Models of Care that Integrate Services and Stratify Delivery by Risk and Needs

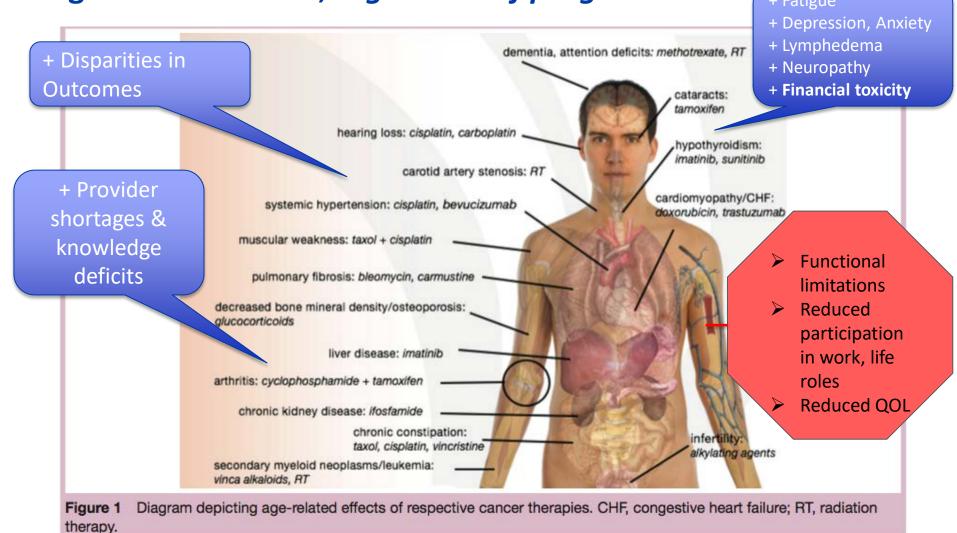
Catherine M. Alfano, PhD

Vice President, Cancer Care Management & Research
Northwell Health Cancer Institute

Addressing the Adverse Consequences of Cancer Treatment National Cancer Policy Forum November 9-10, 2020



Survivorship Starts at Diagnosis to Equitably Improve Multiple Long-term Outcomes; regardless of prognosis



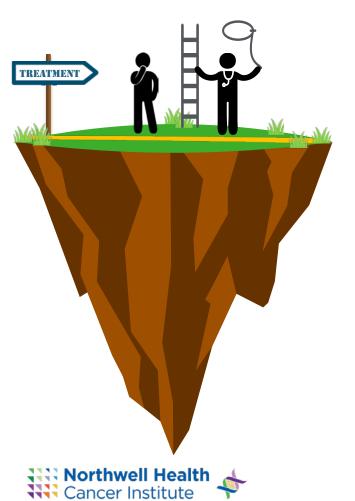


Current State of Cancer Treatment



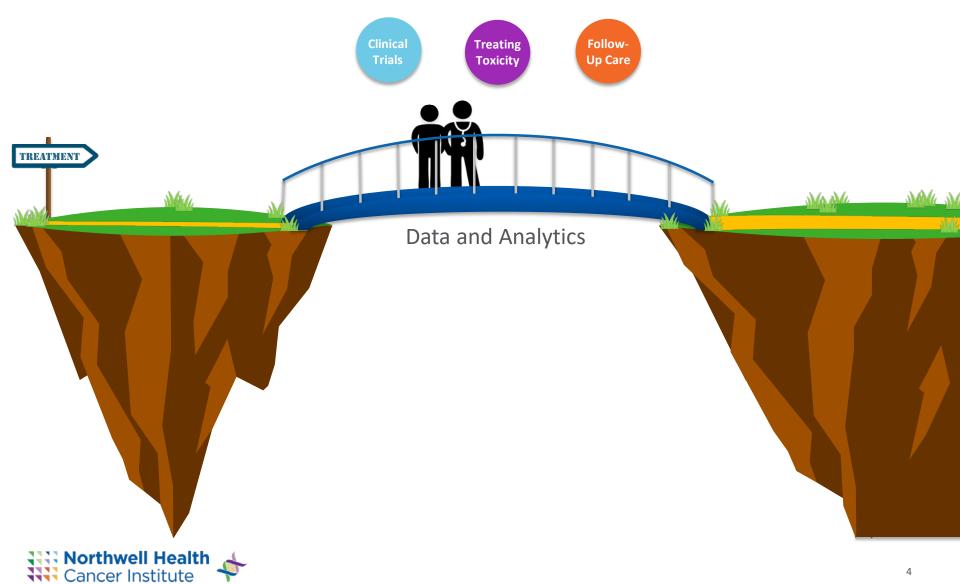








The Future: The Northwell Way



Best in Class Survivorship Care Solves a Complex Problem: Meeting the Quadruple Aim

