Project Title: Providing Survivorship Care to Hematology Patients at WCI

Presenter’s Name: Hira Latif, MD

Institution: Washington Cancer Institute, MedStar Washington Hospital Center

Date: December 5th, 2018
Problem Statement

ASCO guidelines recommend providing survivorship care to cancer patients who have completed treatment with curative intent. Cancer and the long-term effects of its treatment impact the future health and psychological wellness of the survivors. The Committee of Cancer (COC) recommendations state care plans should be delivered to 50% of the patients per disease state in the year 2018. 33% of patients with a hematologic malignancy seen at the Washington Cancer Institute between Jan 1, 2016- June 30, 2018, received treatment summaries and survivorship care plans.
Patient completes curative treatment → Provider identifies eligible patients → Patient qualifies for care plan

- YES: Can the provider deliver survivorship care at the same visit
  - YES: Care plan delivered by Nurse Navigator/Provider
  - NO: Provide care as defined
- NO: Can survivorship care be delivered in subsequent visit

MA schedules patient appointment → Patient arrives for survivorship care visit → Front Desk Staff registers the patient → MA takes vitals and rooms the patient → Provider makes case-specific assessment and plan and provides referrals → Treatment Summary given to the Patient

Patient discharged from clinic
Institutional Overview

- Washington Cancer Institute (WCI), is the largest provider of cancer care to Washington D.C.
- Approximately 1500 new patients seen annually.
- Academic Practice
  - 17 Hematologist/Oncologists
  - 7 Fellows (Rotating Fellows from NIH and GUH)
- 30 Infusion Chairs/Beds- Over 10,000 patient visits/year
- 33 bed Inpatient Unit
- Participating in 30 +Clinical Trials
Team Members

**Project Sponsor:**
Washington Cancer Institute

**Medical Director WCI:** Christopher Gallagher, MD

**Team Leader:** Hira Latif, MD

**Core Team Members:**
Asma Dilawari, MD
Maya Beplat, CRNP

**Improvement Coach:**
Prabhjyot Kaur Singh, RN, MSN, MPH
Lack of Awareness
- Do not know the importance of survivorship care
- Many patients have metastatic disease

Resources
- Lack of SW resources
- Lack of clinic space
- Lack of staff
- Lack of dedicated Nurse Navigator
- No dedicated survivorship care clinic

Time Constraints
- Large volume of patients
- Overbooking
- Multiple patient co morbidities/ No PCP

Process
- No standardized process
- Diffusion of responsibility
- No show
- Lack of transportation/ Financial stressors

Patient Factors
- Lack of awareness about survivorship care
- Incentives for patient participation

Survivorship Care Not Delivered
We surveyed 12 providers to obtain data for perceived barriers to deliver survivorship care based on the Cause and Effect findings.
We aim to increase the percentage of cancer survivors of hematologic malignancies who receive treatment summaries and survivorship care from 36% to 50% by 11/30/18.
% of hematological malignancy survivors who received survivorship care between Jan 2018- June 2018: 36% (4/11)

If we aim to increase this number to 50% for the year 2018, we would need to deliver survivorship care to 2 more patients by 11/30/18 (6/11= ~55%)
Baseline Data

Survivorship Care Delivery for Jan-June 2018 (%)

<table>
<thead>
<tr>
<th>Disease State</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lung</td>
<td>100</td>
</tr>
<tr>
<td>Colon</td>
<td>69</td>
</tr>
<tr>
<td>Breast</td>
<td>67</td>
</tr>
<tr>
<td>Hematology</td>
<td>36</td>
</tr>
</tbody>
</table>
Baseline Data

Hematologic Malignancies

<table>
<thead>
<tr>
<th>Year</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>2016</td>
<td>40</td>
</tr>
<tr>
<td>2017</td>
<td>20</td>
</tr>
<tr>
<td>2018</td>
<td>36</td>
</tr>
</tbody>
</table>

Hematologic Malignancies

Linear (Hematologic Malignancies)
• **Measure:** % of patients who receive survivorship care in year 2018

• **Patient population:** Cancer survivors of hematologic malignancies

• Calculation methodology: A percentage will be calculated as following:
  - numerator: patients who received survivorship care in the year 2018
  - denominator: patients eligible for survivorship care in 2018

• Data source: EMR

• Data collection frequency: Biweekly

• Data quality (any limitations): None
Prioritized List of Changes (Priority/Pay –Off Matrix)

