

Developing an Evidence- Based Supportive Services Program for Cancer Survivors in a Private Oncology Practice

Joseph Ellul

DNP Project Defense

April 5, 2018

Acknowledgements

- **Advisory Team**
 - Dianne Conrad DNP, FNP-BC
 - Robert Johnson MD, M.Ed.
 - Tanya Rowerdink DNP, RN, NP-C, CCD
- **Additional Acknowledgements**
 - Ashley Mitchell MSN, RN, FNP-C, AOCNP, CCD

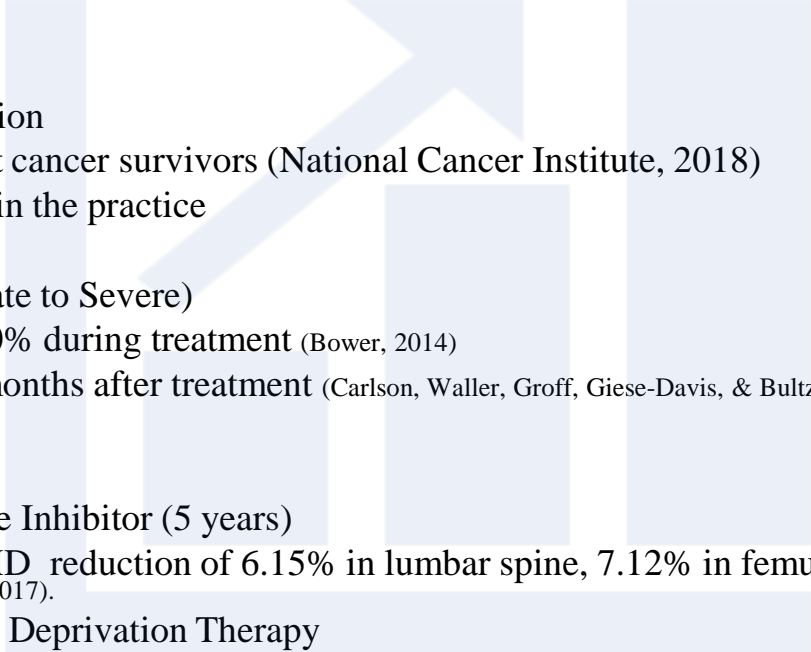


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Objectives for Presentation

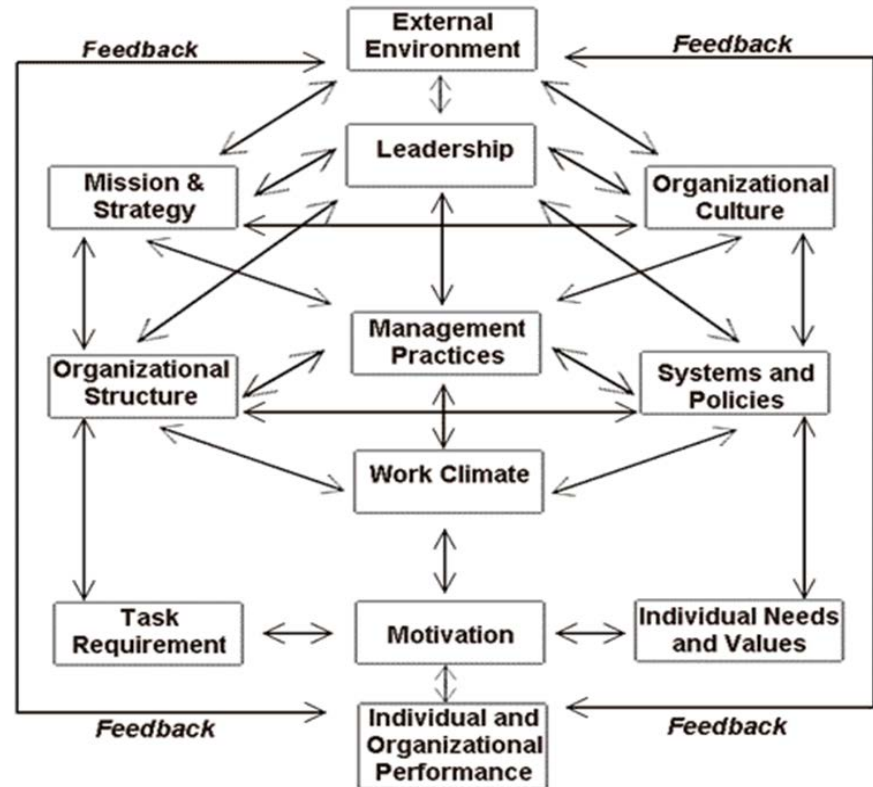
1. Identify the Practice Problem
2. Review the Organizational Assessment
3. Describe How the Literature Review Supported the Project and Toolkit Development
4. Explain the Steps Required to Develop the Final Supportive Services Toolkit
5. Describe How Provider Surveys and Stakeholder Meetings Informed Toolkit Development
6. Explain Each Specific Part of the Toolkit
7. Discuss the Implications for Practice and the Plans for Dissemination of the Project
8. Reflect on DNP Essentials Obtained Through the Project and other Immersion Opportunities
9. Successfully Defend the Project

