

# Increasing Cervical Pap Smear Screening Rate for HIV Positive Women

8<sup>th</sup> Annual Iris House Summit – May 6, 2013

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Aviva Cantor  
Harlem United Community Aids Center, Inc**

# Harlem United - Overview

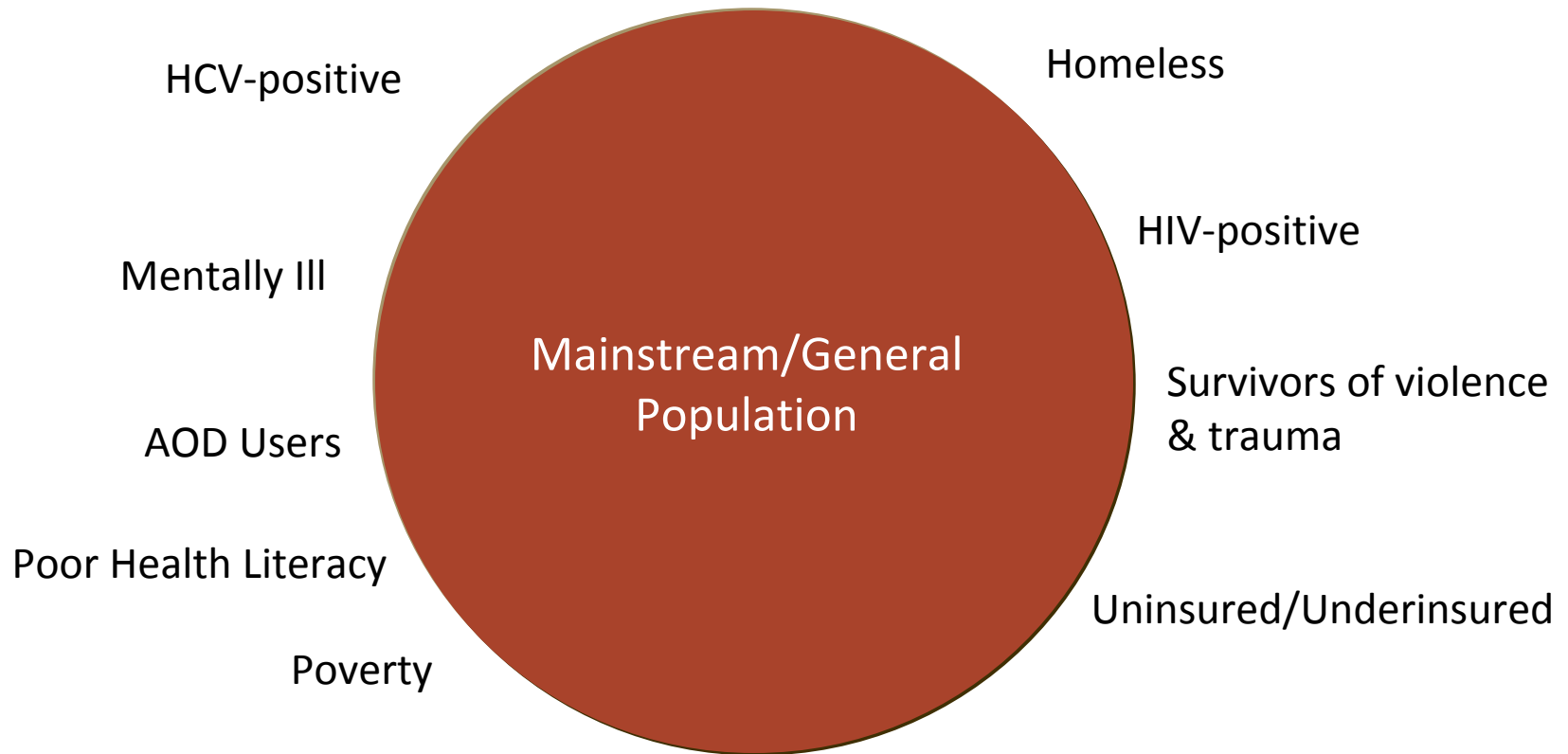
## Past

- Founded at height of first phase of AIDS epidemic: 1988
- Specifically to serve people living with HIV/AIDS (PLWH/As) who were homeless and/or suffering from mental illness and/or substance use.
- Agency of last resort for medically-underserved communities of color in Harlem.
- Part of community-based movement to care for PLWH/As:
  - Founded to address lack of response from established providers;
  - Responding to the unique personal, social, and institutional barriers to care in Harlem