<table>
<thead>
<tr>
<th>High Impact</th>
<th>Easy</th>
<th>Low Impact</th>
<th>Difficult</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fellow’s survivorship clinic</td>
<td>Patient reminder phone calls/text</td>
<td></td>
<td></td>
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<tr>
<td>Waiting room flyers to increase patient awareness</td>
<td>NP Heme survivorship clinic</td>
<td></td>
<td></td>
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<tr>
<td>Process for physicians to identify patients eligible for SCP</td>
<td>Hira and dedicated Nurse Navigator to deliver SCP</td>
<td></td>
<td></td>
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<tr>
<td>Flagging Charts</td>
<td>Survivorship patients assigned 45 min visit</td>
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</table>

ASCO Quality Training Program
## PDSA Plan (Test of Change)

<table>
<thead>
<tr>
<th>Date of PDSA Cycle</th>
<th>Description of Intervention</th>
<th>Results</th>
<th>Action Steps</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sept 21- Oct 12</td>
<td>Fellows to see cancer survivors and deliver SCP in a dedicated clinic</td>
<td>Fri afternoon Survivorship Clinic for Fellows on clinic block</td>
<td>Continue Fellow’s survivorship clinic</td>
</tr>
<tr>
<td>Oct 15-Nov 2</td>
<td>Clinic work rooms to have log sheets for providers to identify patients that qualify for survivorship</td>
<td>Providers would place patient identification stickers on the log sheet if their patient was eligible for survivorship care. This helped identify eligible survivors who had not received SCP at the end of their curative treatment</td>
<td>Work rooms to have log sheets to identify survivors eligible to receive SCP and be referred to the fellow’s clinic</td>
</tr>
<tr>
<td>Nov 5- Nov 30</td>
<td>Flyers in waiting room to increase awareness amongst patients</td>
<td>No increase noted</td>
<td>Mount flyers in patient rooms as well</td>
</tr>
</tbody>
</table>
**Materials Developed**

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**Does Your Patient Qualify for a Survivor Care Plan?**  
(Has completed treatment with curative intent)

<table>
<thead>
<tr>
<th>IDENTIFICATION STICKER</th>
<th>SCP Given During the Visit</th>
<th>Needs Referral to Survivorship Clinic</th>
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* Nurse Navigators please submit this list to the "Survivorship Clinic Fellow" at the end of the day.

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**Cancer Survivorship Clinic**

Are You a Cancer Survivor?  
Ask Your Physician About Scheduling a Visit for the **Cancer Survivorship Clinic**

In this clinic you will receive:
1. A treatment summary of ALL your cancer care
2. Evaluation for referrals you may benefit from such as:  
   - Physical Therapy  
   - Cardiology  
   - Pain Management  
   - Social Work

**Ask Your Physician Today!**
Survivorship Care Plans delivered to survivors of hematologic malignancies were increased from 36% to 63%!
Conclusions

• Having a designated provider (fellow) improved the numbers of patients receiving SCP
• Having a standardized process of identifying patients by the log sheet helped to increase referrals and have more patients receive SCP
• Education/ awareness of patients is important to improve show rate. We did not have enough time to see this improvement, but hoping to see the impact in a few weeks.
• Plan to expanding the pilot to a few more months to re-measure the impact
• Plan to involve providers and create disease-specific care plans
Next Steps/Plan for Sustainability

• Extend process to other tumor types

• Transitioning to a different EMR in the future- may be easier to flag charts that will assist in identifying survivors eligible for survivorship care and treatment plans.

• Plan to present this data in our next COC meeting
**Project Title:** Providing Survivorship Care to Hematology Patients at Washington Cancer Institute

**AIM:** 50% of cancer survivors of hematologic malignancies who complete curative treatment in year 2018 will receive treatment summaries and survivorship care by 11/30/18

**INTERVENTION:**

- Fellows’ assigned to see survivorship patients in a weekly clinic
- Clinic work rooms to have log sheets for providers to identify patients that qualify for survivorship
- Information flyers in clinic waiting area to increase awareness of survivorship care plans amongst patients

**RESULTS:**

CONCLUSIONS: 63% of hematological cancer survivors received survivorship care and treatment summary and met the COC requirement of 50%.

NEXT STEPS:

- Extend process to other tumor types
- Flagging charts in EMR to identify patients eligible for SCP
- Plan to present this data in our next COC meeting