Introduction

- Cancer Survivor
 - Prevalence
 - 2016 - 15.5 million
 - 2026 - 20.3 million (American Cancer Society, 2016)
 - Wellness Needs
 - Smoking Cessation
 - 13% adult cancer survivors (National Cancer Institute, 2018)
 - 10% within the practice
 - Fatigue (Moderate to Severe)
 - 30% to 60% during treatment (Bower, 2014)
 - 40% 12 months after treatment (Carlson, Waller, Groff, Giese-Davis, & Bultz, 2013).
 - Bone Health
 - Aromatase Inhibitor (5 years)
 - BMD reduction of 6.15% in lumbar spine, 7.12% in femur, and 6.35% in total hip (Hong et al., 2017).
 - Androgen Deprivation Therapy
 - Decrease bone mineral density (Nguyen et al., 2015)
 - Response
 - National Academy of Medicine (Dietrich et al., 2016).
 - National Comprehensive Cancer Network (NCCN) Survivorship Guidelines (NCCN, 2018)
 - Survivorship Programs
- 

Assessment of the Organization

Burke-Litwin Model



A model of organizational performance and change. "A Causal Model of Organizational Performance and Change," by W. W. Burke and G. H. Litwin, 1992, *Journal of Management*, 18, 528. Reprinted with permission by SAGE Publications. Copyright 1992 by SAGE Publications.

Current State of the Organization

- Results Using Burke-Litwin Model
 - Oncology Care Model (OCM) (Centers for Medicare and Medicaid Services [CMS], 2019)
 - Additional Resources
 - Health Maintenance
 - Quality Oncology Practice Initiative (QOPI) (American Society of Clinical Oncology [ASCO], 2018)
 - Culture
 - Surrounding Health Systems
 - Community Resources
 - Leadership
 - Communication
 - Attrition
 - Business Structure

SWOT Analysis

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Gap Analysis

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Clinical Question

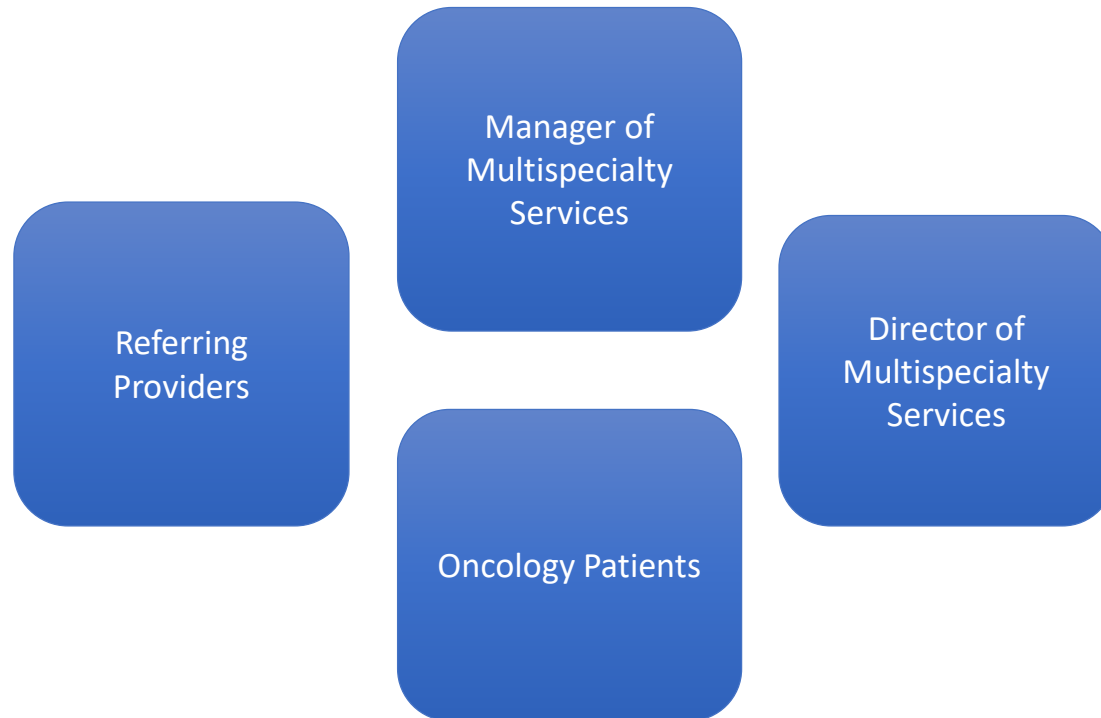
- What is an evidence-based, efficient, cost-effective, and sustainable program that delivers supportive services to cancer survivors in a private oncology practice?