## Present

- In July 2007, Harlem United received a federally-qualified health center for the homeless (FQHC-H) designation from the Health Resources Services Administration (HRSA)
  - The FQHC-H designation allows HU to expand services to homeless people in Central and East Harlem communities who are predominantly African American and Latino(a) adults, and have histories of substance use and/or mental illness.
- In 2012, Harlem United received Patient-Centered Medical Home (PCMH) level 3 accreditation

# Harlem United - Population Served



To best meet the needs of a complex yet chaotic and vulnerable population, Harlem United has developed a comprehensive interdisciplinary system of care and support, distinguishing us from community health centers with a multitude of services delivered in a fragmented system.

# Harlem United - Organizational Structure

## Community Health Services

Community Based  
HIV/STI/HCV Screening

Access to Care

Drug User Health Service  
(Syringe Access, Harm  
Reduction, Recovery  
Readiness)

Black Men's Initiative –  
integrated interventions  
for MSM of color

## Integrated HIV Services

Adult Day Health  
Centers

Food & Nutrition

Supportive Housing  
(Women's Housing,  
Transitional Housing,  
Congregate, etc. )

Health Home

Family Support

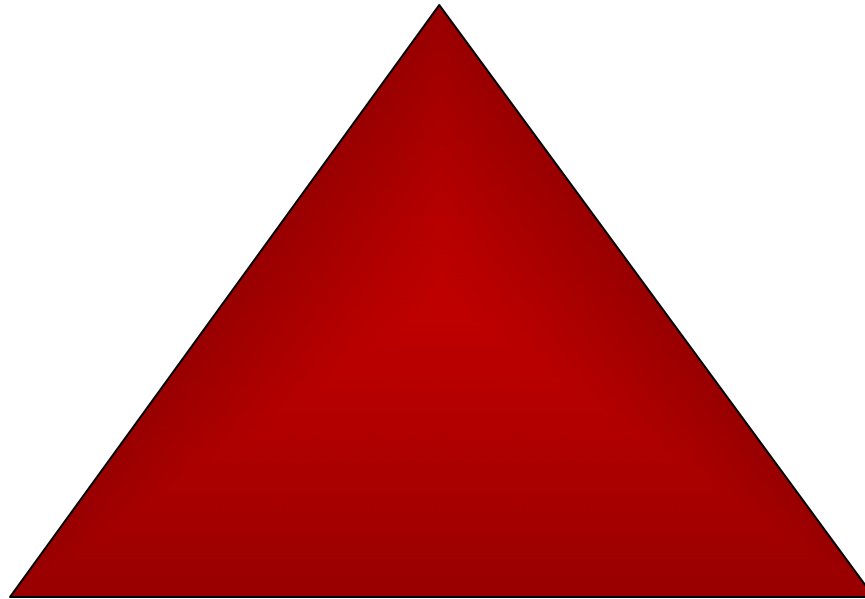
Holistic Provider-Led, Patient-  
Centered Primary Care and  
Dental Services

Behavioral Health Services

Patient Navigation/Case  
Management Support

# Harlem United - Management Triad

Continuous Quality Improvement (CQI):  
Program-level assessment of service  
delivery

