



Innovative Integrated Cancer Screening Day: A Wellness Day for Women... By Women!

Mary Pat Cannon, RN, BScN; Catherine Therrien, RN, BA, BScN; Anna MacLean Jamieson, RN, BScN, PHCNP
Peterborough Public Health, The Peterborough Clinic, Peterborough Family Health Team
Peterborough, Ontario, Canada



Introduction / Background

Self-reported breast, cervical and colorectal cancer screening rates are below provincial targets for Peterborough County and City.¹

Research on how to reach the under- and never-screened suggests local customized interventions that address specific barriers within the local context.^{2,5}

The Diffusion of Innovations Theory (Everett Rogers) identifies five qualities that determine the success of an innovation.^{3,4}

Objectives

To gain additional insight and knowledge in how to engage the under- and never-screened populations to participate in cancer screening programs using an innovative approach.

To identify champions and establish partnerships with Primary Care Family Health Teams, Ontario Breast Screening Program (OBSP) sites, Community Clinics and Public Health Organizations.

To explore the evolution of interdisciplinary leadership within effective partnerships.

Method of Implementation

- Interdisciplinary planning team
- Electronic Medical Records (EMR) eligibility
- Social context relevant to women
- Evaluation surveys and interviews

Results

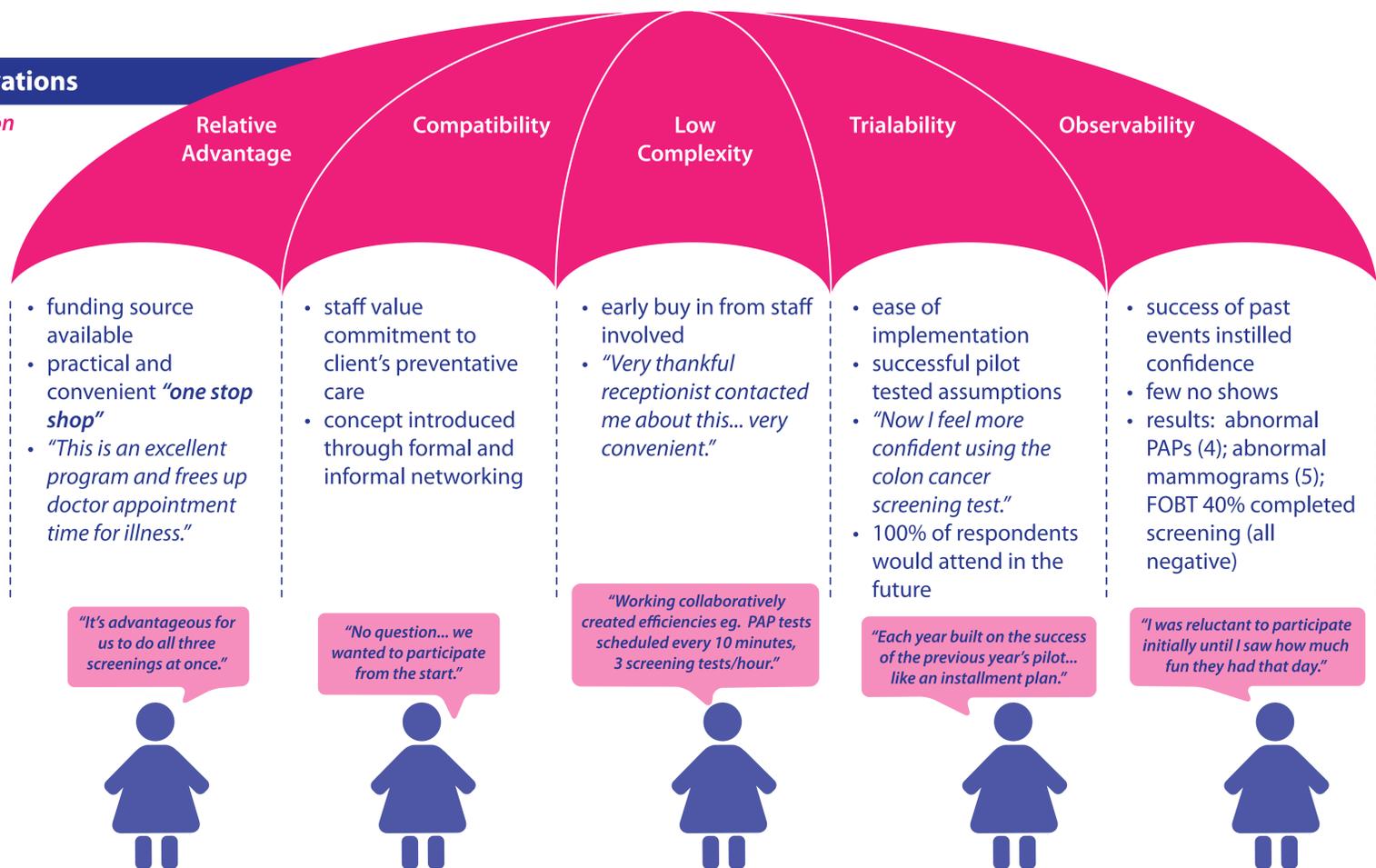
	Number of Underscreened Reached	PAPs	Mammograms	FOBT Kits Distributed
2015	145 Women (151 confirmed = 4% no show)	145	49	38
2014	95 Women (100 confirmed = 5% no show)	95	34	34
2012	55 Women (62 confirmed = 8% no show)	55	29	38

Expansion of Interdisciplinary Partnerships (Numbers)

	Family Health Team Clinics	Nurse Practitioners	Receptionists	Public Health Nurses	OBSP Sites
2015	4	10	7	4	2
2014	1	5	3	3	1
2012	0.25	5	3	3	1

Diffusion of Innovations

Conditions For Adoption



Future Directions:

- Obtain consistent buy-in and support across Peterborough Family Health Team
- Utilize peer to peer champions for recruitment
- Provide tailored support for each new practice setting
- Expand target age group for cervical screening to include women 35-49 years of age
- Utilize EMR to increase breast screening appointments to have two OBSP sites running to capacity

Conclusions:

Findings suggest that local customized interventions that address specific barriers within the local context can increase women's participation in cancer screening programs.

Implementation across other Peterborough Family Health Team sites allows this innovative approach to evolve to become a better fit for the needs of the partnership, participants and outreach to the most vulnerable.

Demonstrates public health's role in scaling up to regional level, performance monitoring and knowledge transfer.

Literature Cited / References:

1. Peterborough County-City Health Unit Brief Analysis. Internal Document. 2013.
2. Gesink et al.: Who are the under- and never-screened for cancer in Ontario: a qualitative investigation. BMC Public Health 2014 14:495.
3. Greenhalgh, Trisha et al. "Diffusion of Innovations in Service Organizations: Systematic Review and Recommendations." The Milbank Quarterly 82.4 (2004): 581-629. PMC. Web. 22 Mar. 2016.
4. Les Robinson: Enabling Change: A summary of Diffusion of Innovations.
5. Grunfeld et al.: Improving chronic disease prevention and screening in primary care: results of the BETTER pragmatic cluster randomized controlled trial. BMC Family Practice 2013 14:175.

Acknowledgements:

This project is supported by the Central East Regional Cancer Program in partnership with Cancer Care Ontario