IRB Approval

- Letter of Consent Obtained from the Organization
- University IRB
 - Determined by the Office of Research Compliance and Integrity that the project did not meet the definition of research according to current federal regulations.
 - Project Design
 - Project Development (Quality Improvement)
 - Provider Surveys
 - Survey Process and Methods
 - Distribution
 - Anonymity
 - Analysis



Stakeholders



Evidence for Project

Survivorship Programs

- Quality of Life

- NCCN
Recommendation
Compliance

- Healthy Behaviors

- (Cheng, Lim, Koh, & Tam, 2017; Dietrich et al., 2016; Greenlee et al., 2016).

Wellness Programs

Weight Loss Goals

Cardiac Risk Factors

- (Eng, Moy, & Bulgiba, 2016; Hinderliter et al., 2014; Jamal, Moy, Mohamed, & Mukhtar, 2016; Razavi et al., 2014).

Evidence for Project

Tobacco Dependence	Bone Health	Fatigue Management
<p data-bbox="301 525 620 572">1. Brief Advice</p> <p data-bbox="301 679 635 726">Active Referral</p> <p data-bbox="301 833 552 929">Active Connection</p> <p data-bbox="301 958 687 1039">•(Fu et al., 2014; Stead et al., 2013; Vidrine et al., 2013; Wang et al., 2017)</p>	<p data-bbox="809 525 1064 733">Multimodal Approach Including Education</p> <p data-bbox="809 765 1180 822">•(Kastner et al., 2018; Kessous et al., 2014)</p>	<p data-bbox="1317 525 1659 686">Active and Continuous Encouragement</p> <p data-bbox="1317 789 1537 836">Education</p> <p data-bbox="1317 939 1543 986">Follow-up</p> <p data-bbox="1317 1015 1702 1072">•(Baumann et al., 2017; Pinto & Papandonatos, 2013)</p>

