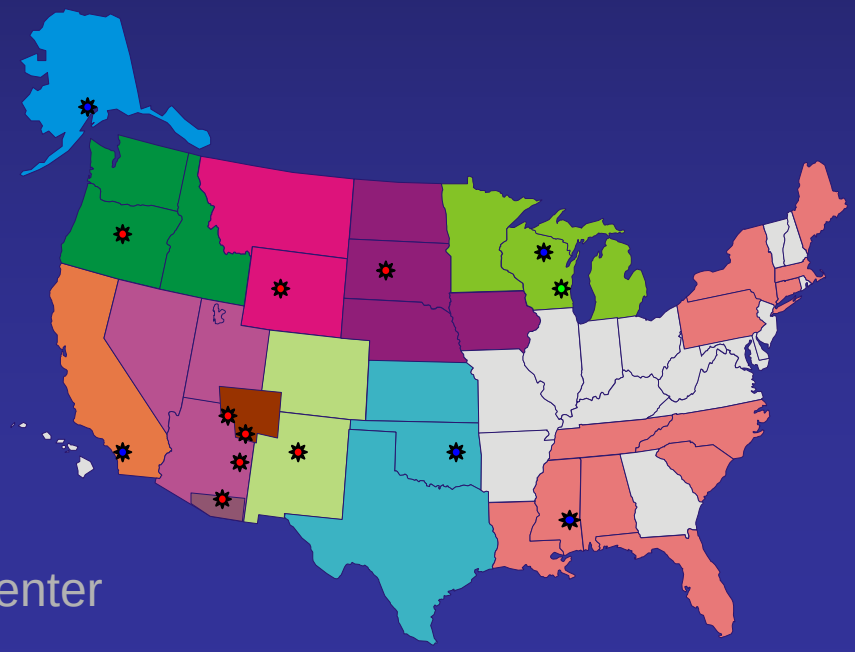
Chronic Care Collaborative
Pilot Sites

The eight Federal pilot sites are:

- Gallup Indian Medical Center
- Albuquerque Service Unit
- Warm Springs Service Unit
- Chinle Comprehensive Health Care Center
- Wind River Service Unit
- Sells Service Unit
- Whiteriver Service Unit
- Rapid City Service Unit

The five Tribal sites are:

- Indian Health Council, Inc.
- Cherokee Nation Health Services
- The Choctaw Health Center
- Eastern Aleutian Tribe
- Forest County Potawatomi Health & Wellness Center



And the Urban program is:

- The Gerald L. Ignace Indian Health Center

Is there time for Management of Pts with Chronic Conditions in primary care?

Care according to guidelines of 10 chronic diseases:

- If everyone in the patient panel was "controlled"
  - 3.5 hours per work day
- If add some uncontrolled cases
  - 6.7 hours per work day

