# Enhancing Oncology Clinic Efficiency and Patient-Centered Care Through Early Referral Patient Navigation

#### **Executive Summary**

In 2020 alone, there were 1,603,844 new cancer cases reported in the United States, with 602,347 resulting in death (Cancer Data and Statistics, 2023). Currently, at the Knight Cancer Institute (KCI), patients encounter multiple entry points, including referrals from surgical specialists, primary care providers, or external sources. This results in differing intake workflows for each type of malignancy, and some patients cannot use the established patient navigation system. Research indicates that poor care coordination is associated with medical errors, inadequate symptom management, and increased healthcare utilization and costs (Weaver and Jacobson, 2018). This project seeks to assess the necessary changes for a comprehensive system designed to streamline processes, facilitate early referrals, and enhance patient-centered navigation. Without such improvements, there is a risk that OHSU (Oregon Health Science University) patients with cancer may not receive the full range of services to optimize their treatment.

## **METHODS**

The Capstone Team conducted primary and secondary research. For the primary research, the team interviewed 20% of KCI access team members and 30% of KCI nurse navigators. The team asked each staff member ten questions such as "What do you think OHSU can do to improve services for new patients of the Knight Cancer Institute? What changes would you make to the patient handouts/education?" Additionally, to assess patient stakeholders, the team interviewed two patients and ten questions, such as "Were there any referrals or assistance that would have been helpful at the onset of treatment?" For the secondary research, the team utilized the OHSU Librarian research assistance and narrowed articles relevant to the delivery of oncology services in a university health system, specifically focused on patient navigation, scheduling practices, and patient needs assessments.

### **FINDINGS**

The team analyzed the results of the primary research and separated them into two categories: STAFF

- i. The scheduling process is satisfactory overall, but some specialties require longer wait times (upwards of two months) and multiple messages to the provider to complete the review.
- ii. The new patient questionnaire on MyChart has issues for some patients and requires a printer, which some patients do not have access to.
- iii. The website is confusing for some patients; Access to up-to-date resources and resource lists would be helpful for sharing with patients.
- iv. There is a lack of standardization of forms. The new patient packets do not include all available services or how to access them.

v. Staff expressed interest in regular meetings to discuss challenges and share advice for managing complex situations, like a treatment team meeting.

#### PATIENTS

- i. The patient felt their appointments were not coordinated to minimize his time off work.
- ii. The patient who came to the center after receiving a diagnosis at another system, did not get a navigator to answer questions and assist with care coordination.
- iii. The patient heard about the ancillary services but was not given clear instructions on how to access them.
- iv. The patient expressed feelings of a lack of empathy and understanding by some of the staff.
- v. The patient was disappointed with the handouts noting interest in more information on the diagnosis and questions to ask providers.
- vi. One of the patients was not living in the Portland area at the time of treatment and would have appreciated a list of hotels, their distance from OHSU, and transit recommendations.

# RECOMMENDATIONS

Based on the above primary and secondary research findings, the team recommended the following actions for improvement opportunities:

- i. Structured and Continuous Empathy Training Regimens. Insights from patient interviews revealed an opportunity for improvement in empathetic communication among the navigation team.
- ii. **Continuous Feedback Mechanisms.** Regular assessments, such as patient surveys and peer evaluations, can provide valuable insights into how well the training is translating into practice and highlight areas for additional growth (Banerjee et al., 2016).
- iii. **Focus on communication.** Research indicates that clear, consistent communication is essential for patient understanding and satisfaction (Epstein & Street, 2007). To standardize communication, we recommend developing a unified communication protocol that balances these approaches.
- iv. **Create Escalation Processes**. Establish a clear criterion for when and how to escalate issues ensures that problems are promptly addressed.
- v. **Create comprehensive new patient information packets**. Consider a standardized information packet containing certain core information ubiquitous to all oncology patients. This packet would ideally be accompanied by a specialty-specific information packet.
- vi. **Website redesign.** The website was described as a major issue for patients and staff. A more user-friendly website would embrace equitable access to information.
- vii. **Analysis of non-clinical roles**. A deeper analysis must be conducted to identify areas of improvement and enhance overall performance within the team.
- viii. **Analysis of clinical roles**. Further analysis of current roles within the nursing staff is necessary to fully understand the complaints of duplication and inconsistencies.

## **NEXT STEPS & CONCLUSION**

The Knight Cancer Institute has a solid foundation and exceeds national benchmarks in many areas. Staff expressed confidence in the services and the support they receive in general. The list of recommendations is meant to be used as launching points for KCI Leadership.

Though all the recommendations are important, the team recommends prioritizing an empathy training platform and plan, website redesign for ease of access to resources and key information and enhanced patient packets to ensure all patients are afforded the same treatment foundation and offerings. KCI has an effective, efficient, and compassionate team and leveraging those traits with the subject matter expertise on cancer treatment positions it to continually improve services for cancer patients.

# **TEAM MEMBERS**

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