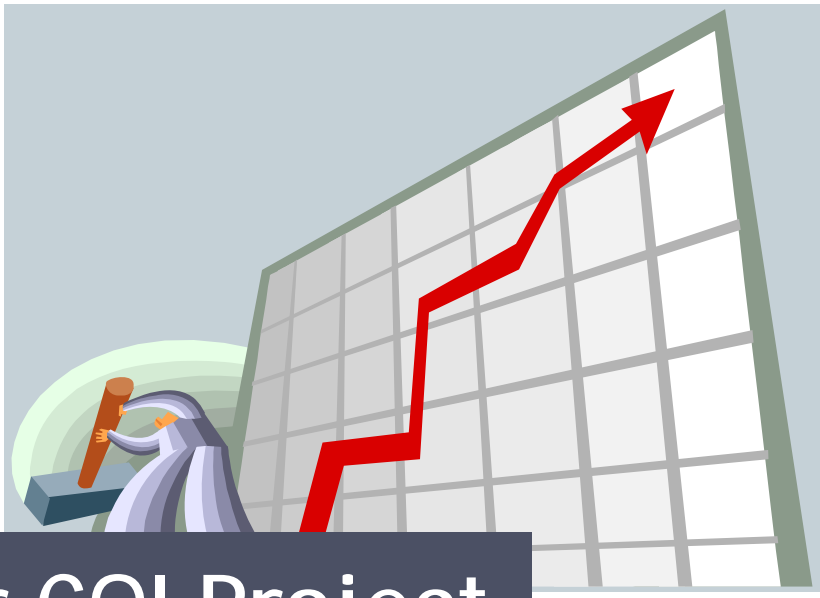
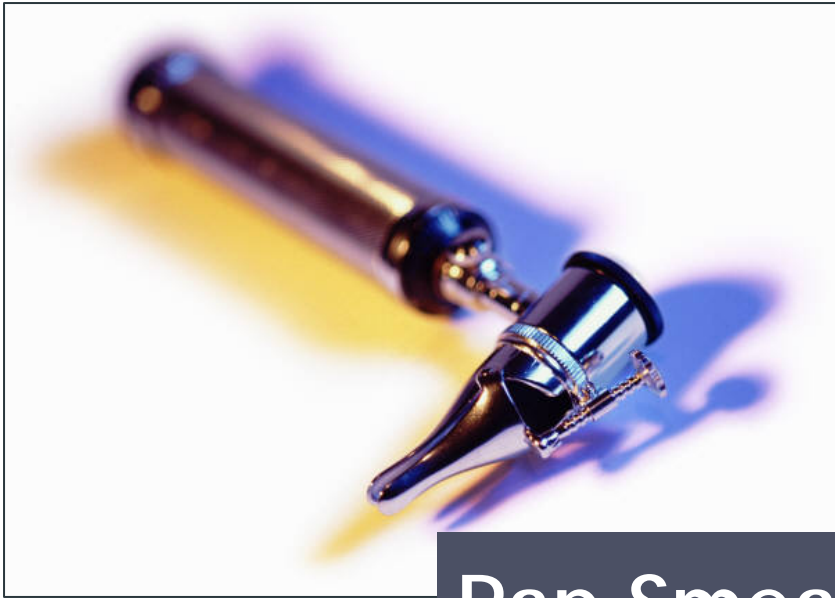


Administrative Data-  
driven supervision:

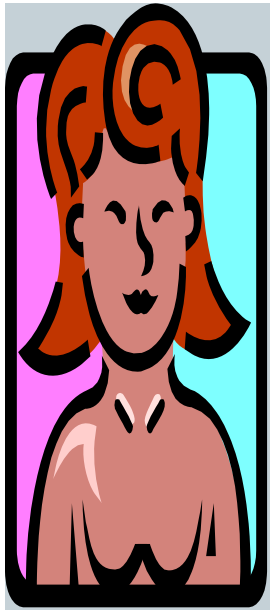
Staff-level  
assessment (broad)  
of service delivery

Clinical Supervision:

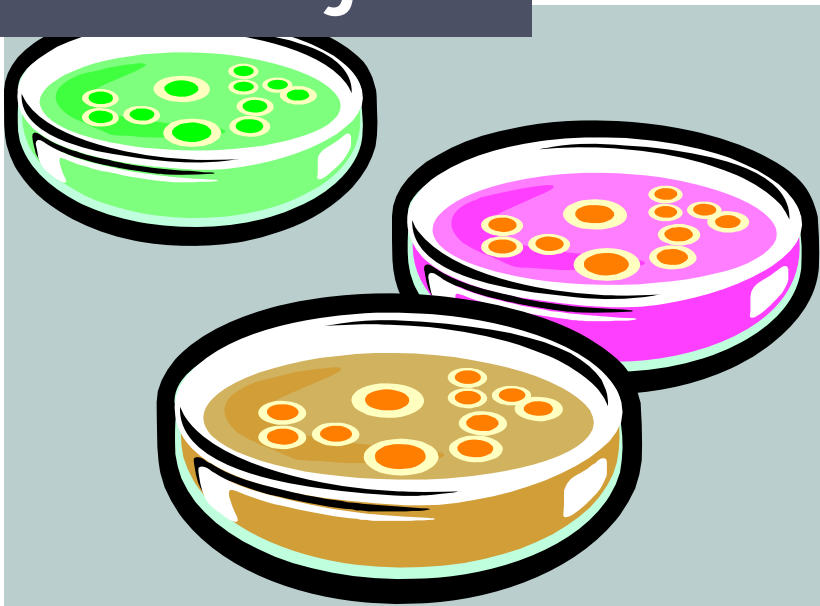
Staff-level assessment  
(focused), clinical skills  
building and trainings



# Pap Smear CQI Project



# Gynecology



# HIV and Pap Smear

- HIV-infected women are at significantly higher risk for cervical cancer than are HIV-negative women
- HIV-infected women with more advanced immunosuppression (CD4 count < 200 cells/ $\mu$ L) are particularly vulnerable to infection with and persistence of the high-risk HPV types that can lead to cancer
- Therefore, it is imperative to perform cervical Pap smear screening for HIV positive women annually.

# Continuous Quality Improvement (CQI)





# Step 1: Collect and Review Data

- Define measures
- Determine data collection method
- Collect baseline data

Measure	Category	Mar 2013	Apr 2013
Documentation of cervical Pap smear within the last year	All female	64%	70%
	Homeless Women (both + and -)	53%	63%
	HIV Positive Women	65%	65%

## Step 2: Define problem & Set Improvement Goal

- Problem Statement:

A large percentage of our clients either do not have a pap smear documented or do not have an updated pap smear results documented in their medical records, which should be obtained as part of sexual health history assessment.

- Improvement Goal:

To increase the annual cervical pap smear screening rate to 80% in 6 months

# Step 3: Investigate the Process



## **Barriers:**

1. Limited support from clinic staff for medical providers to perform Pap smears
2. Providers need to address client's other pressing needs
3. Clients' limited knowledge of GYN health
4. Clients' resistance (fear of procedure/results, sexual trauma, embarrassed)
5. Inconsistent documentation of annual Pap smear screening in electronic health records (EHR)

# Step 3: Investigate the Process

## List of plans/possible solutions:

1. Chart preparation - having Medical Office Assistants (MOAs) responsible for indicating when a client's last cervical Pap smear was and whether or not a Pap smear exam is due in the Chief Complaint area of a client's progress note in EHR
2. Creating structured data fields in EHR to standardize documentation of Pap smear exams
3. Monthly reminders to medical providers during providers meeting
4. Conducting a four-week women's health series to educate women on GYN health and the importance of having annual cervical Pap smear exam
5. Developed a GOT PAP? campaign to increase clients' awareness of the importance of obtaining annual cervical pap smear screening

# Step 4: Plan & Implement Changes

- **Develop action plans:**

Description of activities to be performed to test solutions, responsible parties, timeframes, and expected results.

