Cancer Institute NSW



Primary care toolkit: readiness checklist

This readiness checklist is designed to be completed by general practices to ascertain their focus on quality improvement and cancer control activities. The focus is on general readiness for change within the practice and to assess the systems in place to support robust cancer screening and prevention activities. Practices that are new to cancer screening or quality improvement should use this checklist as a starting point and work with their PHN representative to assist in identifying and planning quality improvement activities.

Cancer screening and prevention change readiness	Yes	No	Unsure	Action/Comment
There is an active focus on cancer screening (breast, bowel and cervical) and prevention (smoking, alcohol)? (e.g. it is discussed at practice meetings, there are reminder/recall systems and nominated clinician champions)				
You/your practice currently provide screening services and reminders as per clinical guidelines?				
Your practice uses data to identify under-screened and at-risk patients? (Review high-risk and under-screened populations at your practice.)				
Clinicians have indicated if they would like to access education and training in relation to cancer screening and prevention?				
General practice systems	Yes	No	Unsure	Action/Comment
General practice systems You/your practice use a standard Family History template? (Utilise the RACGP Family History template.)	Yes	No	Unsure	Action/Comment
You/your practice use a standard Family History template?	Yes	No	Unsure	Action/Comment

Cancer screening and prevention change readiness	Yes	No	Unsure	Action/Comment
The practice systematically deactivates and deceases patients, checking for missing dates of birth or gender, and merging duplicate patients?				
Practice software is used for actions/prompts for the GP/nurse to ask about routine cancer screening and prevention?				
There are policies and procedures in place that support robust reminders and recalls systems?				
The practice sends targeted reminders to patients (e.g. letters, SMS, email or phone calls) for routine cancer control activities?				
Reminders are compliant with health literacy principles? See your PHN for resources				
The practice has sought patient input into barriers and opportunities for improving participation in cancer screening and prevention?				
You have a documented workflow to manage and monitor cancer control in your practice, and designated roles have been allocated in workflows?				
Clinicians access clinical guidelines, assessment, management and referral information and patient information?				

