

Recreating Palliative Radiation Oncology: A Sustainable Model of Multidisciplinary Care



Cross Cancer Institute

Background

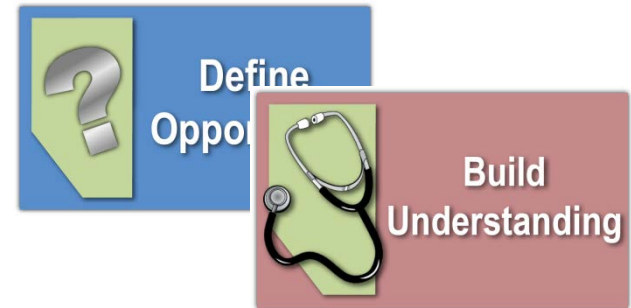
- PRO in existence since 2006
- 1000 + Palliative Radiation Therapy Patients annually
- Provides access for patients with comprehensive multidisciplinary supportive needs
- Dedicated team of Health Professionals ranging from pharmacy to occupational therapy (Radiation Therapist, Pharmacist, RN and Physicians)

Problem / Issue

Issues included:

- Multiple treatment pathways
- Inconsistent symptom screening
- Palliative consults lacked standardization
- Poor continuity of care, follow-up and accountability
- Inconsistency of available MDT services, or unscheduled/unplanned requests (schedule and workflow disruptions)
- Suboptimal clinic flow (providers and patients waiting)
- Limited nursing support to assess, triage and care for the patients





Physician Engagement

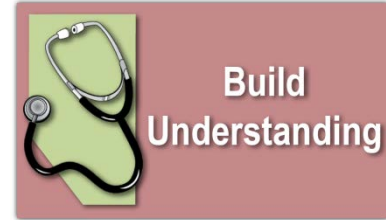
- 5 P

*“I do not
current f
consult a*

Goal:
100% of the appropriate patients
and providers using the PRO
process

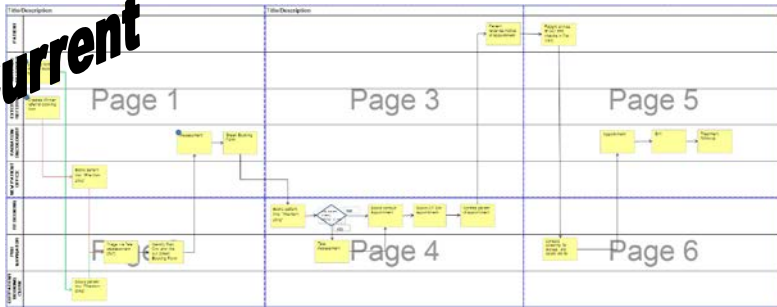
66% NO

*“For palliative patients, easy and timely
access to effective relief are the metrics
which matter to patients.”*



