



Atrium Health
Wake Forest Baptist

Cancer Survivorship: Creating a Legacy

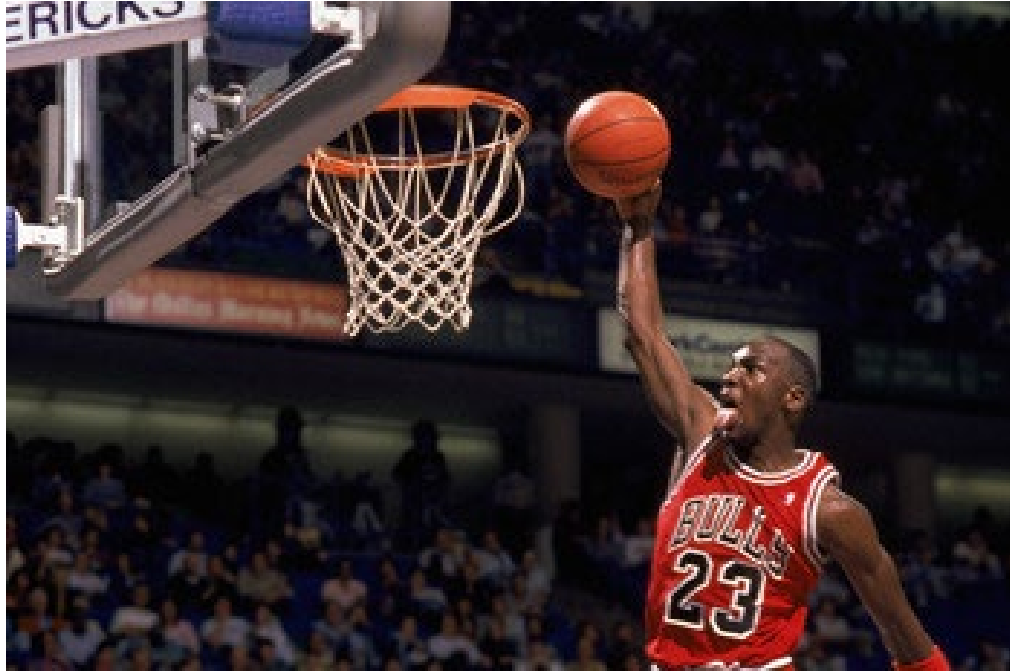
Stacy Wentworth, MD

Assistant Professor, Radiation Oncology, Wake Forest School of Medicine
Medical Director, Cancer Survivorship, AHWFB Comprehensive Cancer Center

Jill Hyson, MSN, NP-C

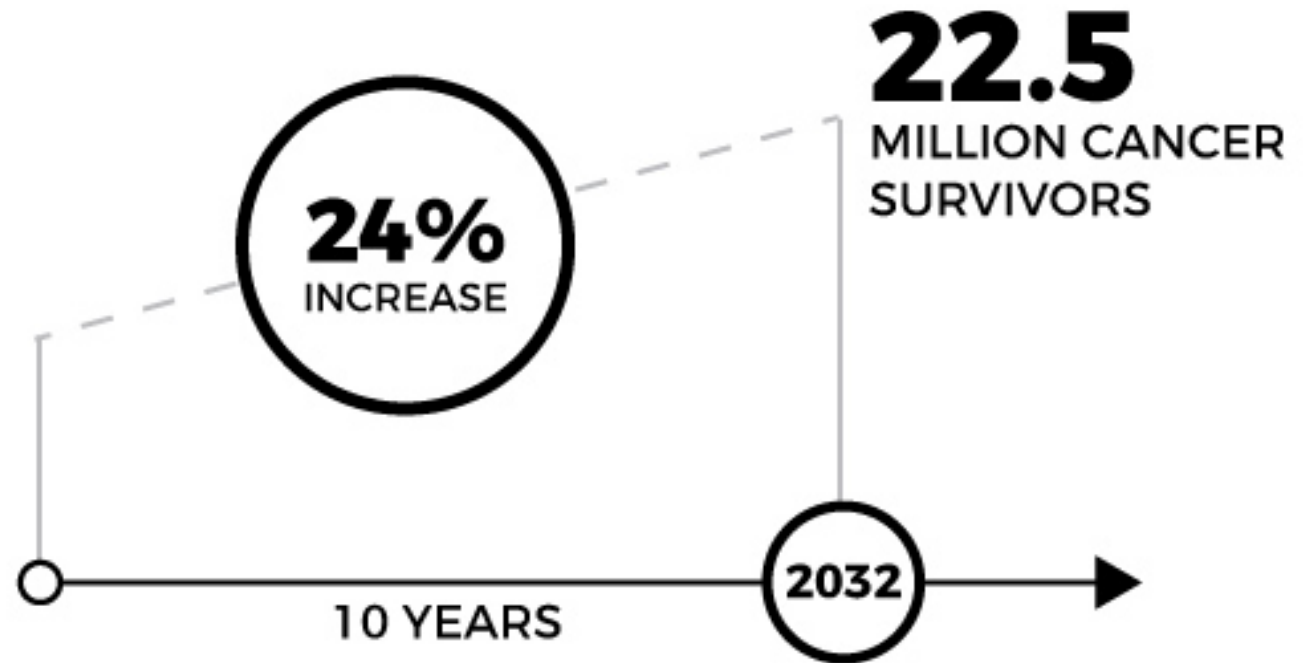
Manager, Oncology Support Services, AHWFB Comprehensive Cancer Center
Provider, Lung Cancer Survivorship

