

Session II

ASCO Quality Training Program

Improving Oral Chemotherapy Consent Compliance

Adena Cancer Center QTP Team

September 24, 2020



Institutional Overview

- Adena Cancer Center is a Commission on Cancer (CoC) accredited facility located in Chillicothe, Ohio.
- Free-standing clinic of a health system that includes 3 acute care hospitals; 2 of which are designated as Critical Access.
- There are a total of 5 Medical Oncologists, 2 Radiation Oncologists and 3 advance practice providers.
- Services were provided to patients from 26 different counties in 2017.
- 35,210 visits in 2018, a 9% increase over the prior year.
- A satellite center opened fall of 2019 in Washington Courthouse, Ohio with infusion services implemented in May 2020.

Team members

Core Team Members:

- Shylaja Mani, M.D., Medical Oncologist- Team Leader
- Paula Benner, BSN, CHC, CHPC, Quality Resource Specialist
- Jina Fields, BSN, Nurse Navigator
- Julie Mathey, RN, OCN, Manager-Infusion Clinic

Extended Team Members:

- Carrie North, RN Nurse Navigator
- Tracy Benner, LPN/Scribe Medical Oncology Clinic
- Lori Chesser, LPN/Scribe Medical Oncology Clinic
- Laney Thompson, Health Information Management

Project Sponsor:

- William A. Wilson, M.D., Medical Director
- Erin Woltz, BSN, Service Line Director

Improvement Coach:

- Laura Kaufman, MSN, RN, CPHQ, CMQ

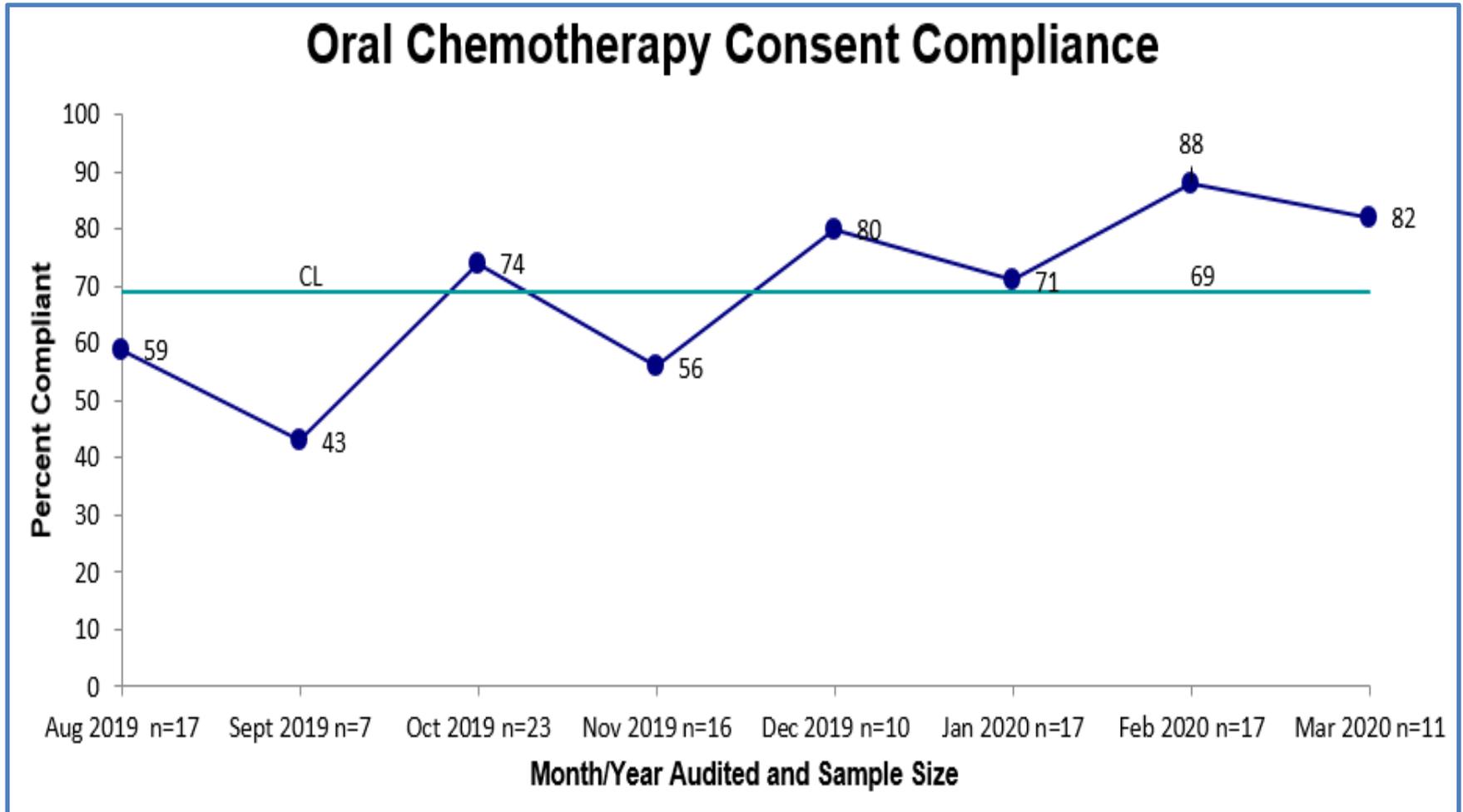
Problem Statement

- On average during August through December 2019, only 62% of all Adena Cancer Center Medical Oncology patients' prescribed new oral chemotherapy signed an Informed Consent prior to beginning therapy.
- Lack of compliance in providing informed consent leads to opportunities related to regulatory guidance for the Medical Oncology clinic; and compromises patient safety and autonomy.

Baseline data summary

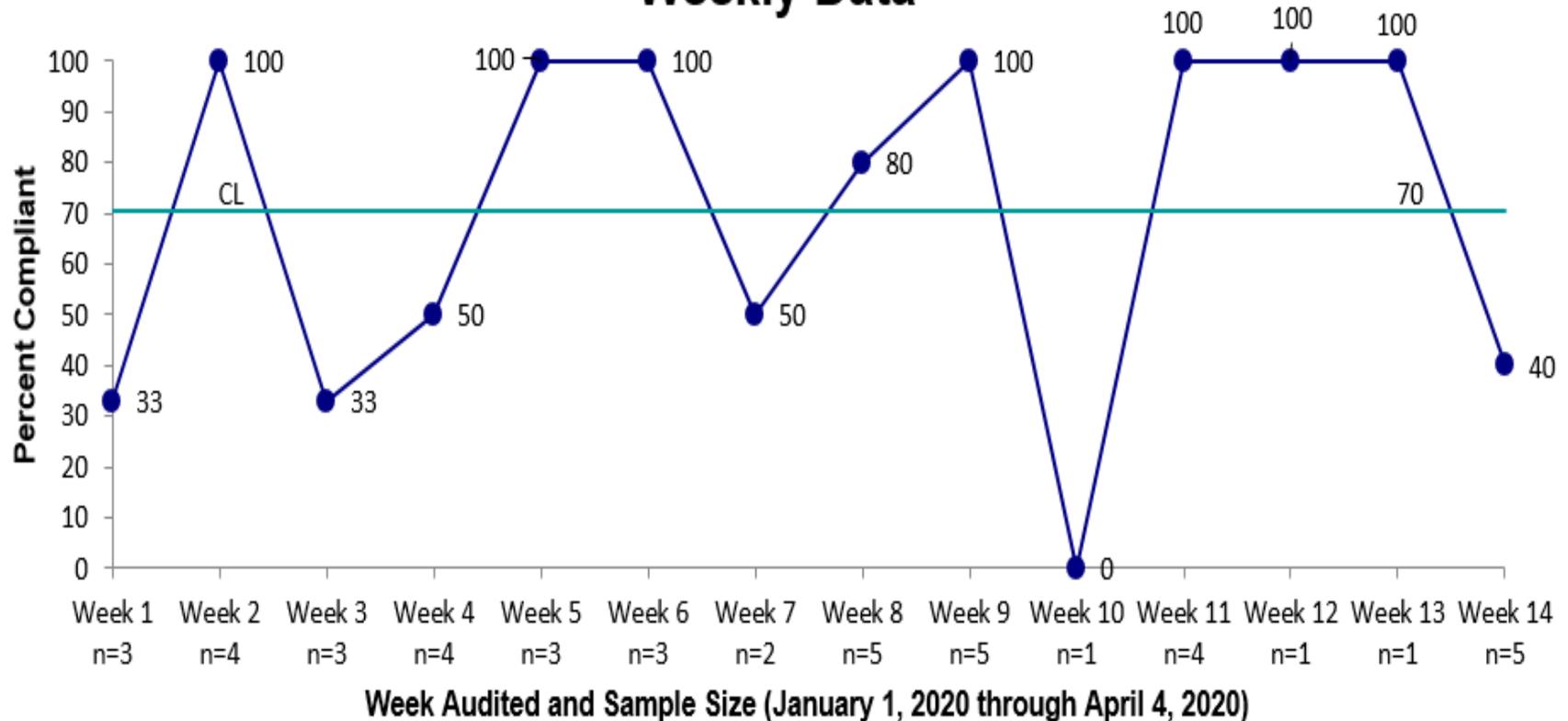
Item	Description
Measure:	Oral chemotherapy consent compliance
Patient population:	All Oncology patients beginning new oral chemotherapy.
Calculation methodology:	<p>Numerator= number of new oral chemotherapy accounts containing a signed Informed Consent; scanned into eCW.</p> <p>Denominator= total number of accounts with newly ordered oral chemotherapy.</p>
Data source:	eClinical Works (eCW)
Data collection frequency:	Monthly
Data limitations:	<ul style="list-style-type: none">• List of new prescribed oral chemotherapy obtained from the Cancer Center Pharmacy• Manual chart review

