EVANGELICAL COMMUNITY HOSPITAL

2015 ONCOLOGY OUTCOMES REPORT

PSYCHOSOCIAL DISTRESS SCREENING
FOR CANCER PATIENTS



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CANCER CARE

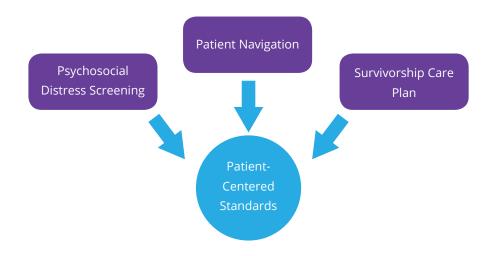
Impact of stress while living with cancer

Evangelical Community Hospital is committed to providing high quality, comprehensive, and informative care for all patients with cancer. Care does not stop at surgery and treatment, comprehensive care carries the patient from diagnosis through Survivorship!

Evangelical follows guidelines set forth by the Commission on Cancer, a program of the American College of Surgeons (ACoS). The CoC is a consortium of professional organizations dedicated to improving survival and quality of life for cancer patients through standard-setting, prevention, research, education, and monitoring of comprehensive quality care.

The CoC developed three new specific, measurable Continuum of Care standards that were required to be implemented in 2015.

THE 2012 CoC STANDARDS: Patient-Centered Focus



To satisfy Standard 1.12 requiring annual dissemination of a Public Outcomes Report, Evangelical has chosen to present on one of the new 2015 CoC standards: Psychosocial Distress Screening (Standard 3.2)

In response to this new standard, Evangelical's multidisciplinary Cancer Committee enacted a Psychosocial Services/Survivorship Administrative policy. Evangelical's comprehensive approach to this guideline includes access to services that will address physical, psychological, social, behavioral, spiritual, and financial needs. The process begins by assessing the patient's overall well-being utilizing an adaptation of the National Comprehensive Cancer Network (NCCN) Distress Thermometer and/or the Patient Health Questionnaire-2 (PHQ2) and is to be offered to all cancer patients. To view the questionnaire, please see Appendix A.

Initial screening is offered on-site within one month of the initial diagnosis of cancer or within one month of initial consultation and/ or treatment at Evangelical during a pivotal medical visit, a visit that has been identified as a key time for distress screening. Follow-up assessments may occur as appropriate at other pivotal medical visits to monitor the status of the patients' distress and ongoing psychosocial needs

Patients with scores at or above 4 on the NCCN Distress Thermometer and/or at or above 3 on the PHQ-2 are referred to the appropriate member(s) of their care team for further evaluation to identify the cause(s) of their distress. Patients are then referred to the appropriate bio-psychosocial services. Some of those services include: consultation with their primary care provider or other medical specialist, consultation with a licensed psychologist, the Survivorship Assistance Program, and Physical Therapy with a Lymphedema Specialist.

As a monitoring tool for the new program, the Committee conducted a Quality Study (CoC Standard 4.7) from January - March 2015 to evaluate adherence to the policy.

Evangelical Community Hospital Cancer Committee

Quality Study: 4.7 - Distress Screening Adherence Audit Summary 1st Quarter CY15

	Jan-15	Feb-15	Mar-15	Total
Analytic Cases (all tumor sites)	41	27	37	105
Distress Screening (DS) Completed	29	20	23	72
% Completion	71%	74%	62%	69%
DS Completed Within One Month of Dx	24	16	19	59
% Completion Within One Month	83%	80%	83%	82%
Further Assessment Recommended	11	11	14	36
%	38%	55%	61%	50%
Referrals to Other Resources	3	5	4	12
%	10%	25%	17%	17%
Patient Response Indicated	5	4	6	15
%	17%	20%	26%	21%
Provider Signature	25	20	19	64
%	86%	100%	83%	89%
Date	29	20	21	70
%	100%	100%	91%	97%

As demonstrated in the Audit Summary above, the Cancer Committee agreed there was potential for improvement and initiated a Quality Improvement process. (CoC Standard 4.8)

Upon completion of the 2nd quarter, adherence was again evaluated and the data was added to the previous audit summary and is represented in the table below.

The study findings are as follows: At present, 3 out of 4 newly diagnosed cancer patients are being screened for distress. The Cancer Committee set a goal of 80% by the end of 2015. Of those assessed, 88% were completed within the first month of diagnosis, which is consistent with Evangelical's administrative policy. A component that is necessary for adherence is assuring that providers are referring the indicated patients, signing their distress screening scale, and documenting patient response in the chart.