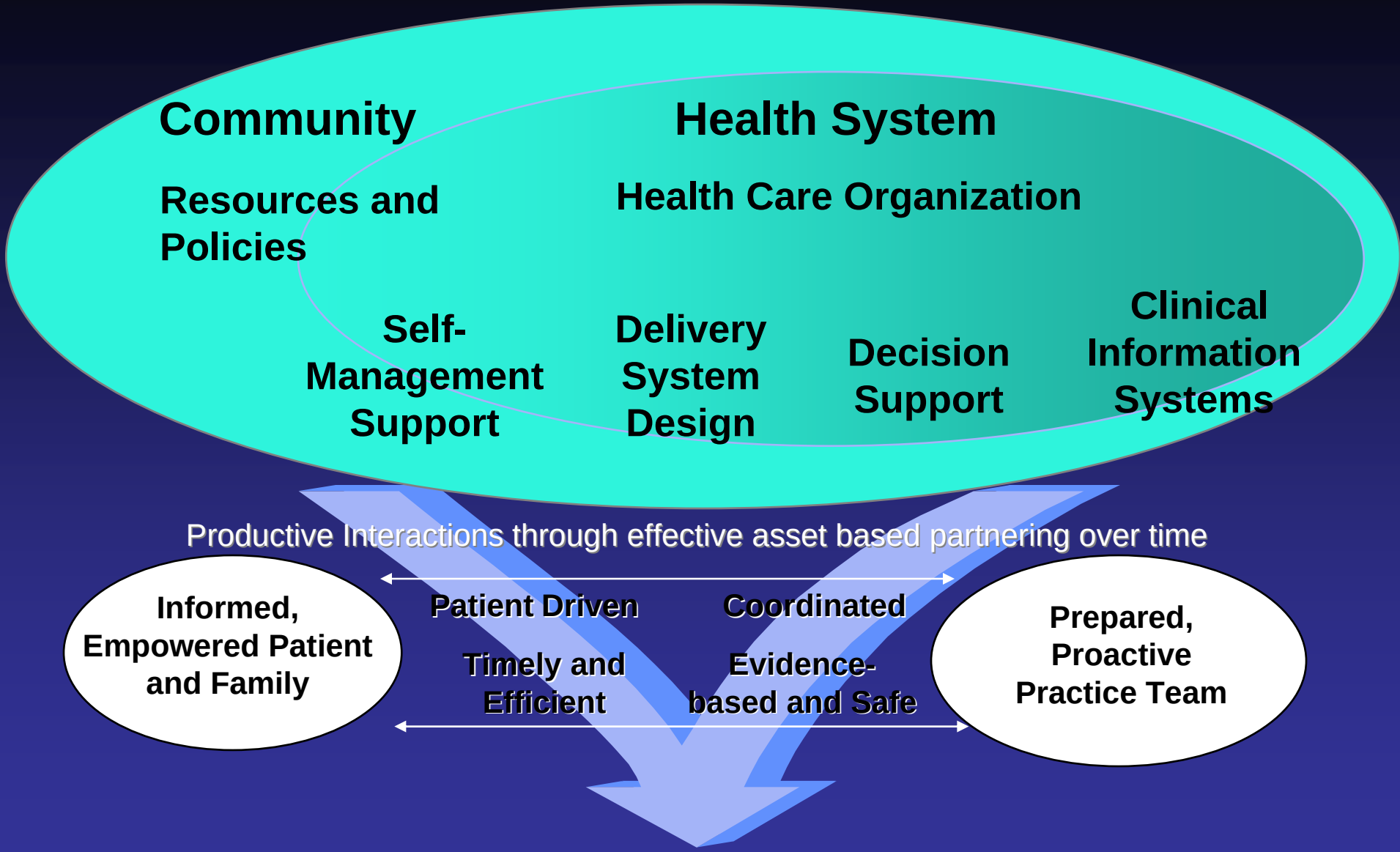
Ann Fam Med 2005;3(3):209-214

Is there time for Management of Pts with Chronic Conditions in primary care?

Adjust for the prevalence of the chronic conditions in AI / AN:

- 4.5 hours of every day spent on these 10 chronic diseases.
- 9.4 hours of every day if some of the diseases are uncontrolled.