Baseline data



Baseline data

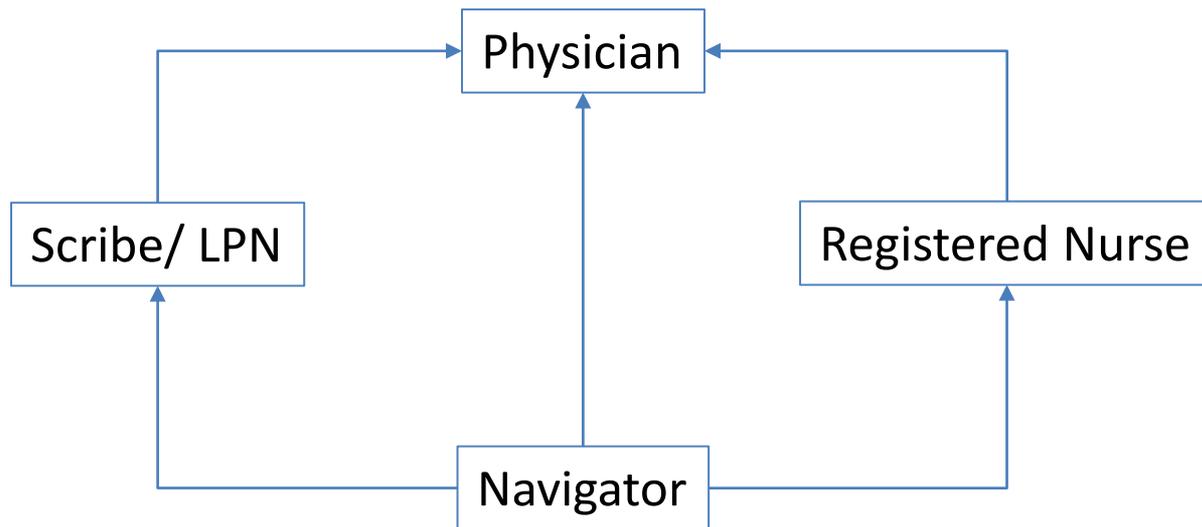
Oral Chemotherapy Informed Consent Compliance Weekly Data



Aim Statement

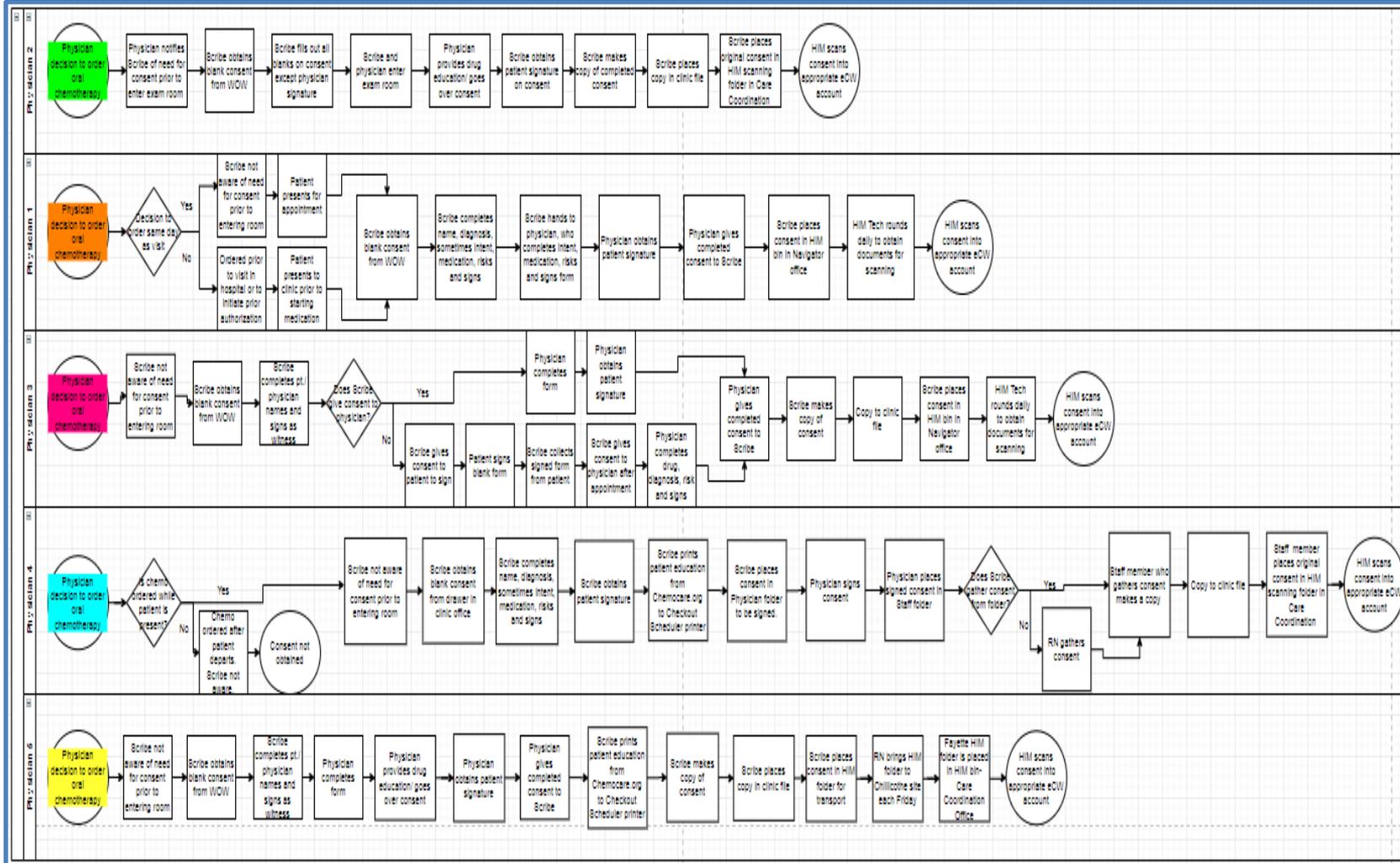
To increase the percent of compliance for obtaining oral chemotherapy consent from 62% to 92%. All Adena Cancer Center Medical Oncology patients, prescribed new oral chemotherapy will have signed an Informed Consent for the appropriate oral agent. The signed consent will be available in eClinical Works (eCW), prior to patient beginning oral chemotherapy. Our goal is for this increase to be achieved by September 1, 2020.