Survivorship: Legend vs Legacy

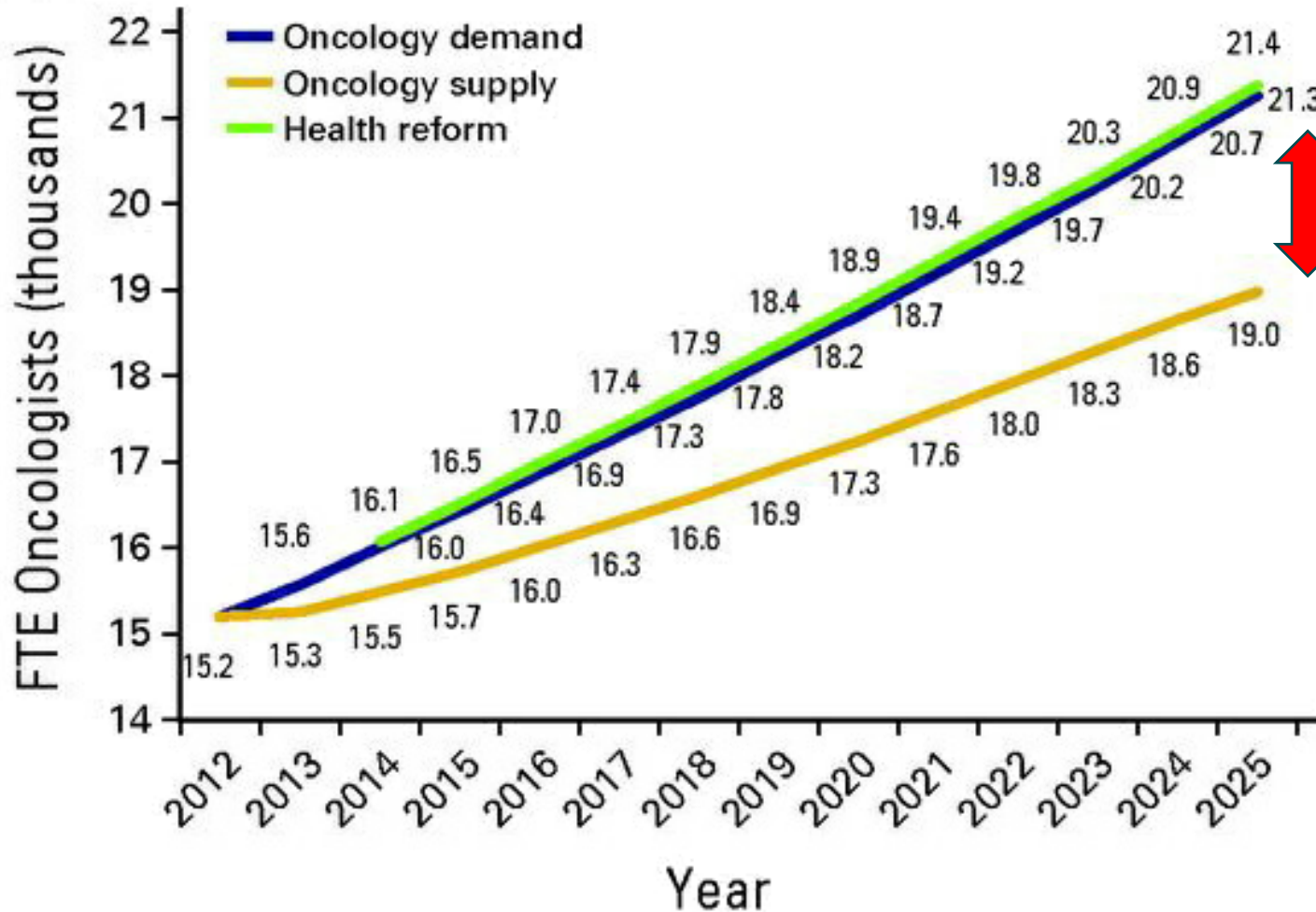


Why Survivorship?