## Work plan template

Plan #1:			
Activities	Responsible Persons	Timetable	Status Update
Plan #2:			
Activities	Responsible Persons	Timetable	Status Update

- **Implement action steps outlined in work plan:**

- Make sure everyone is aware of which action steps are assigned to them
- Identify a champion to make sure that action steps are executed

# Standardizing Documentation

eClinicalWorks (Kasmara, Liza)

File Patient Schedule EMR Billing Reports CCD Fax Tools Community Meaningful Use Lock Help

eClinicalWorks 9.0

P 0 E 0 S 0 D 0 R 0 T 2 L 0 M 0

Admin Progress Notes

Practice

Test, Sodee, 83 Y, M(T) Sel Info Hub

123 Main Street apt New York, NY 10029  
DOB: 01/01/1930  
tmario@harlemunit.ehx Status:

**Allergies**  
Billing Alert

Wt 01/11/13: 188 lbs.  
Appt(L): 04/25/13(AC)  
Appt(N): 04/30/13(AC)  
PCP: OUTSIDE  
Language: French  
Translator: Yes

Ins: PC East  
Acc Bal: \$0.00  
Guar: Sodee Test (\$35.00)  
Ref: Rosenbergo

CLICK TO EDIT  
hbv status? do HAV ab test missed January appt out of town re: family death. Info re: HBV sent to

SECURE NOTES  
this is a test

ADV DIRECTIVE  
Patient was given self determination packet (01/28/2008)

Medical Summary | Alerts | Labs | DI | Procedures | Growth Chart | Immunization | Encounters | Patient Docs | Flowsheets | Notes

SF

Patient: Test, Sodee DOB: 01/01/1930 Age: 83 Y Sex: Male(T)  
Phone: Primary Insurance: PC East  
Address: 123 Main Street apt 172, DO NOT SEND MAIL TO HOME, New York, NY-10029  
Lab Req No: 9620.268146 Chart No: 9620  
Provider: Aviva Cantor H., R-PAC Pcp: PCP OUTSIDE Encounter Date: 04/30/2013  
Appointment Facility: El Faro

**Subjective:**  
Chief Complaint(s):  
HPI:  
Current Medication:  
Abilify 10 MG Tablet 1 tablet Once a day, Lipitor  
Complera 200/25/300 tablets 1 tablet with a meal da  
Tablet 1 tablet Twice a day  
Medical History:  
HIV/AIDS(AIDS by OI/PCP or cd4 nadir 50) Dx 2  
xxxx, ed visit , latent syphilis, treated 2005, Inflamm:  
456-7890, oral steroid, Enrolled in COBRA CM Jeff Bro  
assessment completed 3/11/11, Pap Smear Due 7/23  
Allergies/Intolerance:  
Gyn History:  
OB History:  
Surgical History:  
Hospitalization:  
Family History:  
Social History:  
ROS:

**Objective:**  
Vitals:  
Past Results:  
Examination:  
Physical Examination:

**Assessment:**  
Assessment:

Print Fax Record Lock Details Scan Templates Claim Letters Ink

HPI (Test, Sodee - 04/30/2013 02:00 PM, FAJ PC)

Pt. Info Encounter Physical Hub

Preventive/Preventative Health  Show popup for c/o Order Categories

c/o	denial	Symptom	Duration	Notes
		Vaccines		
		Tuberculosis Screen		
		Colonoscopy		
		GYN Papsmear		
		Anal Papsmear		
		Mammogram		
		Ophthalmology		
		Last Dental Visit		
		PWP (HIV Only) Up to Date?		
		PHQ (All Patients) Up to Date		
		HIV Test(for HIV NEG patient)		

