QUALITY ENHANCEMENTS FOR CERVICAL CANCER SCREENING: PRACTICAL APPLICATION OF THE FIVE QUALITY SYSTEM COMPONENTS

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PURPOSE

A multi-disciplinary team was established to identify process improvements for cervical cancer screening (Pap and HPV tests). This academic hospital-based service supports over 100 physician offices located within an 80 mile radius. One liquid-based specimen is shared between two labs: Cytology for Pap and Molecular Infectious Diseases for HPV.

METHODS

Team members from Cytology, Molecular Infectious Diseases, Information Technology (IT), Patient Access, and Lab Quality mapped a flow chart of the current process and collected data for report turnaround time (TAT) and unsatisfactory rates for specimens. This data was ‘benchmarked’ to industry performance. It was determined that TAT for normal results must be reduced to one week to meet clients’ expectations, and the unsatisfactory specimen rate must be lowered to decrease the number of patients who return for repeat testing.

RESULTS

The entire team redesigned workflow from specimen receipt to result report and now provide normal results within one week. This included significant modification of Patient Access staff resources to support timely and correct patient registration.

Cytotechnologists adjusted specimen preparatory techniques to reduce artifacts and modified the quality control rescreening process for unsatisfactory Paps, lowering the rate of unacceptable specimens by ~50%.

A client survey validated the team’s actions with 91% of respondents replying with ‘4’ and ‘5’ ratings on a 5 point scale.

REFERENCE

GP22-A2 Continuous Quality Improvement 5 Quality System Components; clinical laboratory Standards Institue, Vol.24 No. 35