



# National Navigation Roundtable

We are always grateful for each of our amazing advocates in patient navigation, and we are extra thankful for all the great work we have done together this year!

Wishing you a safe and happy holiday season!

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***Policy: Evaluating Sustainability of Patient Navigation Programs in Oncology by Length of Existence, Funding, and Payment Model***

***Participation***

January 12, 2023

1:00-2:00 PM ET

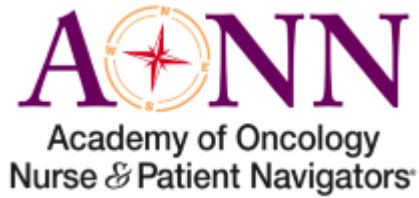
[PRE-READ THE ARTICLE](#)

This session identifies factors that may promote the long-term sustainability of patient navigation programs. It will also highlight some issues that may need to be addressed to incorporate navigation into health care payment systems better.

[REGISTER HERE](#)



**Navigation Acuity Tool**  
(due December 5, 2022)



The Academy of Oncology Nurse & Patient Navigators' (AONN+) National Navigation Acuity Team is seeking oncology programs to participate in a new Navigation Acuity Tool quality initiative. Interested programs should submit a letter of intent no later than **December 5, 2022**. This quality initiative is the next step in the team's work to develop a standardized, validated, evidence-based Navigation Acuity Tool for oncology navigation programs. The tool will help address gaps that exist with

current acuity tools, both in reliability and validity, while allowing oncology navigators to accurately characterize the complexity of their patients, aid in the allocation of navigation resources, and measure the effectiveness of navigation on patient outcomes. Astellas Pharma US, Inc., is sponsoring this body of work.

[Learn More](#)  
[Submit Letter of Intent](#)

## Call to Action Series Questions, Answers and Feedback (Sessions 1 - 3)

**Session 1: Barriers and Opportunities to Measuring Oncology Patient Navigation Impact: A National Survey:** [archived recording](#)

**Q:** In programs that navigate across the entire continuum, is the navigation typically "patient-centered" or "doctor-centered"? In other words, does the navigator "in-take" the patient at the time of an abnormal screen and follow them across the continuum OR does the patient get handed off to different navigators as they move through diagnostic studies, radiation treatment, chemotherapy, surgery, and survivorship follow-up?

**A:** Great Question! Our survey did not ask specifically about the 'hand offs'. 45% of respondents reported navigating from screening to diagnosis into treatment and survivorship, while only 20% reported that they only navigate in one of those areas



**Session #2: Oncology Navigation Standards of Professional Practice – PONT Standards:** [archived recording](#)

**Statement:** "I am going to use these (PONT Standards) and compare it to our present program. This will offer guidance for next year's focus efforts."

**Session #3: Flexibility, Adaptation and Roles of Patient Navigators in Oncology during COVID-19:** [archived recording](#)

**Q:** How did COVID's impact on navigation effect any reporting to CoC or NAPBC or other accreditation authority?

**A:** All accreditation programs worked with programs through Covid as they virtually performed accreditation visits. During the recovery they have worked with programs to address QI studies on screening to help standards to be met.



## Updates from the Patient Navigation Initiative Program:

The American Cancer Society (ACS) has awarded an additional 6 navigation [capacity-building grants](#). This grant program represents a \$6 million re-investment in patient navigation as part of an overall strategy for elevating patient navigation sustainability, impact, and delivery. A total of 20 sites have

been funded.

The following grantees were funded as of October 1, 2022:

- Harold C. Simmons Comprehensive Cancer Center, UT Southwestern, Dallas, TX
- Markey Cancer Center-University of Kentucky, Lexington, KY
- Stanford Cancer Institute, Palo Alto, CA
- Stephenson Cancer Center, University of OK, Oklahoma City, OK
- University of Southern California, Los Angeles, CA
- University of Texas Health, San Antonio, TX

A kickoff call was held in October with a brief introduction from each of the grantees. The grantees shared a summary of goals and objectives, a strength or area of expertise, immediate learning needs and biggest anticipated challenge.

