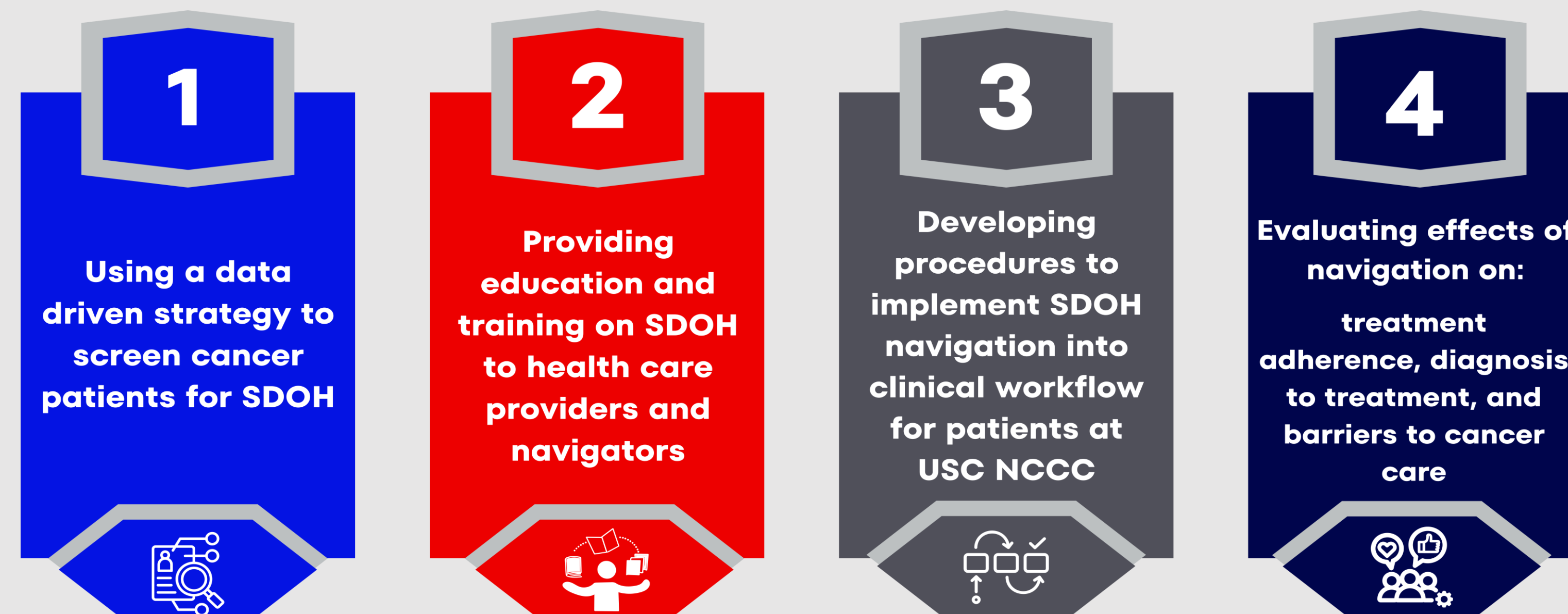


Navigation Capacity-Building Initiative Program to Improve the Quality and Sustainability of Clinic-Based Patient Navigation

Kelsie Campbell, MPH; Joi Torrence-Hill, MHA, FACHE; Karey A. Whitten, RN, BSN, MBA;
Melissa Abbud, BSN, RN; Jynette Querubin, RN, MSN; Trista A. Beard, Ed.D.; Chanita Hughes Halbert, Ph.D.

Background

- To address critical gaps in patient navigation, we initiated targeted improvements at the **USC Norris Comprehensive Cancer Center** (USC NCCC) at the University of Southern California.
- Our aim is to enhance the quality and sustainability of clinic-based patient navigation, which we are achieving by:

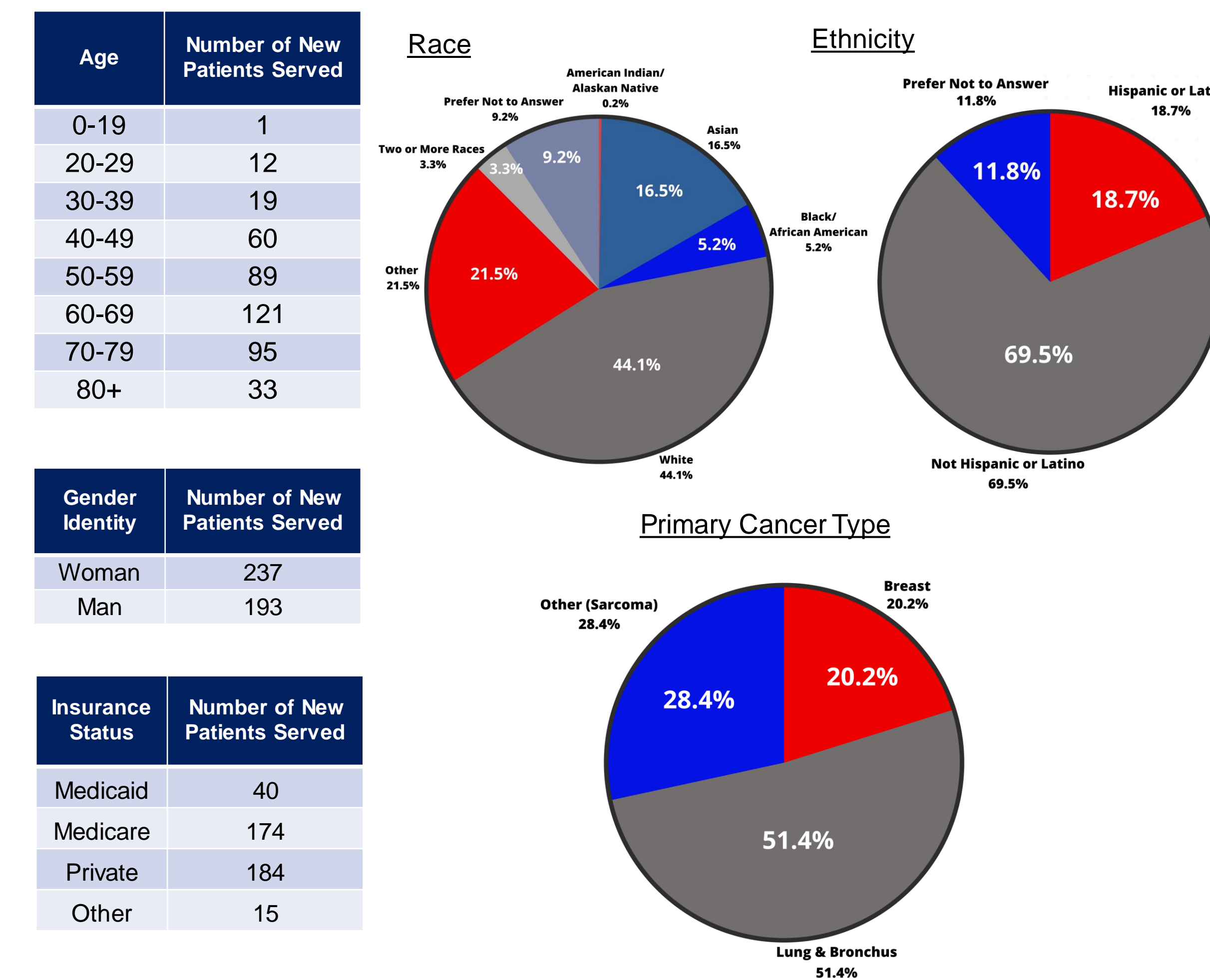


Project Design/Methods

- Our sample is comprised of cancer patients undergoing treatment at USC NCCC in Los Angeles, California.
- In collaboration with navigation teams specializing in **Breast**, **Lung**, and **Other (Sarcoma) cancers**, we undertook a **quality improvement project**, harnessing both navigator-collected data and **electronic health record (EHR)** extractions.
- This approach allowed us to calculate precise metrics and refine practices, ensuring continuous enhancement of patient navigation services.
- The project's framework is grounded in models of minority health and cancer disparities, patient navigation, and the integration of data science into oncology.
- We utilize the Distress Thermometer, developed by the National Comprehensive Cancer Network, to screen patients effectively for psychosocial issues.

Interim Results

Demographics of population served (Jul 1, 2022 – Dec 31, 2023)