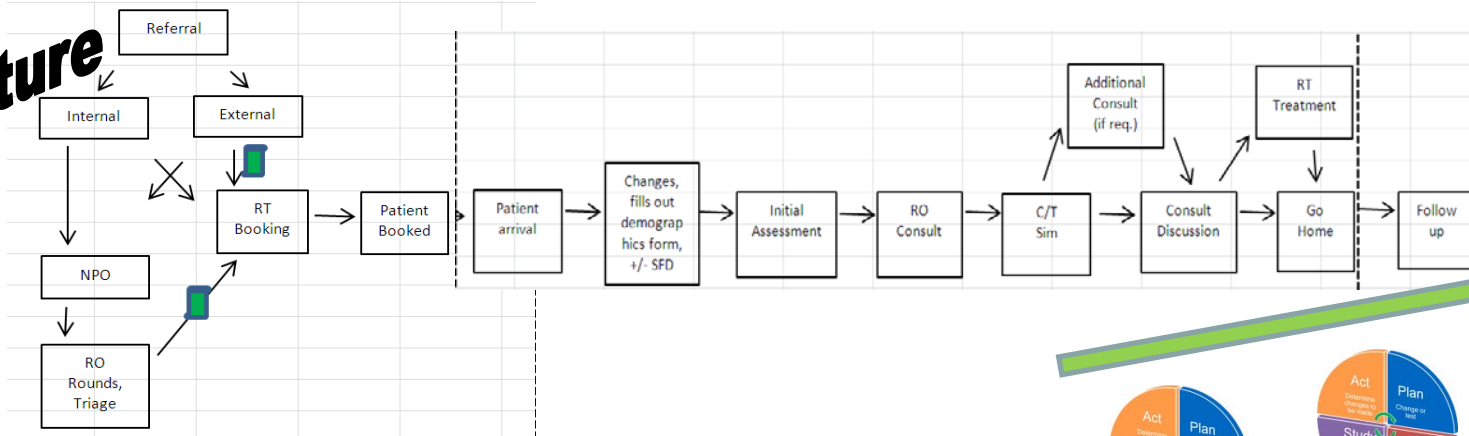
Intervention

Current

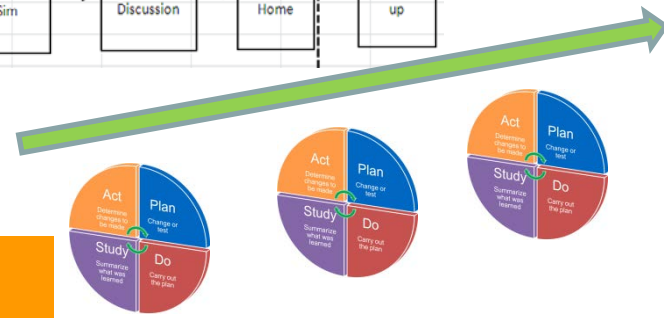


Analyze the Current State and
Design the Future State

Future



Execute implementation plan !





Act to Improve

Key Implementation Elements

- Communication & Training
- Visual Controls
- Measures
- Feedback

Results

	Fall 2014	Spring 2015
Average wait time (referral to consult)	5 days	3 days
Patients ready on time for CT Simulation	<50%	>90%
Patients ready on time for RT Consult	<50%	>90%
# Patients seen	Increased by 40%	
# of Physicians referring to PRO clinic	(24 / 24) 100%	

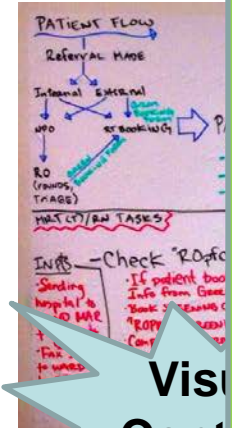
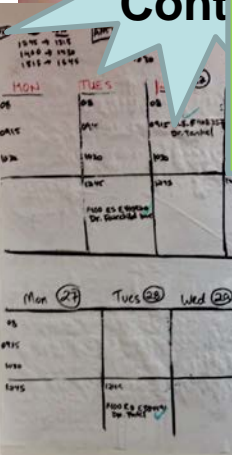
Key Sustainability Factors



"Since the PRO clinic began to function, the process of referral has been easy and streamlined, and takes only minutes to organize."

"Since its incarnation as the rapid access bone and brain clinics, now unified as PRO clinic, patients from the north have benefited tremendously. Frequently our bone metastasis patients can be treated in one day."

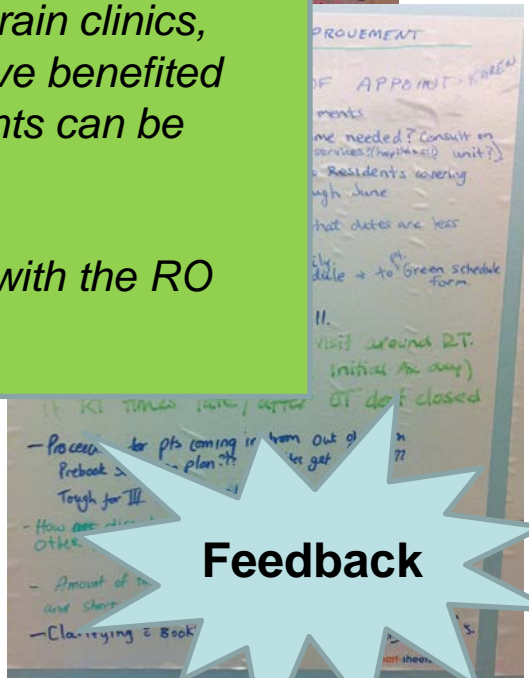
"I have noted much change. I usually speak directly with the RO involved or on intake for lung at the time."

MON TUES WED
1988-1990
1990-1992
1992-1994

April 15	9:15	April 16		
April 21				
April 13	April 28	BL - DONE		
April 15	April 28	BL - DONE		
April 17	April 23	BL - DONE	see with/on	

- Instructions**
- Connected with external referral sources
 - Presented at Grand Rounds



PROUPEMENT
OF APPOINT - KOREA
ments
me needed? Consult on services/medical unit?
Residents covering
ugh June
that dates are less
dile + to Green schedule form.
11.
visit around RT.
Initial (no any)
OT do F closed

- Process for pts coming in from out of
- Prebook & plan??
- Tough for III
- How see other
- Amount of time and staff
- Clarifying & Book

Feedback

Thank-you