Care Model

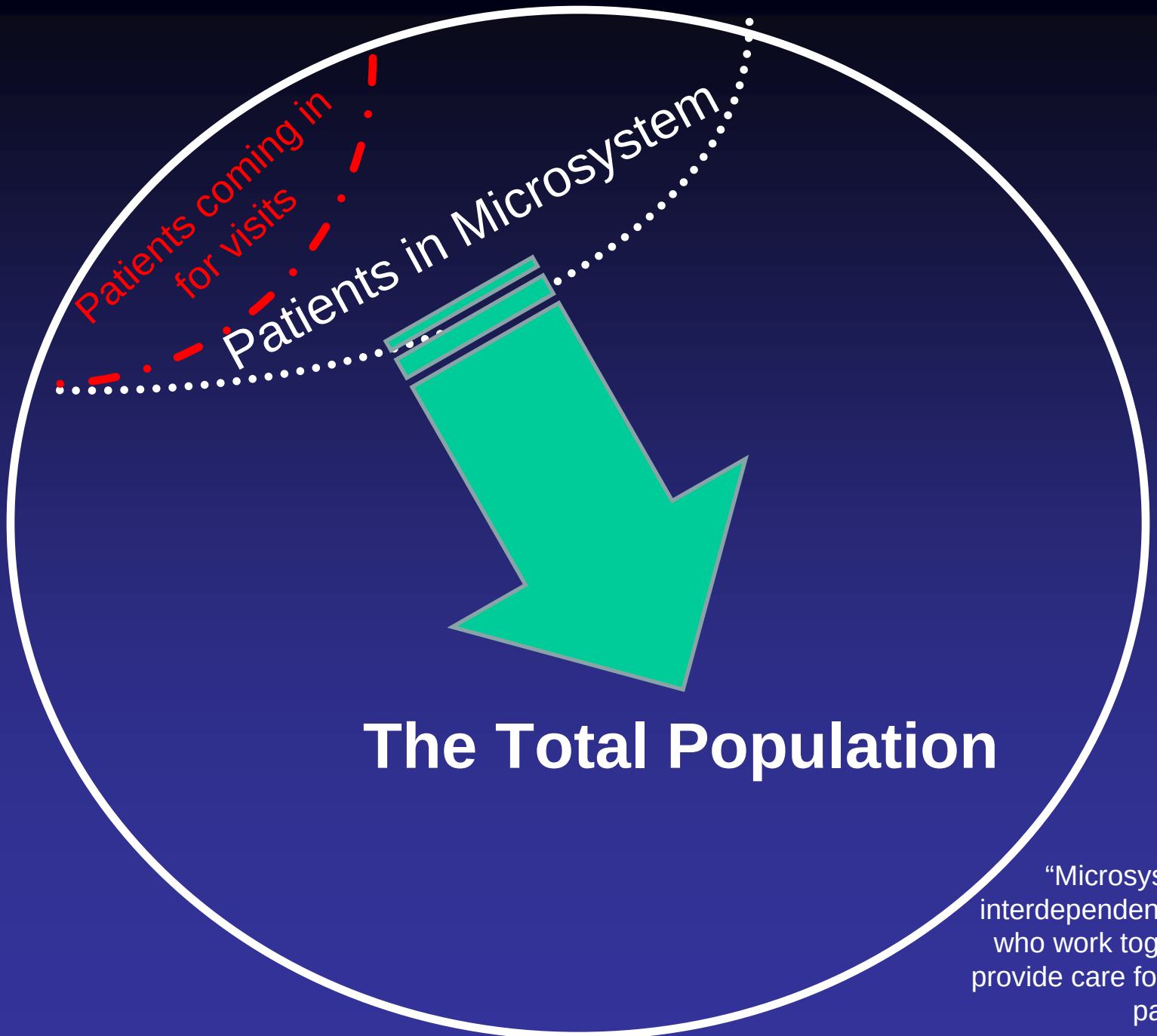


Improved achievement of patient and