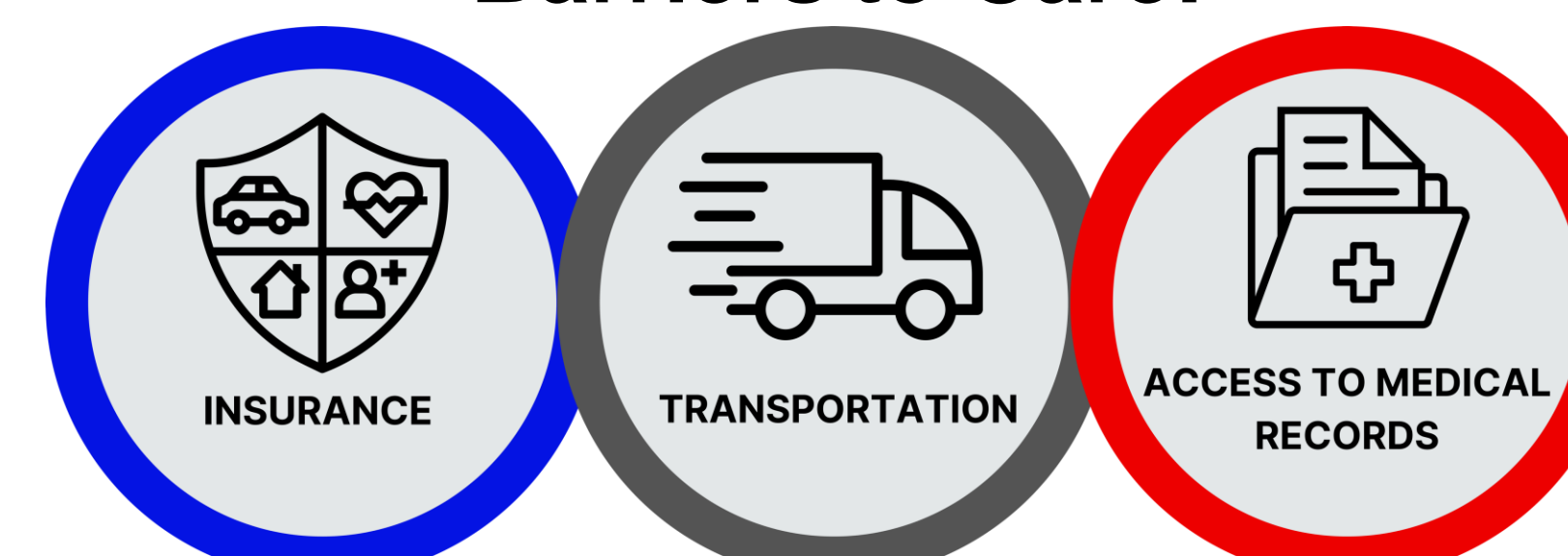


- Diverse Population:** Patients at USC NCCC are representative of the center's catchment area.
- Inclusive Sample:** Navigation for cancer care is delivered to diverse patient groups.

ACS Report Data (Jul 1, 2022 – Dec 31, 2023)