- Yay!
- Oncologist shortage
- Space for New Patients
- Increases survival
- Important transition



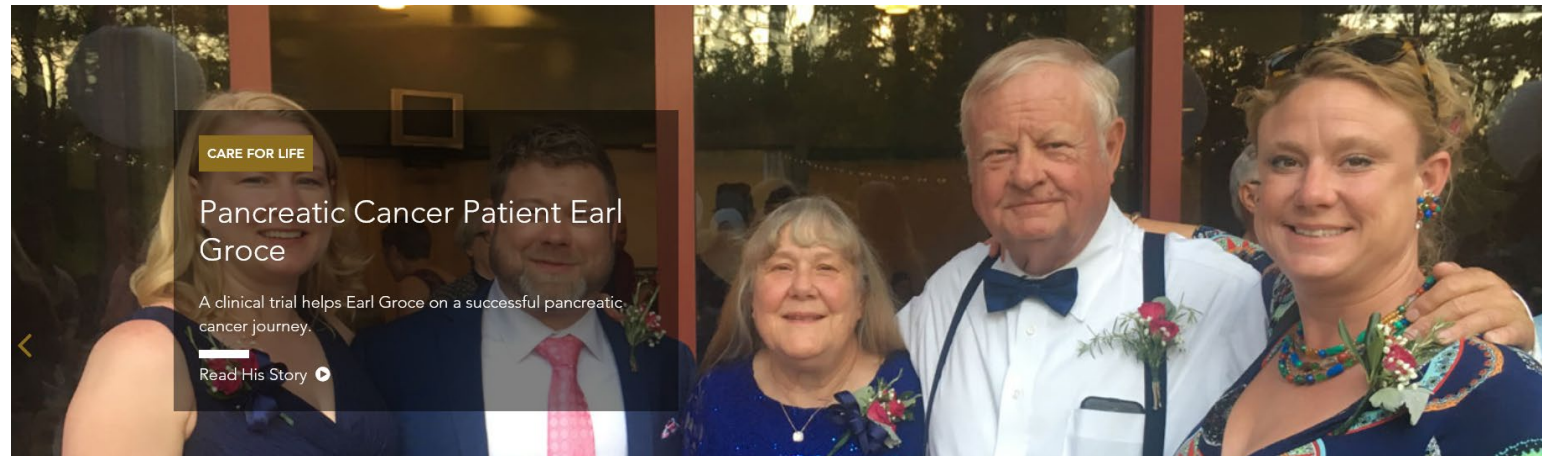
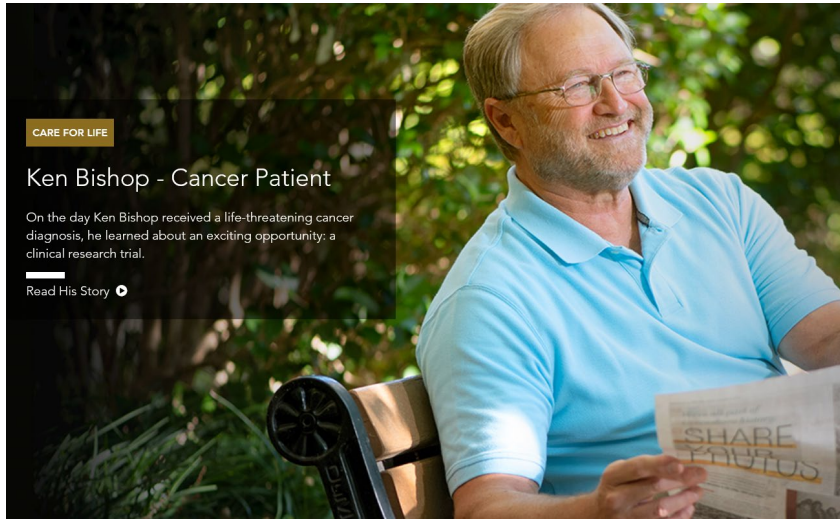
Oncologists cannot keep up