community goals

Key Changes in Planned Care

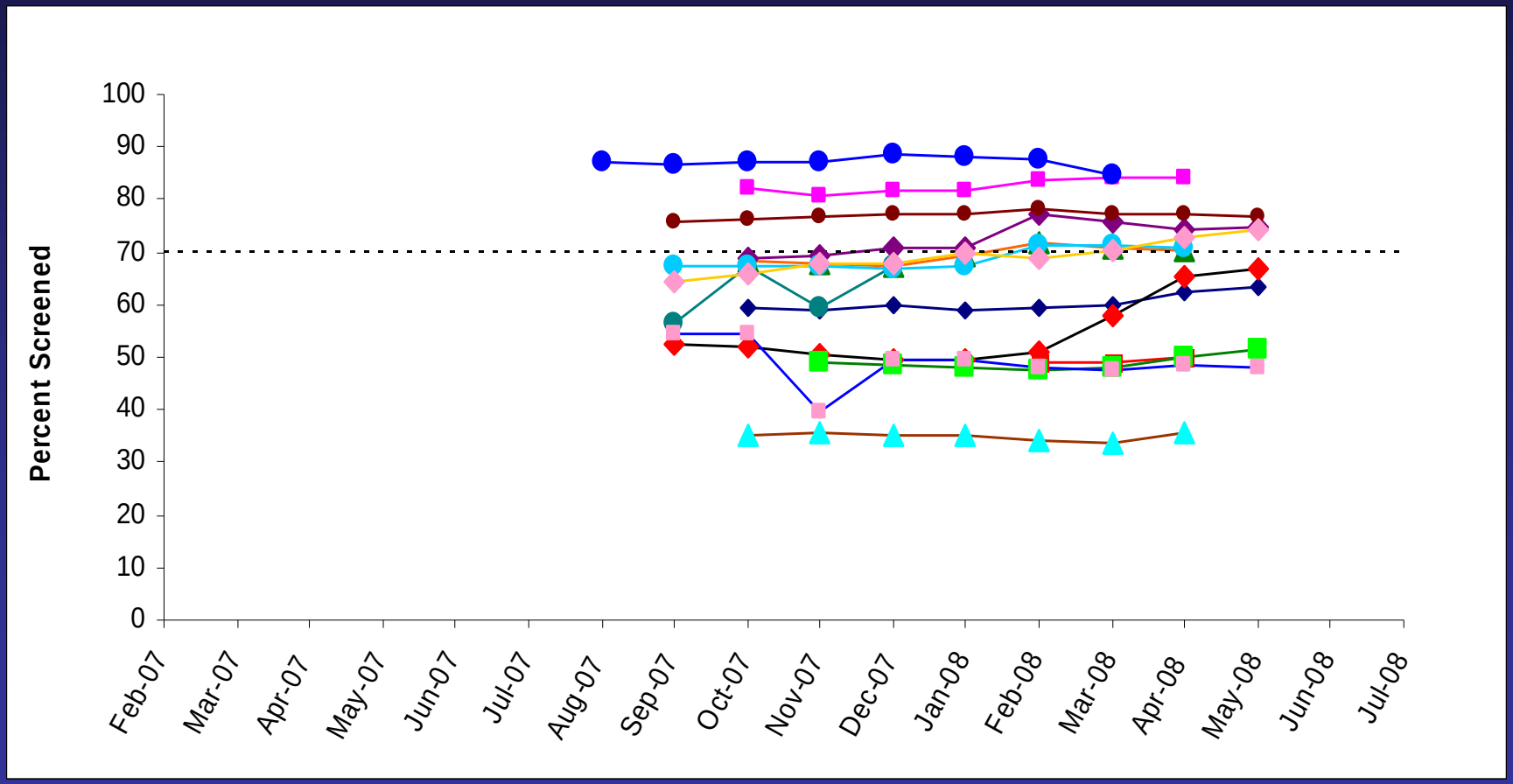
(some)