- Timely clinical trial access
- Patient assessment and subspecialist referral from diagnosis forward prevents/ameliorates problems
- Consistent follow-up pathway algorithms, personalized to patient needs

Patient Outcomes

Patient Experience

- Coordinate & integrate care: ONC-primary care-subspecialists
- Seamless transition ONCfollow-up care
- High touch care, virtually where possible

 Increase subspecialist referrals

- Increase # new ONC patients, # retained patients
- Meet accreditation standards/↑ rankings

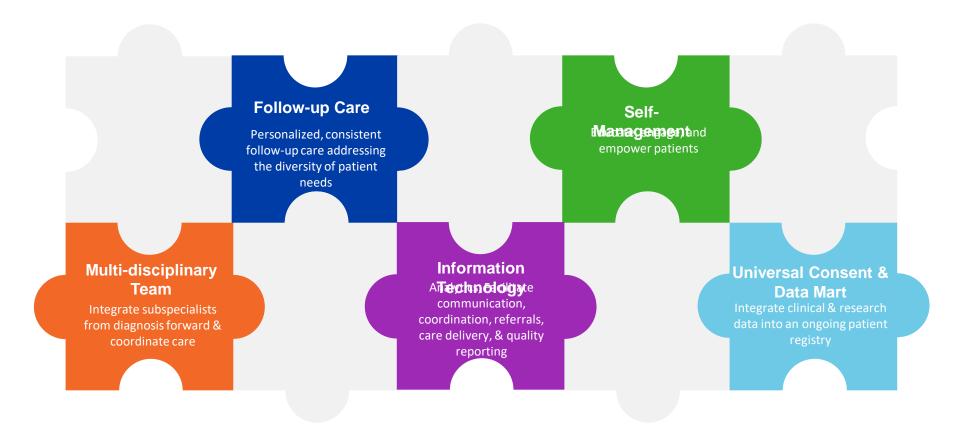
Efficiency & Costs

Happy Clinicians

- Enable provision of best in class care
- Prioritize time for high acuity patients
- Decrease administrative burden

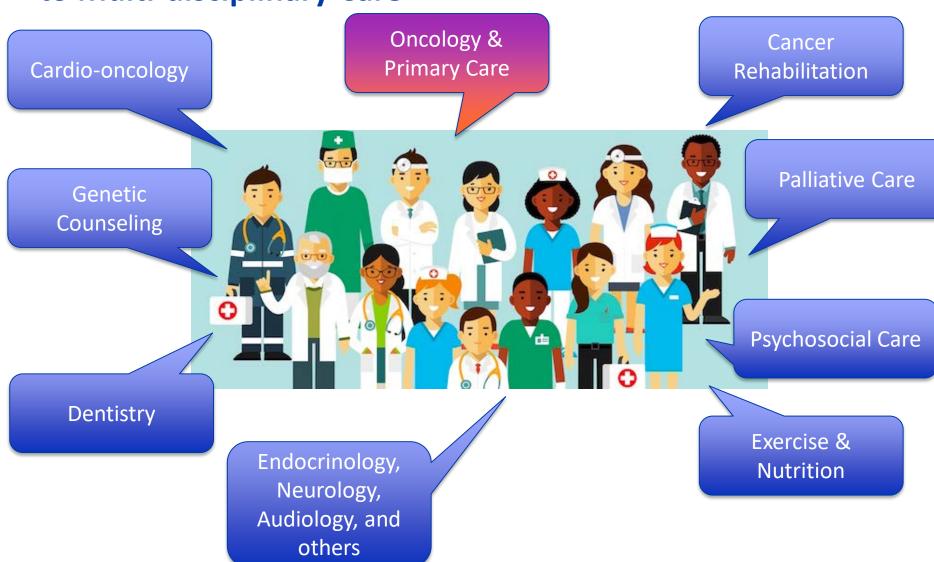


Best in Class Survivorship Care Fills Gaps and Connects Existing Resources:





We Need to Equitably Facilitate Timely Access to Multi-disciplinary Care





We need to Learn from England and Northern Ireland Pilot Tests of Stratified Survivorship Care



Breast Cancer: 80%

Colorectal: 50% Prostate: 40%

Stratified Model With 3 Care Pathways:

- Met patients' needs while improving clinical efficiency
- Improved follow-up surveillance tests by 20%
- Freed up oncology visits for new patients; ↓
 34% wait time
- Projected cost savings: 90M pounds over 5
 years Source: NHS Improving Quality: Stratified cancer pathways: redesigning services for those living with or beyond cancer, 2013

- ✓ Research Agenda
- ✓ Create and Test Models
- ✓ Clinical Guidelines
- ✓ Care Delivery Tools

Implementing Personalized Pathways for Cancer Follow-Up Care in the United States: Proceedings from an American Cancer Society-American Society of Clinical Oncology Summit

Catherine M. Alfano, PhD ¹; Deborah K. Mayer, PhD, RN, AOCN, FAAN²; Smita Bhatia, MD, MPH³; Jane Maher, FRCP, FRCR⁴; Jessica M. Scott, PhD⁵; Larissa Nekhlyudov, MD, MPH⁶; Janette K. Merrill, MS⁷; Tara O. Henderson, MD, MPH⁸



We Need to Build IT to Assess Patient Needs and Imbed Analytics to Facilitate Care:

Mending Disconnects in Cancer Care: Setting an Agenda for Research, Practice, and Policy

Catherine M. Alfano, PhD¹; Deborah K. Mayer, PhD, RN, AOCN, FAAN²; Ellen Beckjord, PhD MPH³; David K. Ahern, PhD^{4,5}; Michele Galioto, DNP⁶; Lisa K. Sheldon, PhD⁷; Lisa M. Klesges, PhD⁸; Eliah Aronoff-Spencer, MD, PhD⁹; and Bradford W. Hesse, PhD¹⁰|

JCO Clin Cancer Inform 4:539-548 (2020)

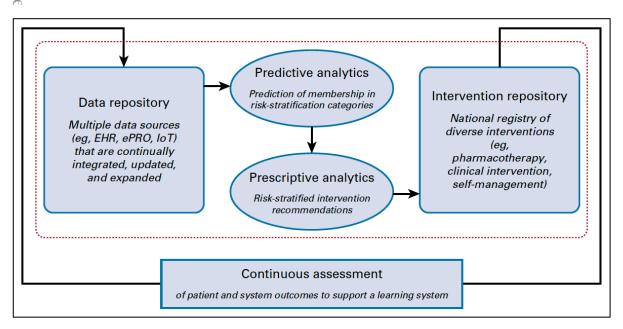


FIG 1. The learning health care system for oncology care. EHR, electronic health record; ePRO, electronic patient-reported outcome; IoT, Internet of Things (e.g. implantable or wearable devices).



Month Day, Year

We Need to Support Patients in Self-Managing their Health

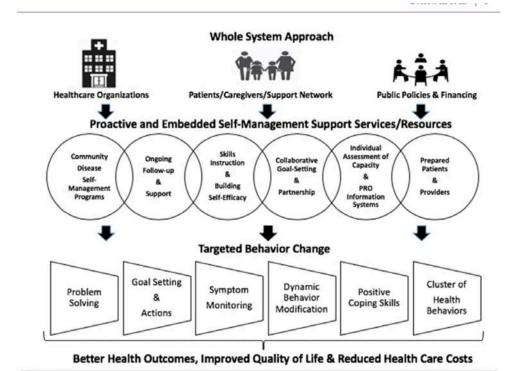
JNCI J Natl Cancer Inst (2020) 113(5): djaa083

UK Data:



Management of Cancer and Health After the Clinic Visit: A Call to Action for Self-Management in Cancer Care