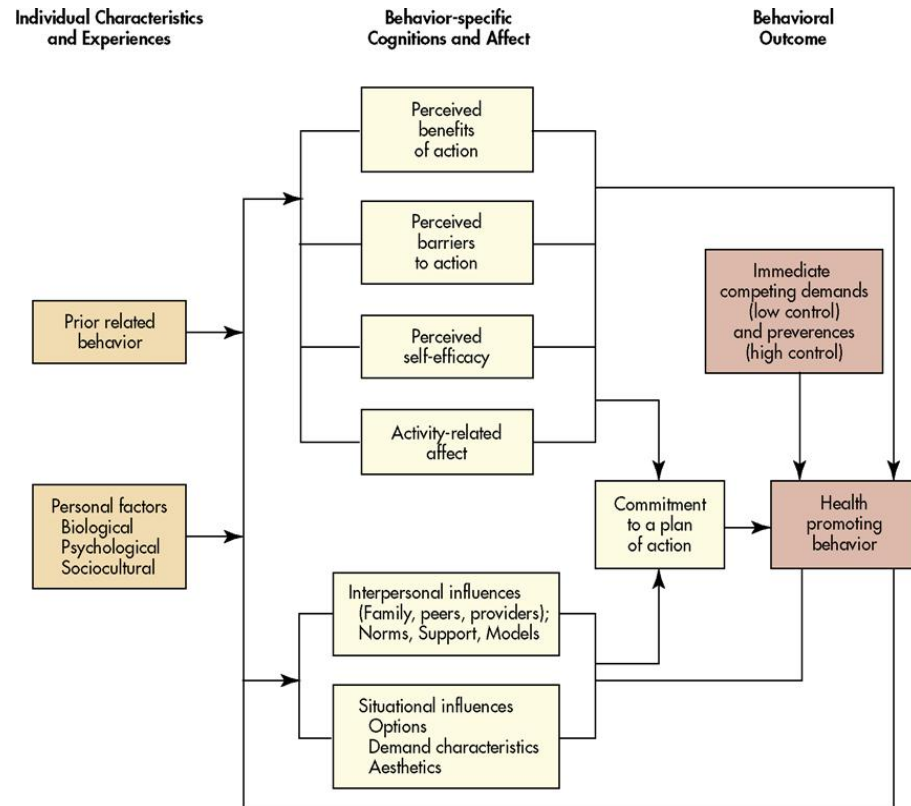
Project Purpose & Objectives

Develop an Evidence-Based Supportive Services Program Composed of Multiple Wellness Initiatives

Approval of Toolkit Implementation by the Manager and Director of Multispecialty Services

Model to Examine Phenomenon

Health Promotion Model



Health promotion model (Adapted from Pender, N.J., Murdaugh, C.L., & Parsons, M.A. (2011). Health promotion in nursing practice (6th ed.). Reprinted with permission from Pearson Education. Copyright 2011 by Pearson Education Inc.

Project Type, Setting & Participants

- Design
 - Program Development
- Setting
 - Private Oncology Practice
- Participants
 - Manager of Multispecialty Services
 - Director of Multispecialty Services
 - Referring Providers

Implementation Model

Kotter's Eight Step Process for Accelerating Change



Kotter's Eight Step Plan for Implementing Change. Adapted from Kotter International. (2018). *The 8-step process for accelerating change*. Retrieved from <https://www.kotterinc.com/wp-content/uploads/2018/05/8-Steps-eBook-Kotter-2018.pdf>. Reprinted with permission from Kotter International. Copyright 2018 by Kotter Inc

Implementation Strategies

Creating a Sense of Urgency

- Organizational Need
- Leader in Innovation
- Provider Surveys
- Meetings with Key Stakeholders
- Cost Analysis
- New Space Renovations

Building a Guiding Coalition

- Provider Surveys
- Meetings with Key Stakeholders
- Marketing and Educational Information

Implementation Strategies

Enable Action by Removing Barriers

- Provider Surveys
- Meetings with Key Stakeholders
- Sustainability and Evaluation Plans

Form a Strategic Vision and Initiatives

- Evidence-Based Toolkit
- Educational and Marketing Information
- Sustainability and Evaluation Plan
- Oncology Care Model and Quality Oncology practice Initiative (ASCO, 2018; CMS, 2019)
- Quality of Life