Demand - 40% growth
Oncology MD FTE - 25%

J Onc Prac 10(1):39-45. 2014

Create space for new patients



Survivorship increases survival

What Impacted Survival:	N=centers	% 1 yr survival	Significant P-value
Long term follow-up or survivorship program	No 55 Yes 28	58% 64.1%	0.005
GVHD clinic	No 68 Yes 15	59.4% 64%	0.013
FTE transplant coordinators	2-3 4-6 ≥7	56.3% 62.4% 61.5%	0.034
FTE pharmacists	≤1 2-3 ≥4	57.2% 61.1% 63.4%	0.048
FTE psychosocial clinicians	≤1 2-3 ≥4	56.3% 60.3% 64.4%	0.011

What did *not* impact survival?

- NCI designated cancer center
- EHR
- Dedicated beds to HCT
- FACT accreditation
- Dedicated clinical effort of physicians

Majhail, N, et al. BMT. 2020 May: 55(5): 906-917.

Survivorship is an important transition



Illness

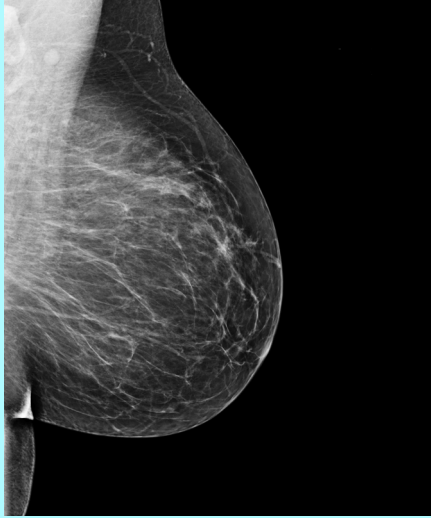


Wellness

What is Survivorship?



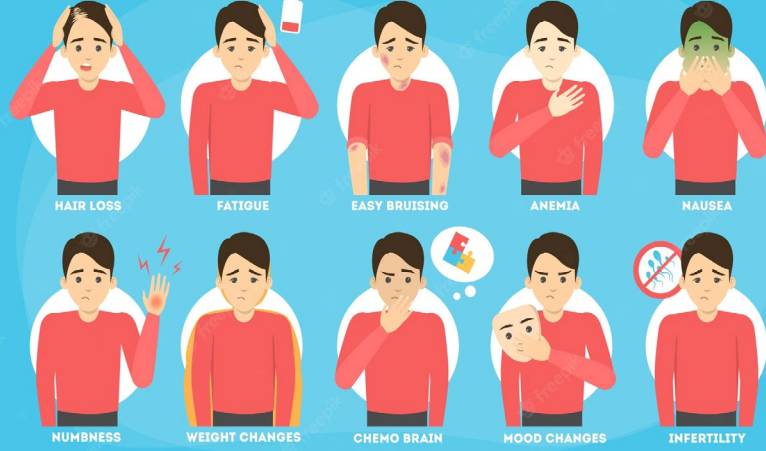
Medical Surveillance



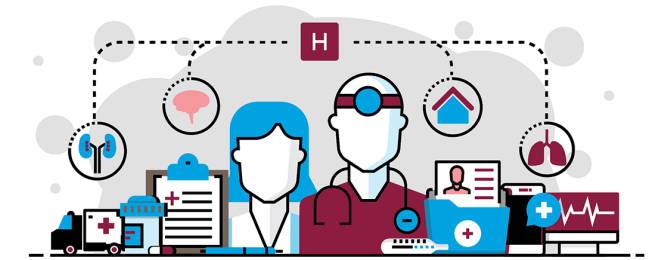
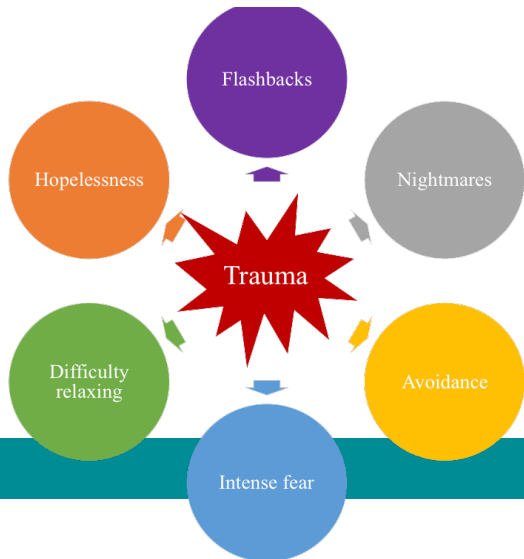
Education and Engagement



