Building Reliable Oncology Navigation, Centered Around Neoadjuvant Therapy: The BRONx-CAN project

American Cancer Society®

Montefiore Einstein Comprehensive Cancer Center
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Background

For patients with locally advanced, non-metastatic solid tumors, multimodality therapy is increasingly utilizing neoadjuvant therapy (NAT). This creates a more complicated therapeutic pathway (see figure) for patients, which can lead to increased risk of delays or non-adherence. Our population is comprised primarily of residents of Latinx and African American heritage, and is also one of the most financially disadvantaged in the country with over 30% living at or below the poverty level. Clearly, this establishes a role for navigation to improve time to treatment initiation (TTI) and outcomes in our relatively unique patient population. We sought to assess whether navigation could improve timelines and adherence for oncology patients on these more complicated, neoadjuvant protocols

Project Design/Methods

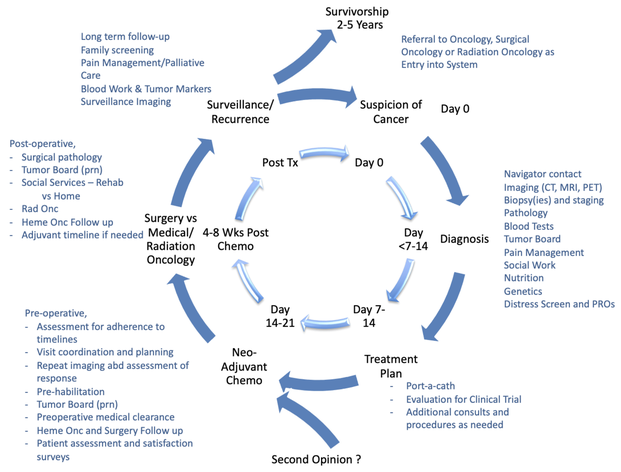
Aim 1. To increase the proportion of NAT patients undergoing Oncology Nurse Navigation and decrease the TTI of NAT.
Aim 2. To increase NAT treatment adherence.
Aim 3. To ensure timely receipt of surgery following NAT.
Aim 4. To optimize patient engagement and understand patient barriers and preferences during NAT.

Interim Results

- prior to navigation initiation, approximately 27 days from diagnosis to treatment initiation and 30 – 40% missed appointments for various multidisciplinary providers/diagnostic workup

- Novel Cancer dashboard system tracking TTI over all cancer sites, as well as other timeline metrics (radiology and pathology oreder to results & surgery/chemo/radiation order to initiation

- Staffing issues for navigation position have led to thus far only a few months of data collection
  - 60 patients navigated thus far
  - Initiation of therapy slightly decreased
  - Improved adherence to care/retention of patients
  - Anecdotal improved patients satisfaction (“The navigator is the most important person in my care team!”)



Innovation

- Historically disadvantaged patient population with high risk of delays/lapses in oncologic therapy
- impact of oncology navigation in this unique population with NAT that is increasingly being utilized in solid tumor malignancies
- Systematic measuring of key timelines in patient therapeutic pathway and social needs screening

Implications for Sustainable Practice

- Impactful Domains: This project is making a significant impact on the domains of timelines and adherence to therapy for neoadjuvant patients
- Supporting Evidence: Demonstrate this impact through quantitative data
- Challenges: Challenges in these domains include maintenance of adequate staffing and union regulation
- Addressing Challenges: To address these challenges, we are implementing possible expansion under new CMS reimbursement/fee schedule

Next Steps:

- **Measure impact of NAT navigator on timeline metrics and adherence to treatment**
- **Expand navigation program using new CMS reimbursement and improved timeline metrics as justification**

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