Adena Provider Team Structure



Process map

Compliance Rate by Provider Team
80%



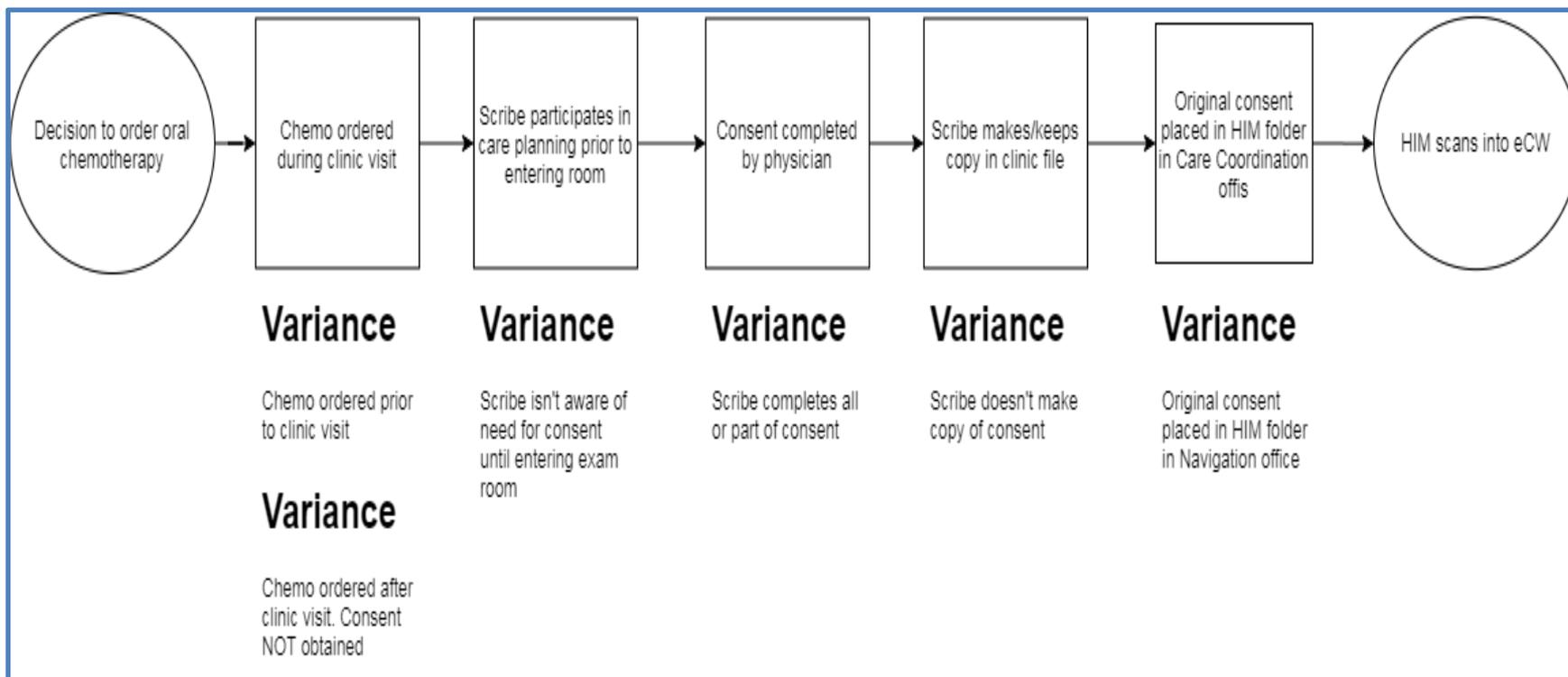
93%

53%

60%

