

2016 Gynecologic Cancer Prevention and Screening Programs

On 8/26/16 & 9/16/16 Florida Hospital Waterman Cancer Institute conducted a community outreach event at a food and personal care item distribution event in collaboration with LAKE CARES food pantry. This event was to educate women in our community about cervical cancer risk reduction, screening and to link women to gynecologic cancer prevention resources.

Each of the twenty-three (23) women participated in this event and received:

- ❖ 1:1 confidential screening interview and personalized educational session with a nurse based upon a completed cervical cancer risk questionnaire.
- ❖ Educational Materials (same language) Including Women’s Cancer Prevention & Screening guidelines with detailed personalized GYN cancer risk and screening assessment.
- ❖ On-site referral and resource identification
- ❖ Personal care item gift packages
- ❖ Individual barrier and on-site resource identification including:
 - Language (1 Spanish speaking nurse);
 - Financial/Lack of Health Insurance
 - Oncology Social Worker
 - Free-clinic representative
 - 2 Health Department intake specialists

Demographic

Age	Language	Health Insurance	Smoking Status	Seeking HPV Vaccine access information for family member
9% = age <20	English = 87%	No coverage = 30%	Current Smoker = 39%	Self/child age 9-26 in family = 39%
26% = age 38-49	Spanish only = 13%	Coverage = 70%	Denies Current smoker = 61%	Not applicable = 61%
56% = age 50-64				
9% = age 65-73				

Of the twenty-three (23) participants, twelve (12) = 52% women were overdue for pap screening.

Of these women three (3) where uninsured, deemed eligible for Pap testing (and screening mammography) with the Florida Breast and Cervical Cancer Early Detection Program, were enrolled in the Health Department program on-site, and scheduled for appointments within 3 business days

Additionally, other Women's preventive health and screening needs were identified and addressed as below:

- ❖ Nine (9) = 39% were current smokers and received free Smoking Cessation kits and resource identification of current community resources
- ❖ Twelve (12) = 52% of the 23 women were also in need of mammography testing
 - This included nine (9) of these women were also overdue for pap testing,
 - With one (1) woman was having active breast symptoms for who diagnostic mammogram was recommended by an Emergency Room physician visit three weeks prior and she was unable to access care without insurance,
 - The two (2) remaining women were overdue for screening mammogram only (whom pap testing not indicated for hysterectomy or age >65), and
- ❖ One (1) woman who self-reported having current pap testing within the last year was 4 months pregnant and had not had any prenatal care.
- ❖ Nine (9) = 39% had at least one child, grandchild, or self interest in HPV vaccine education and availability for potentially eligible child/young adult age 9-26 in family. These participants received education and links to HPV vaccine resources/availability in the community.

All of these women where provided resource identification and linkage to community and physician resources on-site.

Resource identification

2 = Pap only

10 = Pap & Mammography

2 = Mammography only

1 = Prenatal care (4 months pregnant)

2 = education birth control/HPV vaccine (less than age 20)

Referrals to:

6 = Health Department

4 = OB/GYN

3 = Free clinic

6 = Primary care provider

Follow-up outreach occurred within 60 days for women identified as having resource, screening and referral needs (16 telephonic and 4 letter contacts)

- ❖ Eight (8) of the twelve (12) = (67%) women who were overdue for **cervical screening pap testing** exams had follow up appointments for a screening visit within 60 days for Pap testing (And mammography, as applicable). No Malignancies were identified.
- ❖ Of the four (4) remaining women who did not have confirmed follow up Pap testing, one was receiving acute medical services for recent heart attack and blood clot, and had not yet scheduled her screening visit but was under current physician care, one had HMO health insurance plan with no nearby in-network OB/GYN's and was still working with insurance to identify in-network participating provider (All FHW affiliated OB GYN's OON), and the two remaining women received follow up letters as they were not reachable via telephone.
- ❖ One (1) woman presented with active breast symptoms. She indicated a diagnostic mammogram was recommended by an Emergency Room physician three weeks prior. She was enrolled in the Florida Breast and Cervical Cancer Early Detection Program and received a diagnostic mammogram in September 2016, which was abnormal. A six-month follow up mammogram was recommended and scheduled.
- ❖ One (1) woman who self-reported having current pap testing within the last year, but was 4 months pregnant with no prenatal care, was confirmed as having received follow up OB/GYN prenatal care in September.