Identify and develop the Care Team
Involve and engage the community
Empanel patients
Optimize the roles of the care team ("*Everyone works to the top of licensure")*
Make quality-related data available to all (transparency)
Pre-visit Planning: huddles, previsit calls
Use of CIS for reminders, prompts, queries
Build capacity in the staff to support improvement (training in the Model for Improvement, Data management, etc.)
Care/Case management
Include CHR, PHN in changes to patient care and management

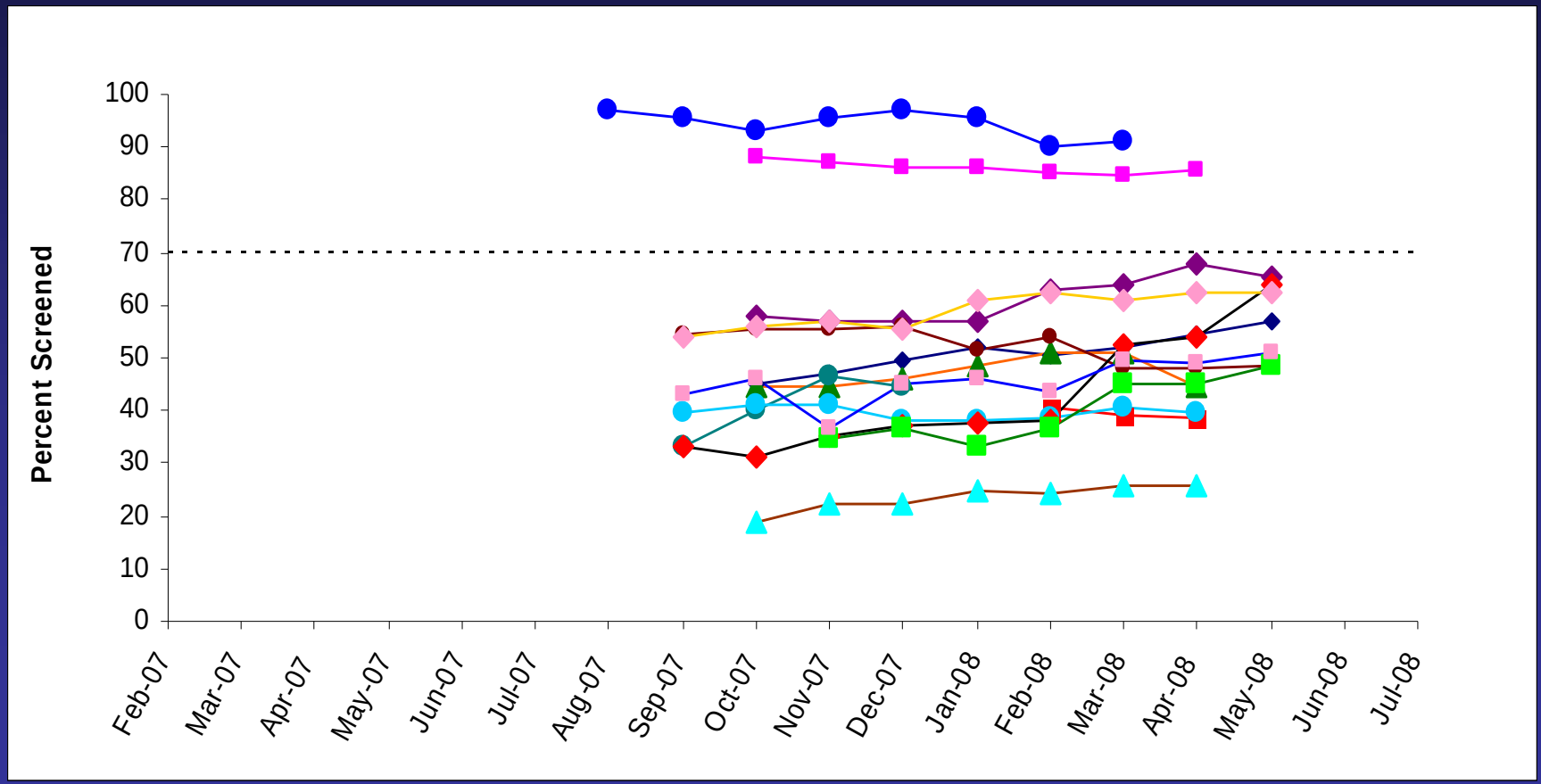


"Microsystem": small, interdependent groups of people who work together regularly to provide care for specific groups of patients