Evangelical Community Hospital Cancer Committee

Quality Improvement Studies (Std 4.7):

- Monitoring adherence to the CoC requirement to administer a distress screening measure (Std 3.2: Psychosocial Distress Screening)
- Patient Experience/Survivorship Program Utilization use survey results to implement improvements and decrease barriers to program utilization (i.e., July-December 2015)

	Analytic Cases	DS Completed	% Completion	No. w/in ≤Dx	% w/in ≤ Dx	Further Assmt	%	Referrals	%	Pt Response	%	Provider Sign	%	Date	%
January-15	38	30	79	25	83	12	40	3	10	7	23	27	90	30	100
February-15	27	20	74	16	80	11	55	5	25	4	20	20	100	20	100
March-15	35	24	69	20	83	16	67	4	17	7	29	21	88	23	96
April-15	22	14	64	13	93	11	79	6	43	5	36	12	86	12	86
May-15	17	16	94	16	100	14	88	4	25	5	31	16	100	16	100
-June-15	19	16	84	15	94	14	88	5	31	4	25	14	88	14	88
Total:	158	120	76	105	88	78	65	27	23	32	27	110	92	115	96

Studies of Quality (4.7 Patient Outcomes)

The Cancer Committee set a new 2016 first quarter goal of 90%, which is well above the national average goal of the 70 percentile. Evangelical will continue to monitor and evaluate compliance to this new and key standard.

Appendix A.

Name of Patient:	Date	of Scree	ening	g:					
Date of Birth:	Comp	leted b	y:						
EVANGELICAL COMMUNITY HOSPITA	EVANGELICAL COMMUNITY HOSPITAL: DISTRESS SCREENING QUESTIONNAIRE								
Please take a few moments to complete the following que	Your overall well-being is important to us. Below are some symptoms, problems and concerns common to many patients. Please take a few moments to complete the following questions so that we can understand your concerns to support you. Your health care provider will review the questions with you.								
Emotional Concerns – Have you had concerns about ar	ny of the	e followi	ng in the p	oast v	veek? C	heck all that apply:			
□ Anxiety □ Depression □ Anger □ Loss of interest in usual activities □ Sadness □ Other: □	☐ Fear ☐ Grief or ☐ Substance abuse ☐ I do not have any emotion.								
How distressed or bothered have you been by this? Circle	e the nu	umber th	at applies	S :					
Not distressed 0 1 2 3 4	5 6	5 7	8	9	10	Extremely distressed			
Relationship Concerns – Have you had concerns about	any of	the follo	wing in th	ie pas	st week?	Check all that apply:			
□With partner or spouse □With child or children □With friends, neighbors or co-workers □With extended family □Spiritual/Religious □I do not have any relationship concerns at this time.									
How distressed or bothered have you been by this? Circle	the n			,					
•	5 6		at applies	9	10	Fortenes also distances and			
Not distressed 0 1 2 3 4	5 6) /	0	9	10	Extremely distressed			
Health Concerns – Have you had concerns about any of	the fol	llowing ir	the past	week	? Check	call that apply:			
□ Appearance changes □ Bathing/d □ Changes in urination □ Constipat □ Eating difficulties or change in appetite □ Fertility/reproductive health □ Fever or	rrhea								
Other:					e any he	alth concerns at this time.			
How distressed or bothered have you been by this? Circle	How distressed or bothered have you been by this? Circle the number that applies:								
Not distressed 0 1 2 3 4	5 6	5 7	8	9	10	Extremely distressed			
Practical Concerns – Have you had concerns about any	of the	following	g in the pa	ast we	eek? Che	eck all that apply:			
□ Child/Spouse/Elder Care □ Housing □ Completing Daily Tasks □ Insurance □ Financial □ Transportation □ Information/resources/referrals □ Treatment decisions □ Work/School □ Other: □ I do not have any practical concerns at this time.									
How distressed or bothered have you been by this? Circle	e the nu	umber th	at applies	3:					
Not distressed 0 1 2 3 4	5 6	5 7	8	9	10	Extremely distressed			
(over please)						Page 1 of 2			



PHQ-2: Over the past 2 weeks, how often have you been bothered by any of the following problems?

Circle the number that applies:	Not at All	Several Days	More Than Half the Days	Nearly Every Day
Little interest or pleasure in doing things	0	1	2	3
Feeling down, depressed or hopeless	0	1	2	3

Please circle the number (0-10) that best describes how much **overall** distress you have been experiencing in the past week, including today. Thank you!



For Office Use Only Distress Screening Questionnaire reviewed with patient by:

Distress Thermometer Score: ___ / 10 and PHQ-2 Score: ___ / 6 (N.B.: if distress thermometer score ≥ 4 / 10 and/or PHQ-2 score ≥ 3 / 6, then consider referral for further assessment) Recommendations & Referrals: ☐Re-assessment ☐No further assessment and/or referral(s) indicated at this time. ☐Further assessment indicated with patient referred to: Primary Care Provider: Specialist(s): ☐ECH Clinical Health Psychologist: Michael Hayes, Ph.D. Other Mental Health Professional: Oncology Nurse Navigator: Billie Jo Day, RN, BSN, CN-BN Outpatient Dietician/Nutrition Counseling: Weight Management Specialist: Referral(s): ☐American Cancer Society ☐ "Coping" for the Cancer Survivor (October annually) DEvangelical's Survivorship Assistance Program in collaboration with eni Physical Therapy/Lymphedema Specialist: ___ ☐ Spiritual Care: Patricia Murray, Director of Volunteer Services SurviveWELL (January-June; July-December) Weight Management Specialist: ☐Wellness Coaching – Community Health & Wellness Other: Patient accepted recommendations/referrals

Patient declined recommendations/referrals (noted by *) Patient Declined Screening Provider Signature: Date: Page 2 of 2 Rev./Approved for use: 02/09/15