Physical Symptoms



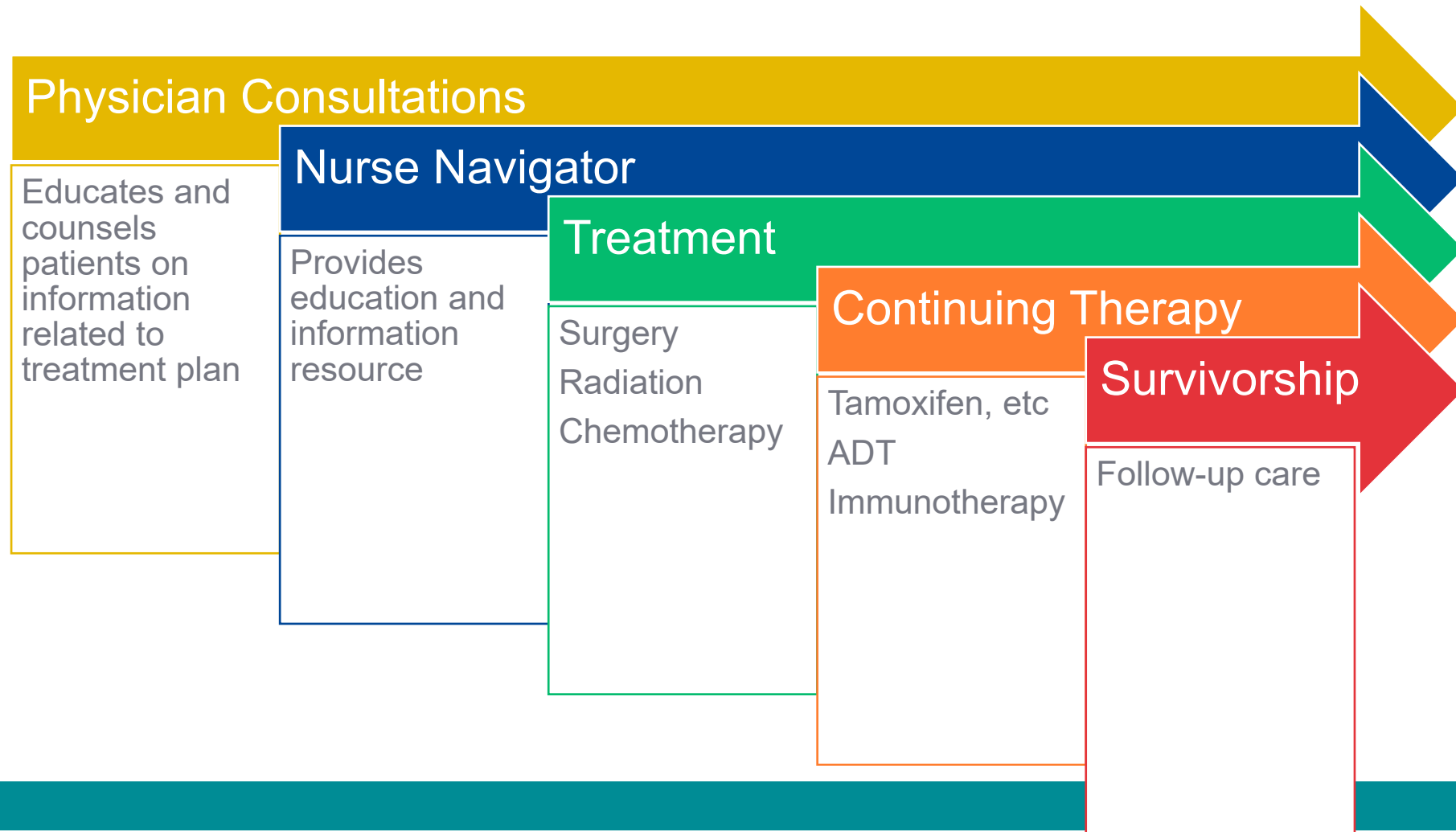
Emotional Processing



Care Coordination



When to introduce survivorship



Models of Survivorship Care

Center follows patients long term and survivorship care is incorporated into routine follow-up