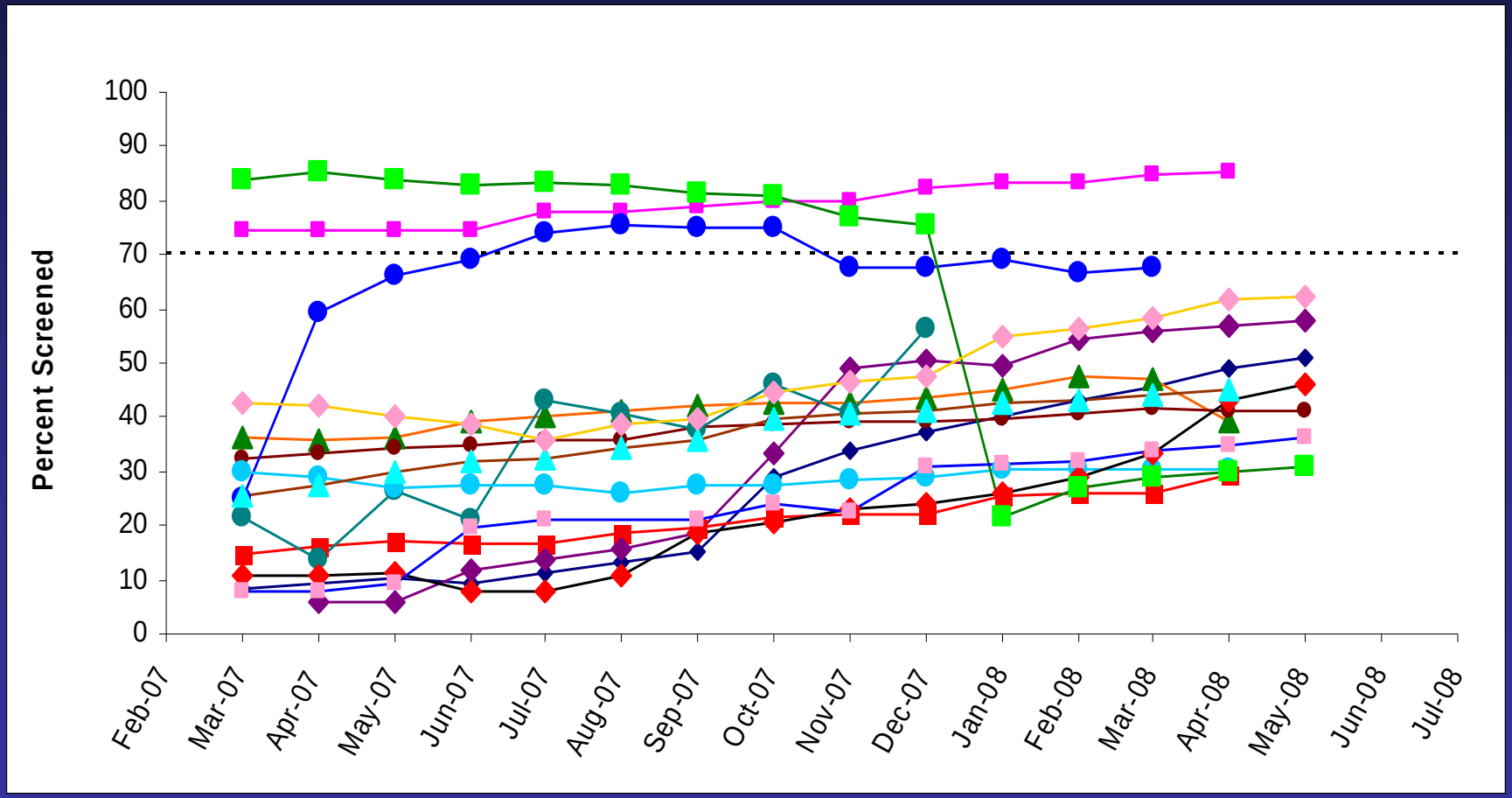
Cervical Cancer Screening



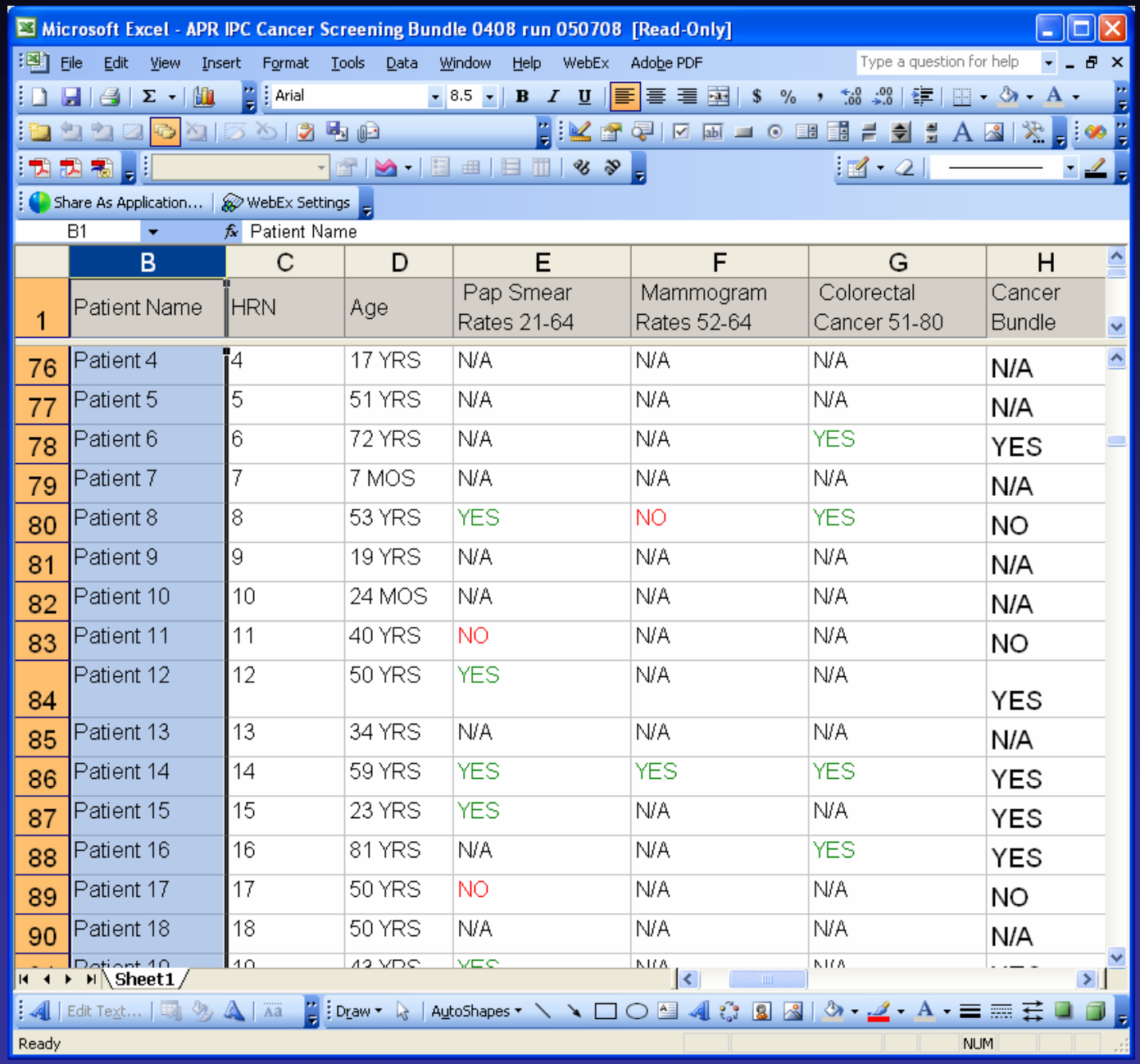
Breast Cancer Screening



Colorectal Cancer Screening

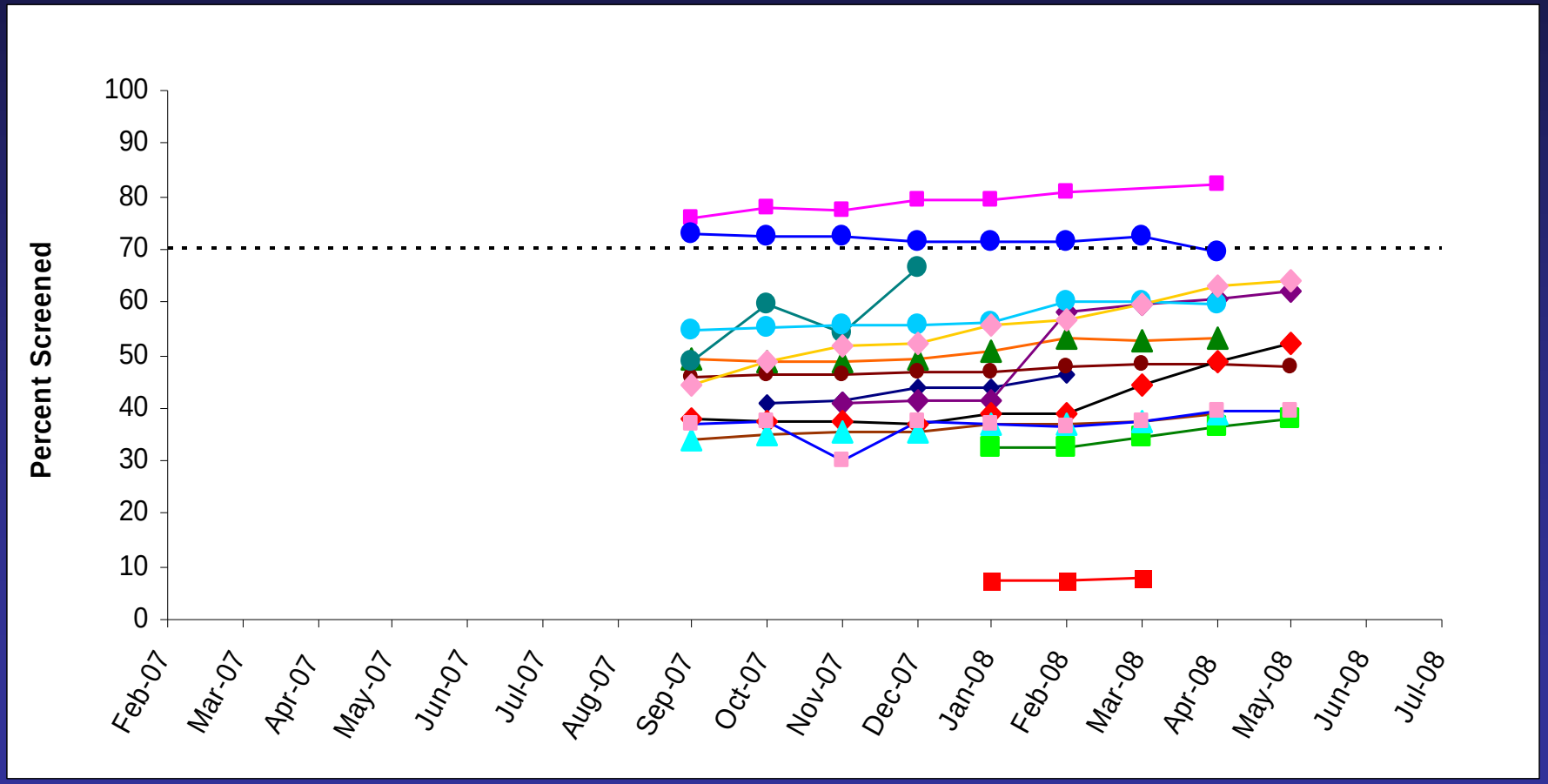


Cancer Bundle



	B	C	D	E	F	G	H
1	Patient Name	HRN	Age	Pap Smear Rates 21-64	Mammogram Rates 52-64	Colorectal Cancer 51-80	Cancer Bundle
76	Patient 4	4	17 YRS	N/A	N/A	N/A	N/A
77	Patient 5	5	51 YRS	N/A	N/A	N/A	N/A
78	Patient 6	6	72 YRS	N/A	N/A	YES	YES
79	Patient 7	7	7 MOS	N/A	N/A	N/A	N/A
80	Patient 8	8	53 YRS	YES	NO	YES	NO
