

Research Summary: Do no harm: the impact of implementing cancer prevention strategies on other preventive health measures

- The saying "First, do no harm" is a cornerstone in medicine. Today, this means doctors should suggest tests or treatments that are more likely to help patients than hurt them.
- Efforts to use evidence-based practices sometimes focus only on certain results, ignoring how they might affect other areas of care. To truly "do no harm", we need to consider how improving one practice might negatively impact other parts of care quality.
- This paper looks at the impact of a colorectal cancer (CRC) screening initiative on delivery of other preventive care measures.



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Massachusetts League
of Community Health Centers

WHO PARTICIPATED

- 14 community health centers (CHC)
- Massachusetts League of Community Health Centers (Mass League)

WHAT WE DID

- Examined data from 10 of the 14 CHCs that participated in the CRC Screening Quality Improvement Initiative, which ran across 3 groups between 2015 and 2020 and was led by the Mass League.
- We analyzed the data over time, using the year the CRC screening program was implemented for each group when measuring all outcomes.
- Staff members at 4 of the CHCs participated in interviews to review their data and provide feedback.



WHAT WE FOUND



- The CRC Screening initiative was tied to an increase in CRC screening, and it did not lower performance on other quality measures.
- In interviews, CHC staff shared the following context related to the results:
 - Various outside issues, like changes in leadership, electronic medical record systems, and high staff turnover, would be more likely to negatively affect outcomes than an improvement initiative.
 - Small changes to measure definitions from regulators (e.g., HRSA) usually lower quality measures.
- Quality improvement (QI) initiatives usually aim to minimize unintended effects and make the most of the staff and resources available. Research studies might find it helpful to think about how QI initiatives factor in the local context in implementation efforts.