Integrated
Care Model

Consultative
Care Model

Patients receive 1 or more dedicated visits from survivorship experts in addition to receiving ongoing oncologic and primary care

Survivorship clinic or liaison helps coordinate share care between various medical stakeholders

Shared Care
of Survivor

Transitional
Care Model

Patients are discharged from cancer center at a set time and long-term care is transitioned to their local provider (PCP or oncologist)



Support Groups, Physical Therapy, Tobacco Cessation

Future State: One Size Does Not Fit All



- Survivorship Orientation Visit
- Personalized treatment summary
 - Side effects with resources
 - Wellness recommendations
- Ongoing PRO assessment
- Coordination with PCP
- Access to clinical trials





Clinic Schedule

Monday			Tuesday			Wednesday			Thursday			Friday	
AM	AM		AM	AM		AM	AM		AM	AM		AM	AM
8:00 AM	8:30 AM		8:00 AM	8:30 AM		8:00 AM	8:30 AM		8:00 AM	8:30 AM		8:00 AM	8:30 AM
Ashlyn Hedgecock	OPEN		Amy Hensley	Olivia Ogburn		OPEN	OPEN		Amy Hensley			Jill Hyson	Alternating APP's
Breast (HemeOnc)			Lung (Rad Onc)	GI (HemeOnc)					GU (Rad Onc)			Lung (Surg)	BMT
PM	PM		PM	PM		PM	PM		PM	PM		PM	PM
1:00 PM	1:30 PM		1:00 PM	1:30 PM		1:00 PM	1:00 PM		1:00 PM	1:30 PM		1:00 PM	1:30 PM
Casey Powell 1pm	OPEN		Amy Hensley	Kat Mercer		C Fernandes & Ann Schweppe	Kimberly Stout		Amy Hensley	OPEN		Jill Hyson	Alternating APP's
GI (Surg)			Lung (Rad Onc)	Lymphoma		Peds 16yo +	Gyn Onc		GU (Rad Onc)			Lung (Surg)	BMT
						1st and 3rd wk	2 & 4th wk						