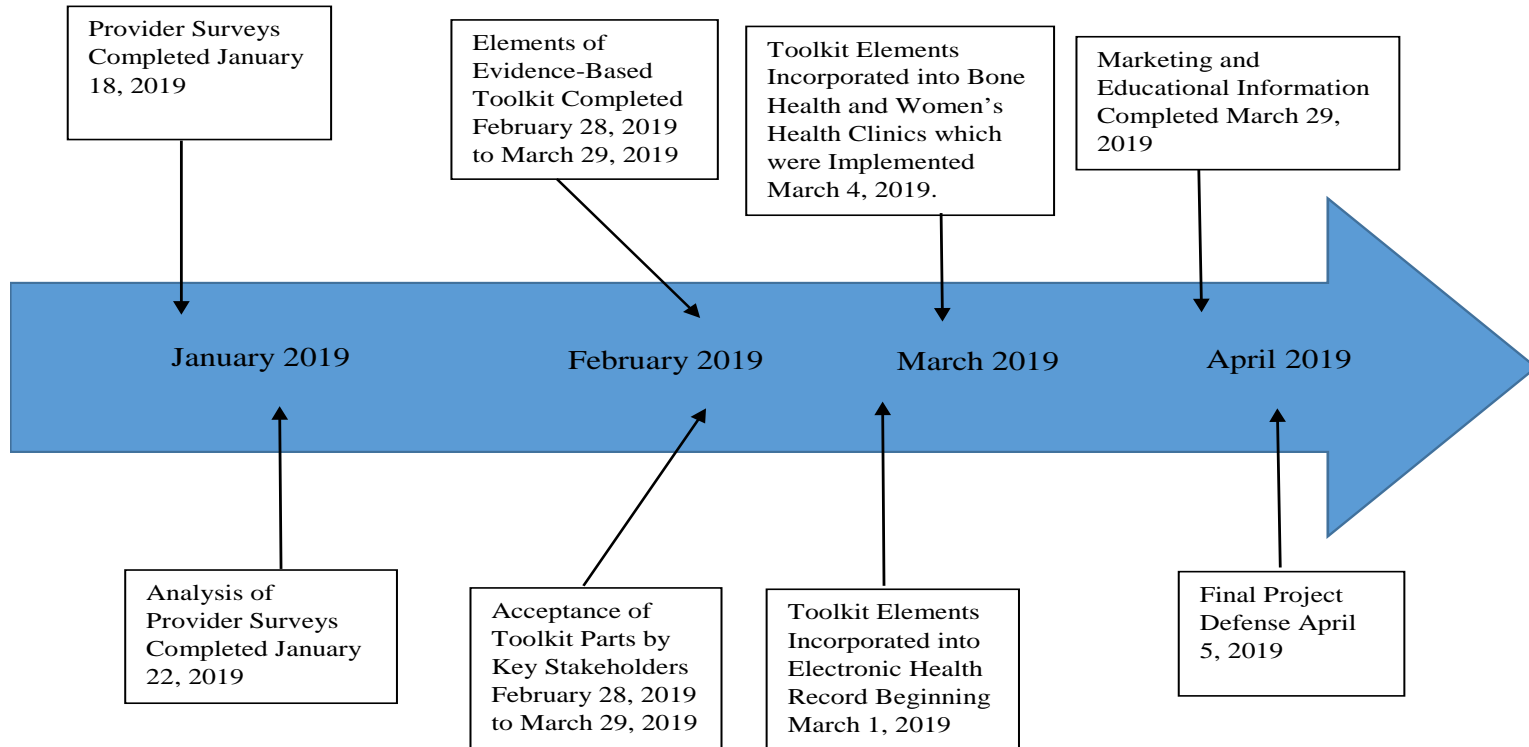
Budget

Personnel / Item	Hourly Wage x Estimated Time / Lost Productivity Time	Cost of Item
DNP Student (Project Director) (in-kind donation)	\$5981	
Project Materials (in-kind donation)		\$200
Referring Provider Meetings / Surveys	\$690	
Referring Provider Educational and Marketing Information	\$690	
Manager and Director of Multispecialty Services Participation	\$656	
Organizational Materials and Functional Space Use		\$250
Total	\$3945	\$50
Net	\$3895	

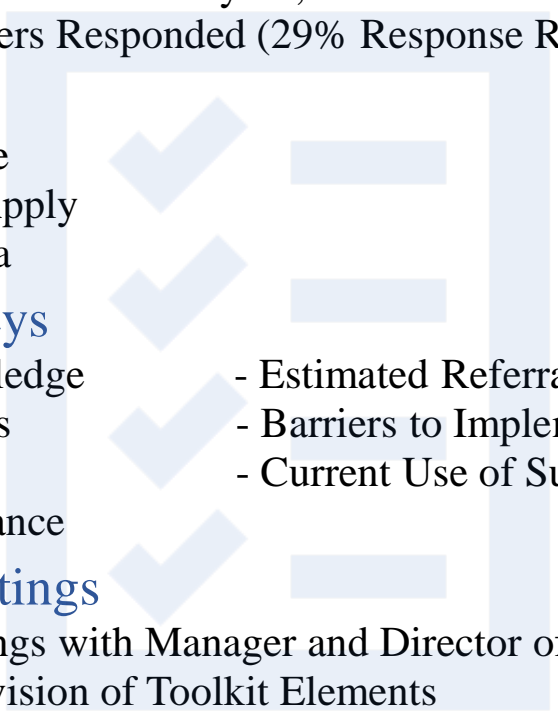
Changes to the Project

- Name of Program
 - Supportive Services Program for Cancer Survivors
- Selected Supportive Services
 - Bone Health
 - Women's Health Program
 - Replacing fatigue management
 - Prevalence of sexual health concerns
 - Distress, depression, and quality of life (Bae & Park, 2016; Usta & Gokcol, 2017)
 - Smoking Cessation
- Manager of Specialty Services

Timeline



Data Collection

- **Provider Surveys**
 - December 17, 2018 – January 18, 2019
 - 11 of 35 Providers Responded (29% Response Rate)
 - **Survey Format**
 - Multiple Choice
 - Select all that Apply
 - Qualitative Data
 - **Purpose of Surveys**
 - Provider Knowledge - Estimated Referral Numbers
 - Referral Process - Barriers to Implementation
 - Wellness Needs - Current Use of Supportive Services
 - Patient Compliance
 - **Stakeholder Meetings**
 - Monthly Meetings with Manager and Director of Multispecialty Services
 - Continuous Revision of Toolkit Elements
 - Provider Input
- 