Denies All Clear All Custom

Notes  Header  Footer Browse... Spell check Clear

Vitals New Examination

Overview DRTLA History Alerts OS

Test, Sodee 83 Y, M as of 04/30/2013

Advance Directive

GIVEN Patient was given self determination packet

Problem List

- 401.9 Hypertension
- 493.90 ASTHMA NOS
- 296.00 Depression, major NOS
- 250.00 Diabetes mellitus type II
- 296.7 BIPOLAR I CURRENT NOS
- 300.00 Anxiety disorder NOS
- 271.3 Lactose intolerance/malabsorption
- 296.55 Depressed bipolar affective disorder in partial remission
- 053.9 Zoster herpes
- 401.1 Benign hypertension
- 599.0 UTI [Urinary tract infection]
- 296.00 Bipolar I disorder, single manic episode
- 313.0 Anxiety and fearfulness of childhood and adolescence
- 311 Depressive disorder NEC
- 293.84 ANXIETY DISORDER OTH DIS
- 401.9 HTN
- 729.5 Pain in limb
- 728.85 Spasm of muscle
- 250.70 Diabetes mellitus type 2 or unspecified type with peripheral circulatory di
- V65.3 DIETARY SURVEIL/COUNSEL
- 518.82 Acute respiratory distress NEC
- 493.90 ASTH W/O STAT ASTHM NOS
- 573.9 LIVER DISORDER NOS
- 782.4 JAUNDICE NOS
- 728.89 Muscle contracture
- 250.42 Diabetes mellitus type 2 or unspecified type with renal manifestations, unc
- 948.11 10-19% BDY BRN/10-19% 3D

start

Inbox - Microsoft Out... 8th Annual Women a... eClinicalWorks (Kasm... Microsoft PowerPoint... Untitled - Paint

10:47 AM

# Standardizing Documentation

HPI (Test, Sodee - 04/30/2013 02:00 PM, F/U PC) \*

Pt. Info Encounter Physical Hub

Preventive/Preventative Health  Show popup for c/o

Preventative Health

c/o	deni	Symptom	Duration	Notes	Cl
		Vaccines			X
		Tuberculosis Screen			X
		Colonoscopy			X
		GYN Papsmear			X
		Anal Papsmear			X
		Mammogram			X
		Ophthalmology			X
		Last Dental Visit			X
		PWP (HIV Only) Up to Date?			X
		PHQ (All Patients) Up to Date?			X
		HIV Test(for HIV NEG patient)			X

Denies All Clear All Custom

Notes  Header  Footer

Vitals New

HPI Notes

Free-form Structured

GYN Papsmear

Name	Value	Notes
PC13 Female >21 or HIV+	Yes	X
PC13 GYN Papsmear done in the past year?	Yes	X
PC13 Date of last Papsmear:	10/2012	X
PC13 Papsmear Done at:		X

Harlem United  
St Luke's Hospital  
Mt Sinai Hospital  
NYPH  
WHIS Study  
Bronx Lebanon  
North General  
Other

Custom Close

# Standardizing Documentation

Lock Preview

**HARLEM UNITED**

04/11/2013

**History of Present Illness**

Preventative Health:

Vaccines  
Pneumonia Vaccine 03/2012  
Tetanus Vaccine 02/2012  
Influenza Vaccine 10/2012  
Tuberculosis Screen  
TB Screening Due No  
PPD 03/2013  
PPD+, Quant+ or TB History No

Colonoscopy  
> 50 years old Yes  
Colonoscopy Done? Yes  
Colonoscopy Date: 10/2000  
Colonoscopy done at: St Luke's Hospital

GYN Papsmear  
Female > 21 or HIV+ Yes  
GYN Papsmear done in the past year? Yes  
Date of last Papsmear: 10/2012  
Papsmear Done at: St Luke's Hospital

Anal Papsmear  
HIV+, MSM or Abnormal GYN Pap? Yes  
Anal Pap Done in last year? Yes  
Date of last Anal Pap: 10/2012

Mammogram  
Female Age > 50 Yes  
MMG done in the last year Yes  
Date of Last MMG 08/2012  
MMG Done At: Madison Radiology

Ophthalmology  
Yearly Screening Eye Exam Needed? HTN (Y), Age > 50 (Y)  
Date of last Eye Exam: 10/2012

Last Dental Visit  
Date of last visit: 10/2012  
Dentist Location: Harlem United



# Pap Smear Campaign

**GOT PAP?**

When was your last Pap Smear?  
Get your PAP screening today!

