

Breast In The West:

Increasing the number of GP referrals to BreastScreen Sydney West

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Case for change

One in eight Australian women will be diagnosed with breast cancer in their lifetime. Fewer than 1 in 2 women within Western Sydney Local Health District (WSLHD) are currently having regular mammograms. In fact, this geographical area has one of the lowest BreastScreen participation rates for target aged women in NSW.

GPs, as primary providers of health related information, are infrequently referring women for mammograms. BreastScreen Information System (BIS) reports indicate that currently only around 7-10% of women making a mammogram booking each month are prompted by their GP to do so.

Goal

To increase the early detection of breast cancer through increased uptake of mammograms amongst target aged women in Western Sydney.

Objectives

To increase the number of GP referrals (currently around 7%) to BreastScreen Sydney West (BSSW) by up to 15% within the target age range of 50-74 years across WSLHD by September 2015.

Method

Methods used in this project to identify current status, investigate possible causes and determine solutions were:

- Compilation of CINSW data for review and analysis
- Client stories and interviews
- BreastScreen booking staff tagalongs and interviews
- Client focus groups
- GP interviews
- Mapping of GP referral patterns across WSLHD



GP workshop held in March 2015



Diagnostics

Key findings:

1. GPs not referring to BreastScreen at all or referring very infrequently. Seven to ten per cent of average monthly bookings were attributed to GP referrals.
2. No standardised process utilised by bookings staff for determining why a woman is calling to make a mammogram appointment
3. Confusion among women about recommended screening interval and age for mammograms with BreastScreen

Planning & implementing solutions

Solutions planned in response to key findings include:

1. Development of an education package for GPs
2. Engagement of champion GPs to inform best practice amongst other GPs
3. Delivery of education sessions in workplace and community groups
4. Placement of posters in GP surgeries, community notice boards, and in BreastScreen Sydney West clinics
5. Installation of dedicated phone line for GPs
6. Development of an information pack for first time screeners
7. Delivery of training for BreastScreen bookings staff
8. Trialling of a system to enable the recording of multiple sources of referral

Results

1. 75 education packages developed and distributed to GPs
2. Engaged 3 champion GPs who have been involved in organising 4 workshops for other GPs and women, and discussing BreastScreen on the phone with GPs
3. From March 2014 - March 2015, education sessions have been delivered in 5 workplaces, and for 40 community groups
4. GP phone line has been installed and posters advertising the line were distributed to 910 GPs within WSLHD
5. 45 GPs attended an education workshop held in March 2015. This 3 hour workshop was assessed by the Royal Australian College of General Practitioners and allocated 6 Continuing Professional Development points
6. The average monthly bookings attributed to GP referrals has increased from a low of 6.4% in October 2013 to 13.3% in March 2015



Sustaining change

A staggered approach to the remaining solutions will occur over 12 months across WSLHD. Success will ultimately be determined by the accurate collection of data by bookings staff. There are strong signs of GP engagement which will facilitate ongoing increases in GP referrals.

Conclusion

Early evaluation has identified that engagement with GPs is challenging but can result in desired outcomes – a noted change from a baseline of 6.4% in October 2013 to 13.3% in March 2015. Ongoing resources and commitment is needed to ensure sustainability.

Project implementation using AIM methodology

1. **Define the change**
 - Western Sydney GPs encourage their patients to participate in regular breast screening
 - GPs increase their referrals to BreastScreen Sydney West

2. **Build agent capacity**
 - Training for 10 bookings staff to ensure data is accurately collected
 - Education session for 45 GPs

3. **Assess the climate**
 - 45 GPs attended education forum and committed to refer women to BreastScreen
 - Evidence based information was provided
 - Enablers and barriers to GP participation were identified

4. **Generate sponsorship**
 - Project Sponsor was identified
 - Clinical Advisory Board (CAB) was regularly updated on the progress of the project
 - Clinicians demonstrated their commitment to the project through involvement in GP education

5. **Determine change approach**
 - The change process was developed through consultation at education sessions which were constantly reinforced through ongoing communication including the GP hotline

6. **Develop target readiness**
 - GPs informed of current screening situation (2nd lowest in NSW)
 - GPs given information to give to patients who are resistant to have regular mammograms

7. **Build communication plan**
 - Communication strategies were identified for GPs to keep them informed and engaged, including the GP hotline

10. **Prioritise action**
 - An evaluation mechanism was established
 - A 2nd GP education forum is planned to provide an update on project outcomes and identify future directions

9. **Create cultural fit**
 - GP hotline installed to address GP time constraints
 - Regular checks with GPs regarding resource needs
 - GP visits conducted as required

8. **Develop reinforcement strategy**
 - Progress updates and communication to GPs have increased the motivation to refer women to BreastScreen.
 - Laminated reminder cards for bookings staff will also be developed

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