Doris Howell ,RN, PhD, 1,* Deborah K. Mayer ,RN, PhD, 2 Richard Fielding,BA, C Psychol, PhD, 3 Manuela Eicher ,RN, PhD, 4 Irma M. Verdonck-de Leeuw ,PhD, 5,6 Christoffer Johansen ,MD, PhD, 7 Enrique Soto-Perez-de-Celis ,MD, MSc, 8 Claire Foster ,C Psychol, PhD, 9 Raymond Chan ,10 Catherine M. Alfano ,PhD, 11 Shawna V. Hudson ,PhD, 12 Michael Jefford ,MD, PhD, 13 Wendy W. T. Lam ,PhD, 14 Victoria Loerzel ,BSc, PhD, 15 Gabriella Pravettoni ,PhD, 16,17 Elke Rammant ,MSc, PhD, 18Lidia Schapira,MD, 19 Kevin D. Stein ,PhD, 20 Bogda; Koczwara , 11 and the Global Partners for Self-Management in Cancer

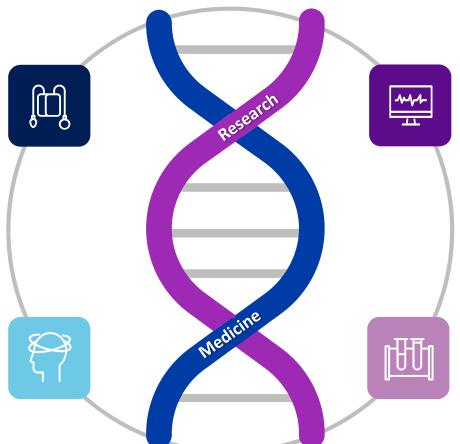




We Need to Integrate Research and Practice into a Learning Healthcare System

Medical Surveillance

Imaging, labs & tests to detect recurrence, subsequent cancers, & late effects

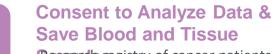


Analytics Drive Care

Learning healthcare system predicts patient risk, need, and intervention response

Symptom & Function Monitoring-

Track samages Replacement function, and other chronic effects of cancer & facilitate timely referrals

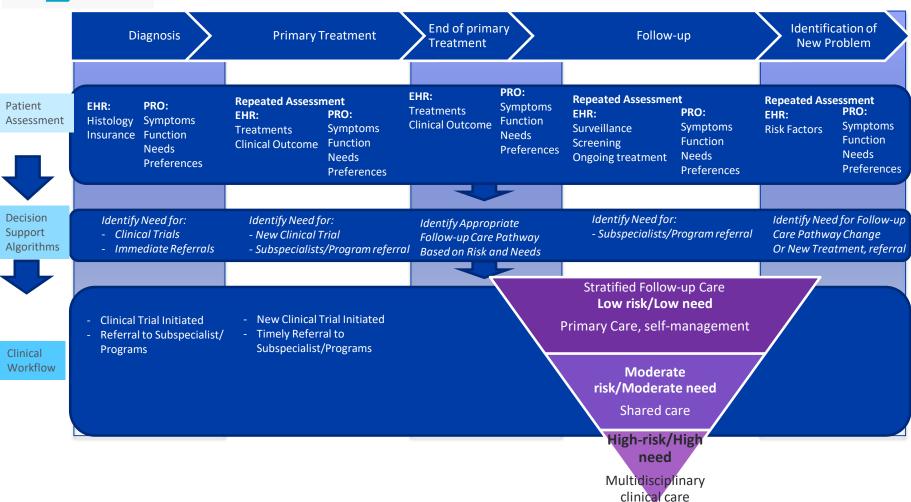


Besearch registry of cancer patients to understand long-term toxicity, risk/needs and prediction modeling



Patients Will Be Followed in a Prospective Surveillance Model

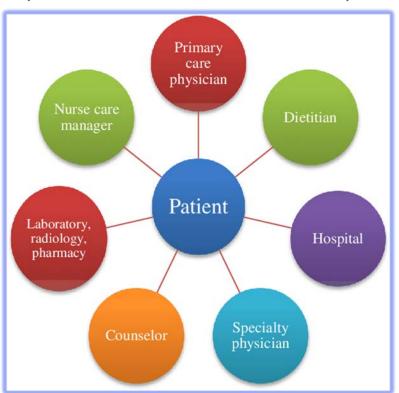






Success Requires a Multi-modal "Team Sport" Partnership Approach

Traditional Model (Patient-Centered Medical Home)



A Better Connected Model



Thank You!

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