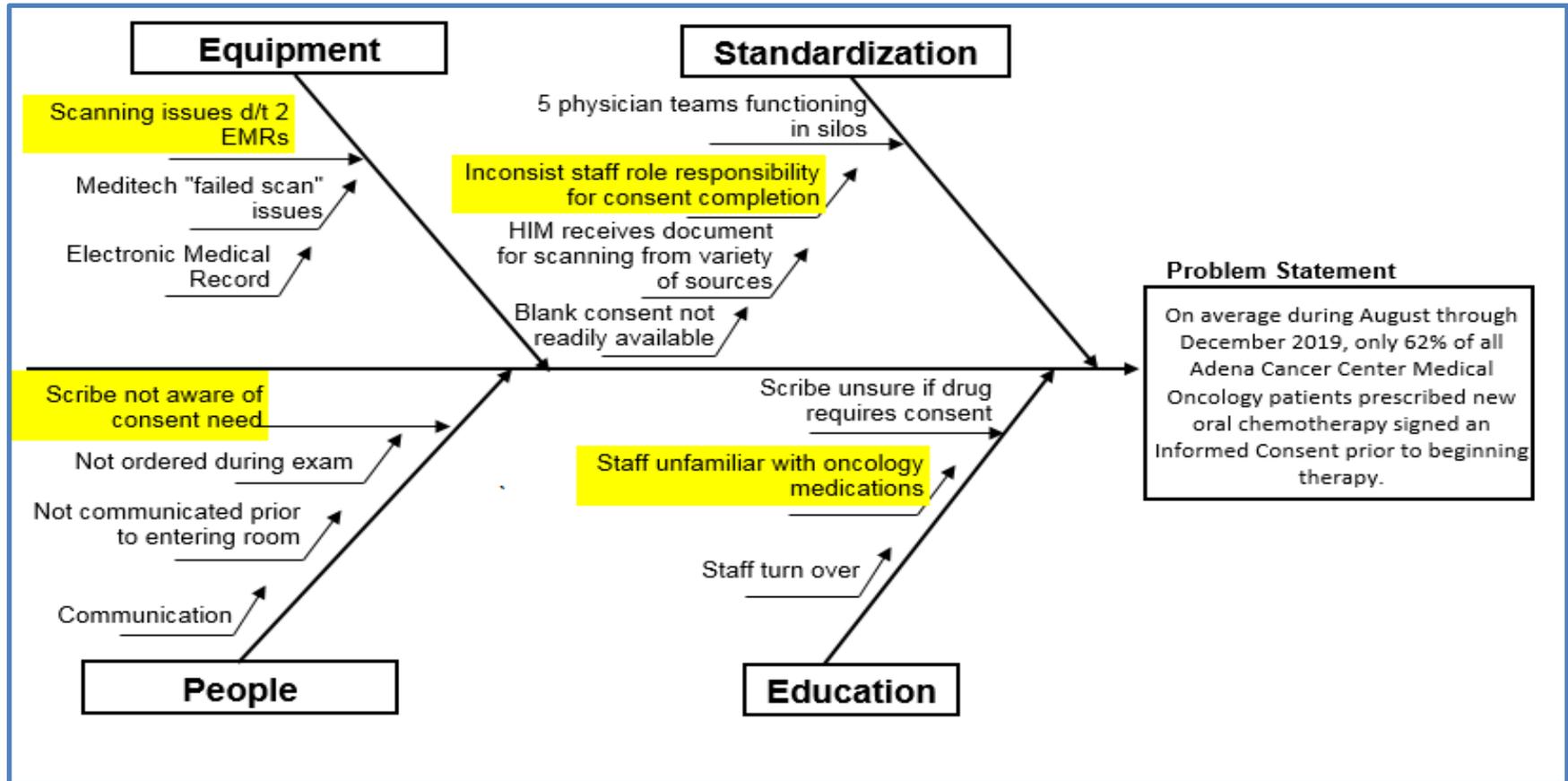
50%

Process map



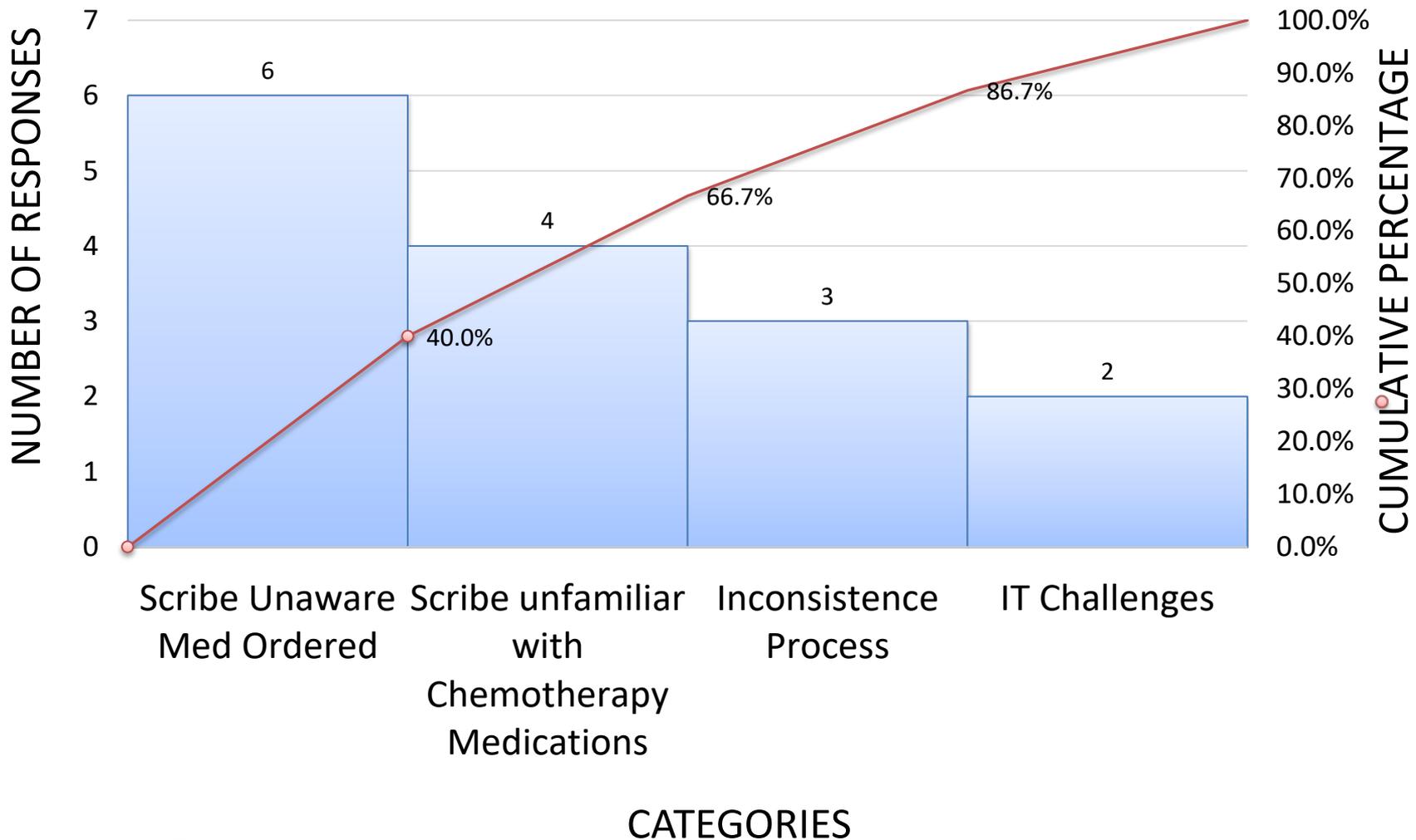
All teams had variances, but one baseline process was clearly identified.