All HIV positive men and women should have an anal PAP every year

Protect yourself from HPV cervical/ Anal Cancer and genital warts!

**HARLEM UNITED**  
We're Family

Got PAP?

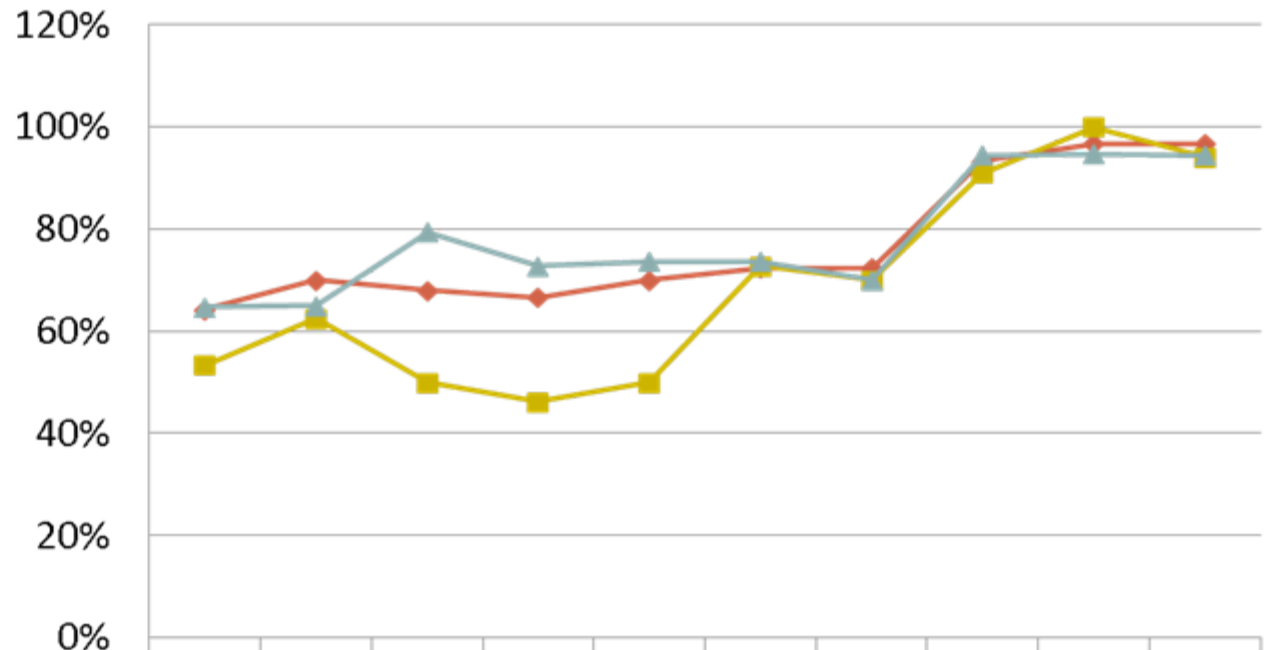
Schedule an appointment or Speak with your Provider about getting tested!

**HPV**

Cervical cancer predominantly is caused by certain types of **HPV.**

# Step 5: Evaluate Results

**Annual Pap Smear - 2012**



◆ All women	64%	70%	68%	67%	70%	72%	72%	93%	97%	97%
■ Homeless Women (both HIV+ and -)	53%	63%	50%	46%	50%	73%	70%	91%	100%	94%
▲ HIV Positive Women	65%	65%	79%	73%	74%	74%	70%	94%	95%	94%

# Step 6: Systematize Changes

- Determine which implemented strategies contribute to improvement
  - Select sample of clients who had annual pap smear and those who did not
  - Perform chart review to determine factors that contribute to increase in annual pap smear
- Standardize successful strategies
- Create plan to sustain improvement
  - Data collection & monitoring
  - CQI

Questions?