Discussion (Provider Surveys)

- Provider Knowledge
 - Moderate
- Referrals
 - Attainable referral numbers
 - High compliance
 - Providers and coordinators
- Supportive Service Needs
 - Bone health
 - Sexual health
 - Cognitive function
 - Nutrition education
 - Pain management
 - Physical therapy
 - Neuropathy management

- Barriers
 - Current
 - Financial concerns
 - Limited availability
 - Communication
 - Patient motivation
 - Potential
 - Motivation
 - Resources / availability
- Smoking Cessation
 - High favorability
- Marketing and Education
 - Face to face
 - Electronic

Toolkit Elements

Program Proposals

Patient Education
Materials

Clinic Processes

Business Plans

Evaluation and
Sustainability
Plans

Discussion (Supportive Services Toolkit)

- Program Proposals

- Prevalence of unmet wellness needs / side effects
- Untreated wellness needs
- Evidence-based treatment delivery methods
- Potential benefits

- Patient Education Materials

- Evidence-based treatments and delivery methods
- Prevalence of side effects
- Risks of untreated side effects
- Recommendations
- Available resources
- Format / reading level

- Clinic Processes

- Clinic operating procedures
- Intake forms
- Clinic note templates

- Business Plans

- Overview
- Market analysis
- Competitive analysis
- Cost-analysis
- Max-profit analysis
- Break-even analysis

Evaluation and Sustainability Plan

Evaluation Plan

- Program Approval and Implementation
- Patient Satisfaction Surveys
 - Knowledge
 - Experience
- Provider Satisfaction Surveys
 - Ease of referral process
 - Likelihood to reuse services
- Efficiency / Volume
 - Number of patients per clinic day
- Scheduled wait times
 - Next available appointment
- Ongoing Cost-Analysis
 - Ability to achieve net profit

Sustainability Plan

- Kotter's Eight Step Process for Leading Change (2018)
 - Build a guiding coalition
 - Enable action by removing barriers
 - Generate short-term wins
- Oncology Care Model (CMS, 2019)
 - Patient Experience
 - Admissions
 - ED Visits
- Quality Oncology Practice Initiative (ASCO, 2018)
 - Emotional well-being
 - Smoking Cessation

Implications for Practice

- Positive Return on Investment
- Oncology Care Model (CMS, 2019)
 - Increase Performance-Based Payments
- Quality Oncology Practice Initiative Certification (ASCO, 2018)
 - Maintain Certification
 - Continue to be Leaders in Oncology Care
- Patient Satisfaction Scores
- Quality of Life of Survivors

Dissemination of Results

Toolkit Acceptance by Key Stakeholders

Provider and Marketing Education

Final Defense

Submission to ScholarWorks

2019 DNP Conference

DNP Essentials Reflection

- **Essential I: Scientific Underpinnings for Practice**
 - Literature Review
 - Organizational Assessment
 - Toolkit Development
 - Health Promotion Model
- **Essential II: Organizational and Systems Leadership for Quality Improvement and Systems Thinking**
 - Evidence-Based Supportive Services Toolkit
 - Treatment delivery methods
 - Cost / break-even analyses
 - Evaluation and sustainability plans
- **Essential III: Clinical Scholarship and Analytical Methods for Evidence-Based Practice**
 - Incorporation of Evidence-Based Practice
- **Essential IV: Information Systems/Technology and Patient Care Technology for the Improvement and Transformation of Health Care**
 - Integrating Toolkit Aspects into the electronic health system
 - Avasure Symposium
- (American Association of Colleges of Nursing [AACN], 2006)

DNP Essentials Reflection

- **Essential V: Health Care Policy for Advocacy in Health Care**
 - Michigan Nursing Action Coalition
 - Advocacy Day
- **Essential VI: Interprofessional Collaboration for Improving Patient and Population Health Outcomes**
 - Stakeholder Meetings
 - Team Member Meetings
 - Provider Collaboration
- **Essential VII: Clinical Prevention and Population Health for Improving the Nation's Health**
 - Evaluation of Health Promotion Methods Related to the Oncology Population
- **Essential VIII: Advanced Nursing Practice**
 - Evidence-Based Practice
 - Advanced Practice Assessment, Clinical Judgement, and Critical Thinking
 - Partnerships
 - Supporting Fellow Nurses

- (AACN, 2006)

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Team Feedback and Questions