Cause and Effect diagram

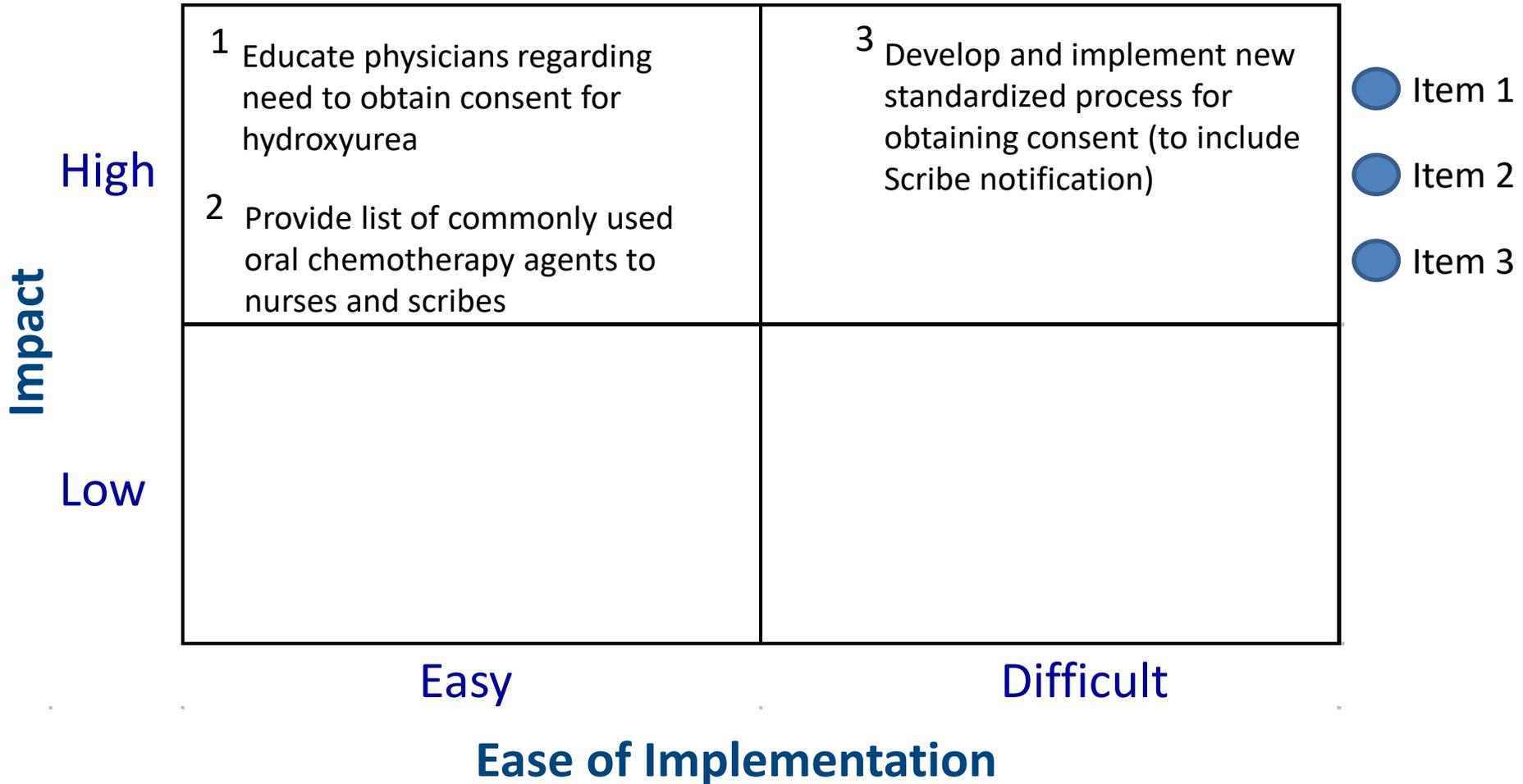


While creating the Cause and Effect diagram, it is clear communication is key to ensuring successful consent completion.