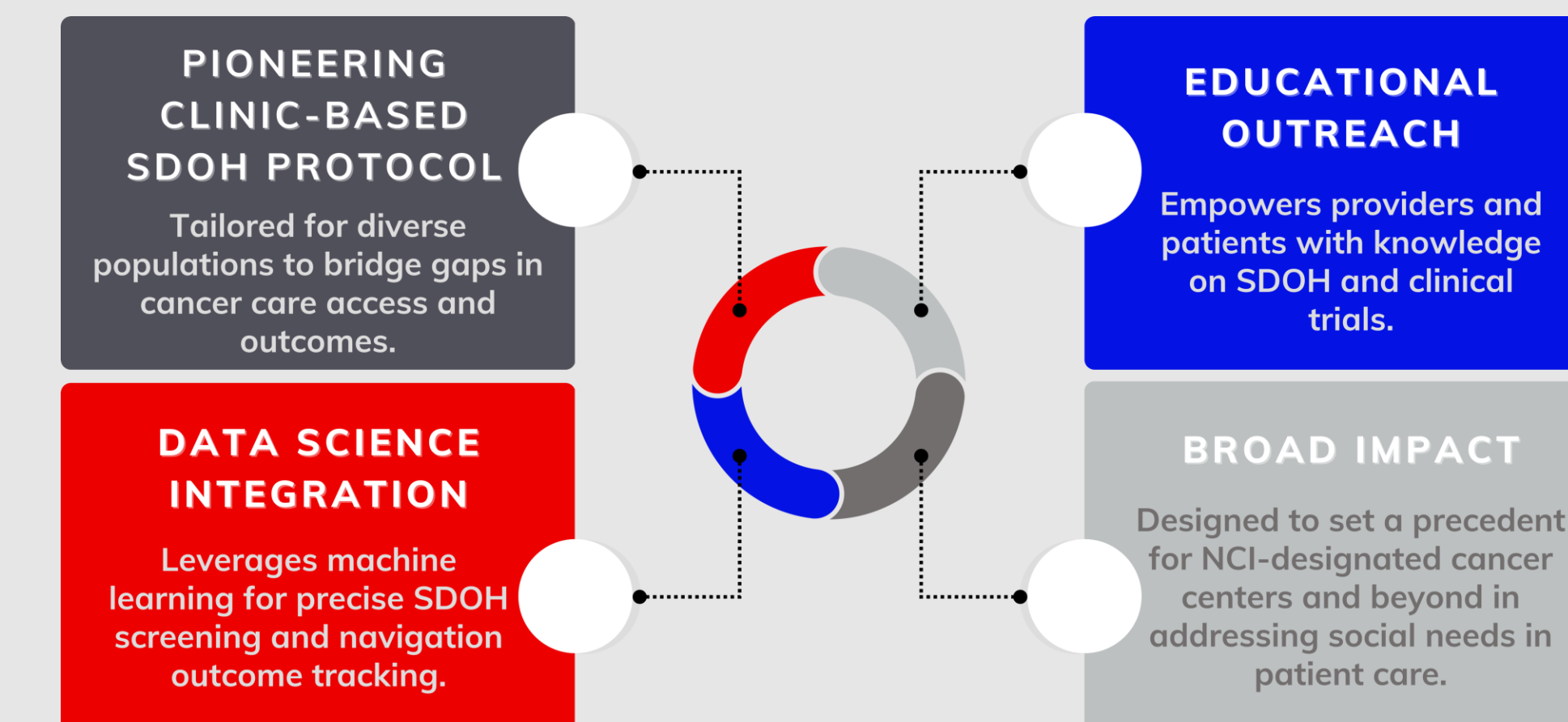
| Report | Navigation Caseload (number of patients at end of reporting period) | Treatment Compliance (%) | Average Diagnosis to Treatment (days) |
|--|--|--------------------------|---------------------------------------|
| Baseline (Jul 1, 2022 – Dec 31, 2022) | 158 | 100 | 33.2 |
| Follow-up (Jan 1, 2023 – Jun 30, 2023) | 357 | 100 | 33.3 |
| Follow-up (Jul 1, 2023 – Dec 31, 2023) | 426 | 98.8 | 25.8 |

Barriers to Care:



Innovation

- USC NCCC will build on patient navigation by addressing social determinants of cancer health disparities as part of a new center for cancer prevention.
- We are addressing the critical need for equitable access to treatments and precision oncology through data driven approaches.

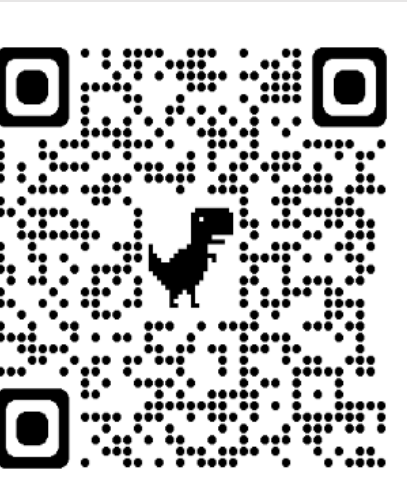


Implications for Sustainable Practice

- Impactful Domains:** This project is making a significant impact on the domains of **Outcomes & Effectiveness** and **Organizational Context & Capacity**.
- Supporting Evidence:** There has been a decrease in the average diagnosis to treatment time from 33.3 days to 25.8 days. Treatment compliance rates have been maintained.
- Challenges:** Challenges relate to issues with workflow integration:
 - Understanding data systems for cancer care delivery
 - Implementing standardized procedures to track and monitor patient navigation
 - Establishing methods for data tracking that are integrated into the clinical nurse navigator's role
- Patient barriers:** Insurance issues, obtaining timely insurance authorizations and access to medical records, overcoming transportation barriers to appointments, and understanding the distinct navigation needs for different cancer types (i.e., Breast, Lung, and Sarcoma).
- Addressing Challenges:** To address these challenges, we are implementing strategies such as adapting clinical workflows to accommodate SDOH navigation, creating efficient systems for record sharing, and leveraging EHR data using advanced data extraction techniques and machine learning to improve our navigation strategies and tailor patient support.

Next steps:

- Standardize Data Tracking and Monitoring:** Facilitate widespread adoption of the updated Navigator Tracker Sheet for consistent data recording and enhanced monitoring across navigation services.
- Integrate SDOH Screening and Navigation:** Partner with healthcare system to screen patients for social determinants of health and recruit SDOH navigators.



Acknowledgement of funding: This project is supported by a patient navigation capacity-building grant from the American Cancer Society.