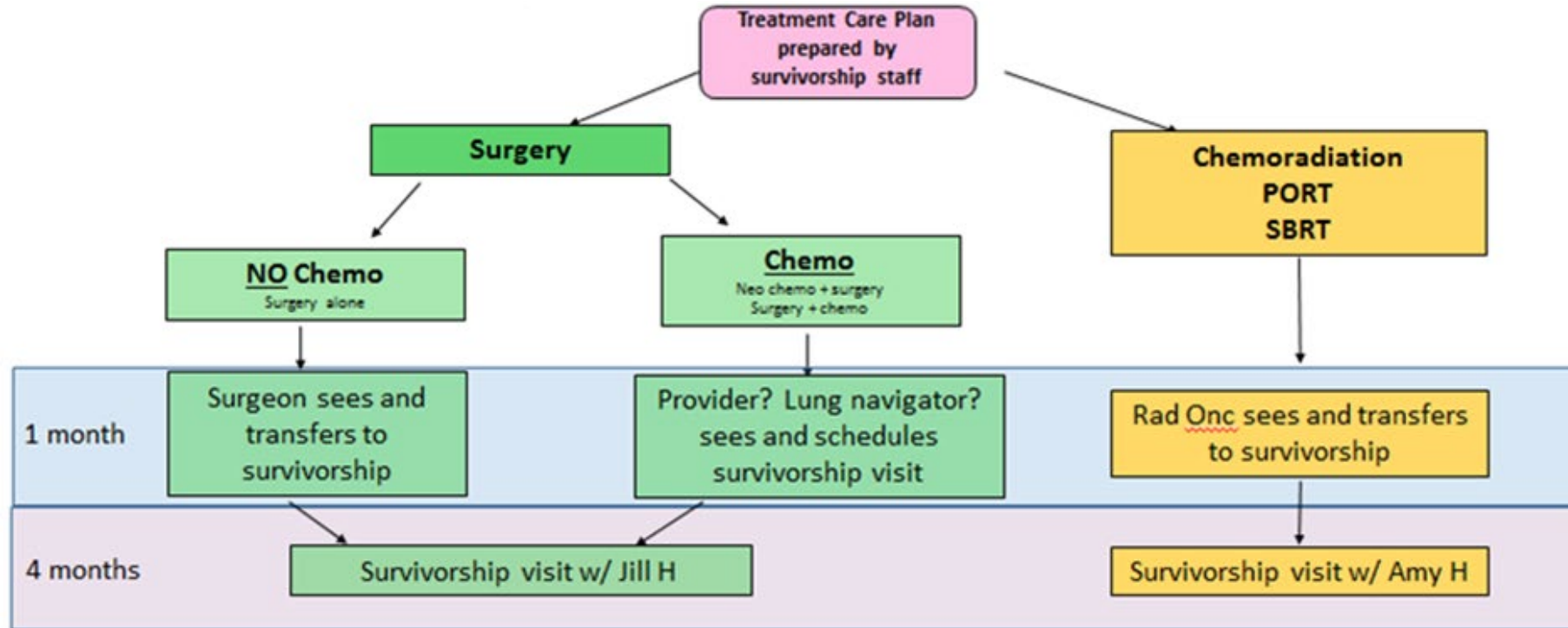
Case Study: Lung Cancer Survivorship

Jill Hyson, NP-C

Survivorship Clinic Manager

Lung Cancer Survivorship Provider

Pathway to Survivorship



Each lung cancer patient treated with curative intent will receive a survivorship focused visit.

This visit will:

- Summarize the treatment course and follow up recommendations as specified by the disease group
- Address symptoms or concerns identified on a needs assessment survey
- Connect patient to appropriate local and national resources
- Evaluate the effectiveness of the visit with a post visit measurement tool

Referral

Ambulatory to Cancer Survivorship

✓ Accept✗ Cancel

Class:Internal Ref

Referral:To dept spec:Hematology and

To dept:MC CC 02 CANCER

Reason:Cancer SurvivorshipCancer Survivorship

Priority:RoutineRoutineUrgentElective

Diagnosis for referral:lung cancer

Comments

Is this for long term survivorship or a one time visit

Long TermOne time

What area are you referring the patient from?

SurgeryRadiation OncologyHematology OncologyPediatric

Type of Cancer

BreastGIGynecologyLung

Status:

NormalStandingFuture

Expected Date:

TodayTomorrow1 Week2 Weeks1 Month3 Months6 Months

Approx.

Expires:

5/3/20241 Month2 Months3 Months4 Months6 Months1 Year18 Months2 Years26 months

Show Additional Order Details

5/12/2021

Next Required

✓ Accept✗ Cancel



Our Mission

Our mission is to guide our cancer survivors toward wellness. We will help you get back to life with the health care you need and easy connection to a range of resources and support.



WakeHealth.edu/Cancer-Survivorship-Clinic

Cancer Survivorship Clinic

Support from Diagnosis to Wellness



Contact Us

Cancer Survivorship Clinic
336-713-4736
WakeHealth.edu/Cancer-Survivorship-Clinic
Comprehensive Cancer Center, 2nd Floor
Open weekdays, 8 a.m. to 5 p.m.



Survivorship Support: A Growing Need

Thanks to medical advances, more people today survive cancer than ever before.



From Day One

Survivorship begins when cancer is found. It continues through treatment and beyond. Our clinic helps you move toward being well with support and the highest quality care. It includes:

- A team to give regular health exams that knows your recent health history
- Checking for early signs of new or returning cancers
- Caring for side effects from cancer and treatment
- Tips for how to live your healthiest life and lower your cancer risk
- A support team who can connect you to emotional, spiritual and integrative care, plus helpful resources in your area
- Access to the latest research on quality of life and survivorship

Plus, we offer help for a wide range of issues and concerns that can impact your quality of life, such as anxiety, depression, body image, relationships and going back to work.

Our clinic helps you move toward being well with support and the highest quality care.

What You Can Expect

Once you finish treatment, you have your first visit in the clinic. You will meet with a member of your care team to go over your concerns about your cancer. They will talk about your Survivorship Care Plan, which involves:

- An outline of your treatment
- Follow-up care needs
- Ways you can deal with your specific health concerns about your cancer.
- Information about cancer-related health issues

We also share the plan with your primary doctor and other members of your health care team. We want them to include this in your complete health care plan.

During your survivorship journey, you will meet new health care team members to help you on your path from cancer to wellness.

Most Common Questions

Q Why do I need survivorship care?

A. After treatment, you will still have unique health care needs. The clinic can help with those needs and share ways to manage your health after cancer treatment.

Q Is there a charge for visiting the Survivorship Clinic?