81	Patient 9	9	19 YRS	N/A	N/A	N/A	N/A
82	Patient 10	10	24 MOS	N/A	N/A	N/A	N/A
83	Patient 11	11	40 YRS	NO	N/A	N/A	NO
84	Patient 12	12	50 YRS	YES	N/A	N/A	YES
85	Patient 13	13	34 YRS	N/A	N/A	N/A	N/A
86	Patient 14	14	59 YRS	YES	YES	YES	YES
87	Patient 15	15	23 YRS	YES	N/A	N/A	YES
88	Patient 16	16	81 YRS	N/A	N/A	YES	YES
89	Patient 17	17	50 YRS	NO	N/A	N/A	NO
90	Patient 18	18	50 YRS	N/A	N/A	N/A	N/A

Cancer Screening Bundle

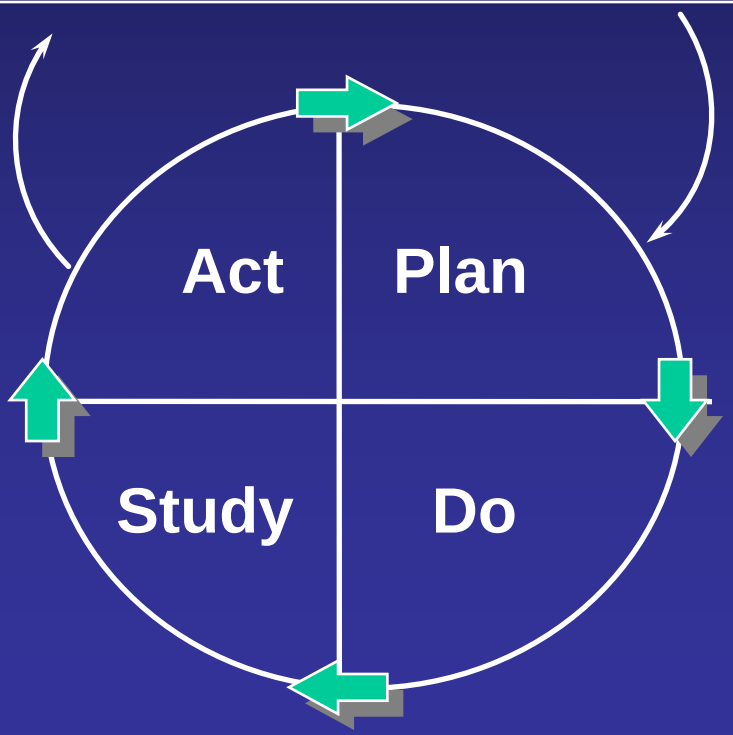


Model for Improvement

What are we trying to accomplish?

How will we know that a change is an improvement?

What change can we make that will result in improvement?



Testing Changes

Model for Improvement

What are we trying to accomplish?

How will we know that a change is an improvement?

What change can we make that will result in improvement?

DATA and Learning

Adaptation and follow-up Tests

Wide-scale tests of adaptations

Implementation of adapted guideline
(Large cost of failure)

Changes That Result in Improvement in Practice

Very small scale test
(Small Cost of failure)