Brighton Quinte West

Family Health Team

in collaboration with:
Central East Regional Cancer Program
in partnership with Cancer Care Ontario

myCANCERiQ *in primary care*

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Background

The Colborne Medical Clinic is led by Dr. Iris Noland, who has been in active practice since 1980. The clinic, which is part of the Brighton Quinte West Family Health Team, serves over 1,100 patients and is located in a rural area.
MyCancerIQ is a website designed by Cancer Care Ontario (CCO), the provincial agency which delivers Cancer Care in the province of Ontario, Canada. By completing a short lifestyle survey, the website helps users understand their risk for cancer and what they can do to help lower that risk

Aim

To promote cancer screening and prevention by integrating MyCancerIQ into a busy primary care office supporting education and developing individualized health improvement goals.

Team

The working group consisted of the office staff, patient advisors, IT support and the Regional Cancer Program.

Measures

Cancer screening rates in all modalities increased by ~10% on average, see figure 1.

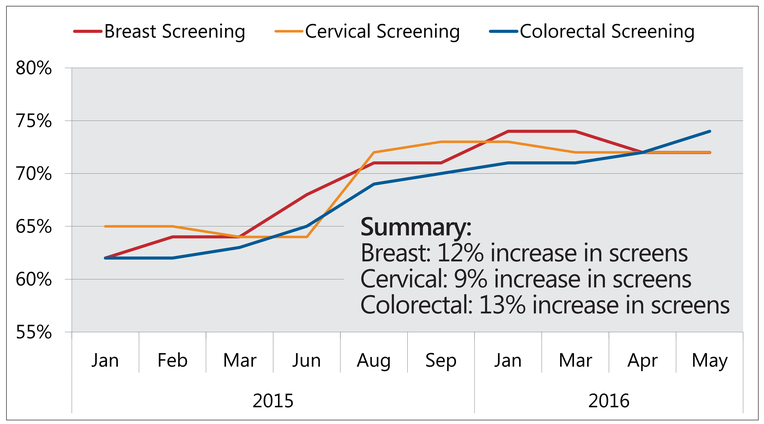


Figure 1: Cancer Screening Rates, all modalities

Follow-up survey:

Definitely (53%) and Probably (27%) likely to share cancer screening information with their friends & family

Follow-up survey:

Definitely (40%) and Probably (53%) likely to modify their risk factors

Project Design/Strategy

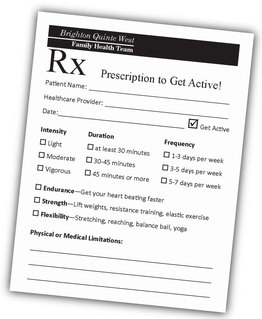
The working group performed mock trials integrating the MyCancerIQ survey into office flow. Community resources were inventoried and resources were created for specific gap areas such as a "Prescription to Get Active" notepad. Data collection and tracking tools were incorporated into the EMR to track patient participation and outcomes of the intervention. A follow-up survey was administered to elicit patient experience feedback.

High Level Workflow

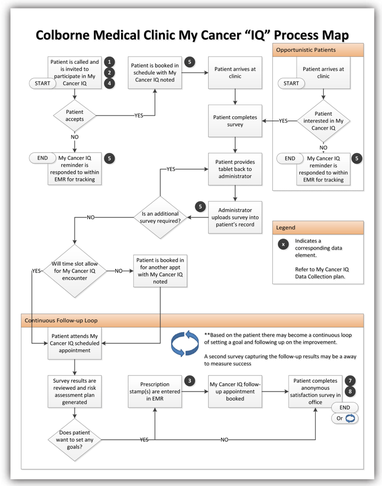
Patient arrives at clinic & completes survey on tablet while in the patient waiting area

Survey results are uploaded from tablet into EMR by office administrator

Patient meets with RN or RN-EC to review results, set lifestyle goals and identify community resources appropriate to goal



Prescription to Get Active



Process Map & Data Collection Points

Lessons Learned

- Patients were receptive to individualized education provided by MyCancerIQ and professional staff.
- Tablet technology was well accepted by this demographic with only 12 % of respondents answered Poor or Fair regarding tablet use to complete the MyCancerIQ survey.
- EMR 'stamps' enabled standardized counseling appointments, documentation of resources provided and goals set.
- It was important to focus on this project as a major process change and take each action in stride, rather than rushing through the implementation.

Next Steps

Scale up focusing on younger women in cervical screening target group with the technical skills and potential to influence lifestyle of family and friends.