



Increasing Breast Cancer Screening Rates at Sanford Chamberlain Clinic

Background

The American Cancer Society estimates that 750 women will be diagnosed with female breast cancer in South Dakota in 2022.¹ The United States Preventive Services Taskforce (USPSTF) recommends biennial screening mammography for women aged 50 to 74 years, with individual decision-making for those aged 40-49. The SD Cancer Plan aims to increase the percentage of women ages 50-74 in South Dakota up-to-date with USPSTF recommended breast cancer screening from 82% to 86% by 2025.

The Comprehensive Cancer Control Program within the SD Department of Health (SDDOH) released a request for applications targeting organizations interested in partnering to implement evidence-based interventions that align with the priorities of the SD Cancer Plan 2021-2025 to reduce the burden of cancer in the state. The Sanford Chamberlain clinic was awarded \$12,000 in funding and received technical assistance to support project implementation and evaluation.

Project Summary

To increase screening rates, the project focused on implementing an expanded provider reminder process, enhancing client reminders and provider assessment and feedback reports, and providing same-day mammograms to reduce structural barriers to screening. Same-day mammograms and walk-in mammograms were selected to provide convenience and assistance to the target population.

Sanford aimed to address health disparities by assessing the greatest areas of need through quality measures. The presence of American Indians in the target service area is significant with the presence of two large American Indian reservations. The population of Buffalo County is 80.6% American Indian, while the population of Lyman County is 40.4% American Indian and Brule County is 10% American Indian (U.S. Census Bureau, 2019). The project period was January 1, 2021-December 31, 2021.

Barriers/Challenges

The clinic faced numerous challenges during the project period. The COVID-19 pandemic impacted clinic staffing and patient hesitancy to complete preventative cancer screenings. Additionally, CDC guidelines were released after the start of the project that recommended waiting 4-6 weeks after the second dose of the COVID-19 vaccine to complete a mammogram due to possible lymph node inflammation caused by the vaccine. This impacted the feasibility of offering same-day mammograms and impacted client reminders, and created additional barriers to screening completion.

References

1. American Cancer Society. Cancer Facts & Figures 2022. Atlanta: American Cancer Society; 2022

Outcomes

The data presented in this section was compiled from grantee reports. As part of the project, Sanford Clinic Chamberlain implemented an expanded provider reminder process and rooming workflow that included an option for patients to complete a same-day mammogram if interested. During the project period, 14 women completed a same-day mammogram. The client reminder process was expanded and standardized as part of project efforts. The final client reminder process included three letters and a phone call. Reminder effectiveness was tracked for the first three-quarters of the project and resulted in 14% of patients completing a mammogram or updating their records after the first reminder. Subsequent reminders resulted in cumulative results: 2nd letter - 20%; 3rd letter – 32%; and final reminder phone call – 46%. Overall, the clinic increased its screening rate by 1%.

Next Steps

"The work we have done and continue to do is important. I am happy to serve our community and look forward to continuing in this effort to increase cancer screening rates in the years to come."

- Brittney McDonald

Moving forward, the clinic aims to strive for an 86% mammogram compliance rate by 2025. They will also continue to implement client reminders and offer overdue patients for screening, a same-day or walk-in mammogram.

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References

1. American Cancer Society. Cancer Facts & Figures 2022. Atlanta: American Cancer Society; 2022

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