Pareto Chart



Countermeasures



Test of Change

PDSA Plan Cycle 1

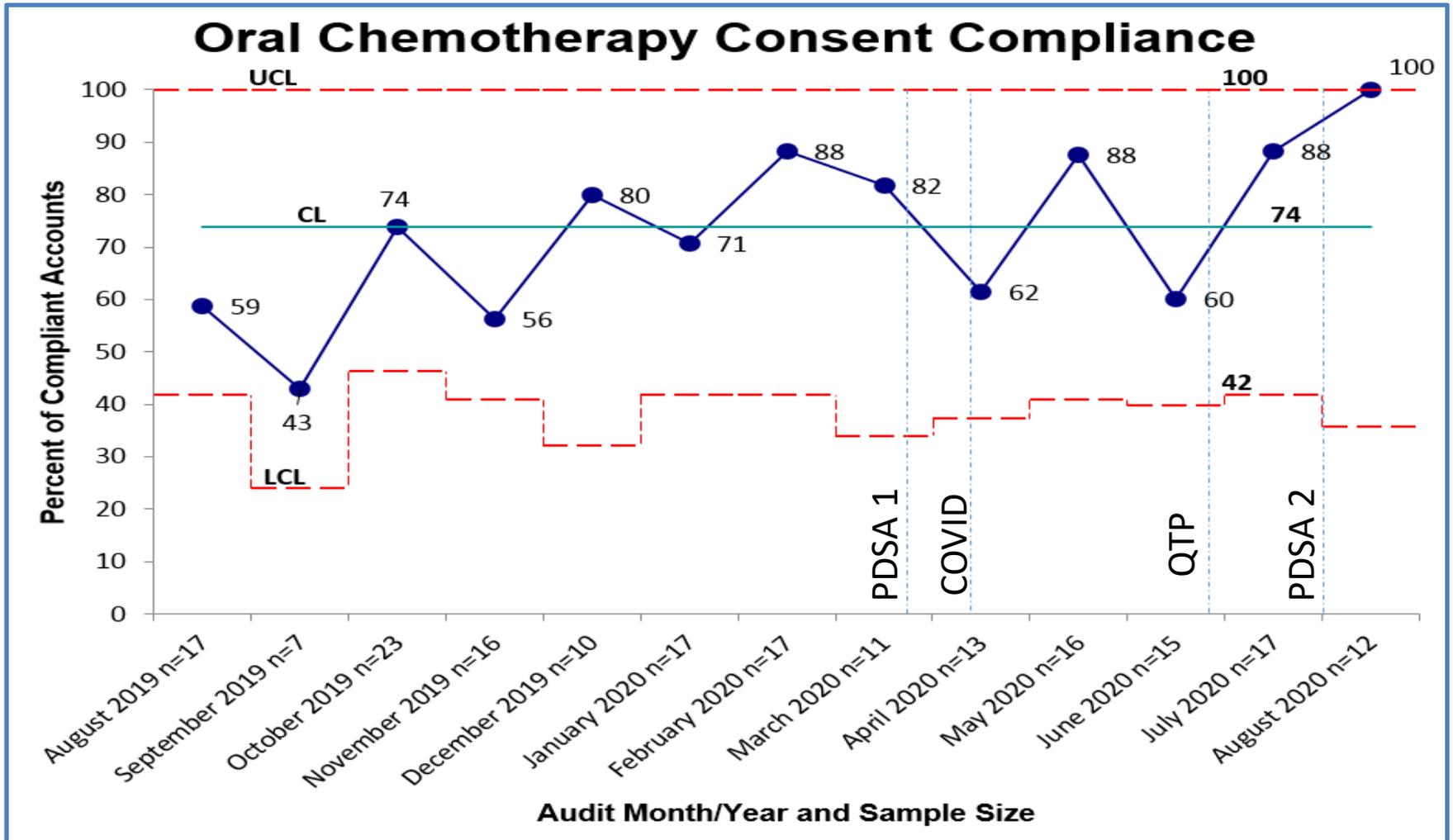
Date	PDSA Description	Result
3/18/20-7/1/20	<p>a.) Send email to all clinic staff notifying them of need to obtain hydroxyurea consent. Face-to-face 1:1 with providers notifying them of this expectation.</p> <p>b.) Manual audit of new start hydroxyurea accounts for the presence of a consent. We predict a compliance rate of 77%.</p>	Providers continue to inconsistently obtain consent for hydroxyurea.
3/18/20-7/1/20	<p>a.) Create document containing commonly prescribed oral chemotherapy agents. Send to staff via email and provide each Scribe a hard copy of the document.</p> <p>b.) Manual audit of consents obtained for new start oral chemotherapy agents. We predict a compliance rate of 77%.</p>	75% compliant. Providers disagree with some medications on list. Will revise in PDSA Cycle 2.
3/18/20-6/1/20	<p>a.) Distribute process map of agreed upon process to clinic staff. Face-to face meeting to discuss process map and answer questions.</p> <p>b.) Manual audit of consents obtained for new start oral chemotherapy agents. We predict a compliance rate of 77%.</p>	75% compliant. Attributed to process changes related to COVID and recent staff turnover.

Test of Change

PDSA Plan Cycle 2

Date	PDSA Description	Result
8/1/2020-9/1/2020	a.) Provide verbal re-education to all providers during provider bi-weekly meeting. (complete 7/29/2020). b.) Manual audit of new start hydroxyurea accounts for the presence of a consent. We predict a compliance rate of 92%.	Compliance for the month of August was 100% (1 prescription)
8/1/2020-9/1/2020	a.) Revise and provide written and emailed list of commonly prescribed oral chemotherapy medications. b.) Manual audit of consents obtained for new start oral chemotherapy agents. We predict a compliance rate of 92%.	Compliance for the month of August was 100% (11 prescriptions)
8/1/20-9/1/20	a.) Distribute process map of agreed upon process to clinic staff. Face-to face meeting to discuss process map and answer questions. b.) Manual audit of consents obtained for new start oral chemotherapy agents. We predict a compliance rate of 92%.	Compliance for the month of August was 100%

Change Data P Chart



Next steps

Sustainability Plan

Next Steps	Owner
Final Quality Training Program presentation	Team
Continue to audit monthly and report at monthly Quality Collaborative Team meeting through 2020. Adjustments to be made to the process as needed.	Paula
Begin quarterly audits for 2021	Paula
Revisit process with EMR switch to EPIC	Team

Conclusion

- Findings
- Quality Improvement tools
- Sharing of information learned
- Publication
- Niarchos Foundation and ASCO