A data collection kick-off call was held in November. Each grantee will report on 8 required AONN+ metrics. ACS selected metrics from 3 domains. Grantees will also be reporting aggregate patient demographics.

Learning community workshops will begin in January 2023 and an PN Initiative section will be added to the NNRT website.

**"I am so excited to be involved in this vitally important work!"** stated Heather Ciccarelli, MSW, Director, Patient Navigation Initiative

Sponsors for this initiative is being led by Janssen, along with AstraZeneca and Bristol Myers Squibb. Additional sponsors include GlaxoSmithKline, Novocure, Daiichi Sankyo and other funders.

Metric	Definition
<b>Domain: Operations Management</b>	
• Navigation Caseload	Number of <b>unique</b> cancer patients navigated per month (*see demographics)
• No-Show Rate	Number of navigated patients who do not complete a scheduled appointment per month
<b>Domain: Psychosocial Support, Assessment</b>	
• Psychosocial Support and Assessment	Number of navigated patients per month who received psychosocial distress screening at a pivotal medical visit
<b>Domain: Coordination of Care/Care Transitions</b>	
• Barriers to Care	Top 3 barriers to care identified by the program
• Treatment Compliance	Percentage of navigated patients who adhere to institutional treatment pathways per quarter
• Diagnosis to Initial Treatment	Average number of days from date of diagnosis to date of first treatment for navigated patients
• Clinical Trials Education	Number of patients educated on clinical trials by the navigator per month
• Clinical Trials Referral (optional)	Number of navigated patients per month referred to clinical trials staff

ACS Patient Initiative's Program selected metrics: 3 domains (from AONN+ Evidence-Based Navigation Metrics)

## What we're reading:

1. Oncology Times article: [Patient Navigation Program Lowers Cancer Care Costs](#)
2. The Fred Hutchinson Cancer Center (formerly Seattle Cancer Care Alliance): [Navigating cancer and barriers, one person at a time](#)
3. [Navigating the Lung Cancer Journey](#)
4. [A Practitioner's Guide For Advancing Health Equity: Community Strategies for Preventing Chronic Disease](#)
5. [Advancing Equity: Adapting to Local Context and Confronting Power Dynamics Lessons Learned from Accountable Communities of/for Health](#)

## Resources to share:

- American Cancer Society's [Caregiver Resource Guide](#)
- Spanish Guide for Patient Navigators: [GW Cancer Center's Guide for Patient Navigators in Spanish](#) (PDF) is available. The 508-compliant guide is a supplement to their [Oncology Patient Navigator Training: The Fundamentals](#). The comprehensive, competency-based training uses evidence-based information and case studies to prepare patient navigators to effectively address barriers to care for cancer patients and survivors.
- FREE - Cancer Survivorship E-Learning Series: "[Cancer Survivorship E- Learning Series](#)" in support of primary care providers.
- GW's [Cancer Survivorship E-Learning Modules](#), free learning modules.
- NEW from GW: [Financial Navigation Training and Tip Sheet](#)
- Paying For Colorectal Cancer Screening Patient Navigation [Interactive Website](#)
- WHO new campaign to amplify the lived experience of people affected by [cancer survey](#).
- CDC's [Learning Health Connection](#) (this month, *Public Health Equity and Support Health for People Experiencing Homelessness*)



### Program highlight:

The Duke Cancer Institute Community Outreach, Engagement, and Equity program is seeking support from patient, social workers & nurse navigators, and financial counselors connected to the North Carolina cancer center system to create a centralized healthcare navigator directory platform. By compiling basic contact information of participants into a widely accessible database, the team hopes to streamline connections between healthcare navigators, as well as reduce some of the barriers to care that cancer patients and navigators often face during the patient referral process.

You can learn more about their initiative [here](#) and the Duke patient navigation model [here](#).

To opt in to being list in the database please link [here](#)

Visit [NNRT's website](#) or contact NNRT's Director, Kristina Thomson at [kristina.thomson@cancer.org](mailto:kristina.thomson@cancer.org) or Program Manager, [michelle.chappell@cancer.org](mailto:michelle.chappell@cancer.org)



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