A. Yes. Your clinic visit is just like a visit to any other doctor. We will bill your insurance, and we may ask you to make a co-payment at check-in.

Q Do I need a referral to be seen at the Survivorship Clinic?

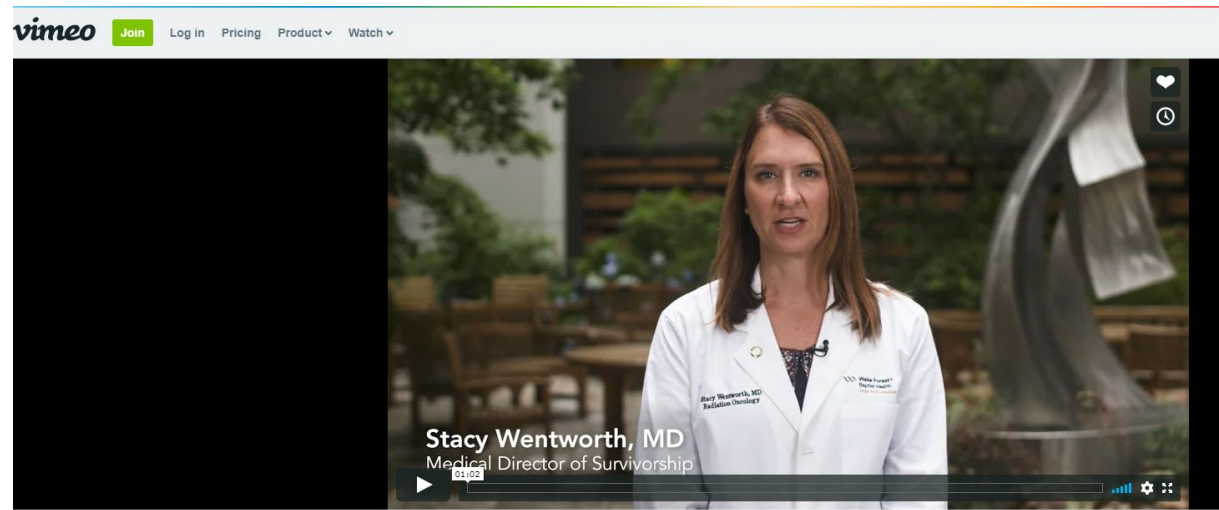
A. Yes. At this time, patients are referred to the clinic by their surgeon or oncologist. You should talk to your doctor to decide if the Cancer Survivorship Clinic is right for you.



The number of people who survive cancer has tripled since the 1970s. Today, 1 in 20 American adults is a cancer survivor. Many of these people face long-term challenges and need continuing treatment and support.

As part of our promise to patients, families, caregivers and friends who share the cancer journey, Atrium Health Wake Forest Baptist opened the area's first Cancer Survivorship Clinic.

Prior to First Appointment



19-0007050 Why Survivo

9 months ago | More

Creative Communications [PLUS](#) [+ Follow](#)

PROMIS-29 Profile v2.0

Please respond to each question or statement by marking one box per row.

	<u>Physical Function</u>	Without any difficulty	With a little difficulty	With some difficulty	With much difficulty	Unable to do
11	Are you able to do chores such as vacuuming or yard work?	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1
21	Are you able to go up and down stairs at a normal pace?	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1
23	Are you able to go for a walk of at least 15 minutes?	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1
53	Are you able to run errands and shop?	<input type="checkbox"/> 5	<input type="checkbox"/> 4	<input type="checkbox"/> 3	<input type="checkbox"/> 2	<input type="checkbox"/> 1

NCCN National Comprehensive Cancer Network

NCCN Distress Thermometer for Patients

SCREENING TOOLS FOR MEASURING DISTRESS

Instructions: First please circle the number (0-10) that best describes how much distress you have been experiencing in the past week including today.

Extreme distress

10

9

8

7

6

5

4

3

2

1

No distress

0

Second, please indicate if any of the following has been a problem for you in the past week including today. Be sure to check YES or NO for each.

YES NO Practical Problems

☐ Child care

☐ Housing

☐ Insurance/financial

☐ Transportation

☐ Work/school

☐ Treatment decisions

Family Problems

☐ Dealing with children

☐ Dealing with partner

☐ Ability to have children

☐ Family health issues

Emotional Problems

☐ Depression

☐ Fears

☐ Nervousness

☐ Sadness

☐ Worry

☐ Loss of interest in usual activities

☐ Spiritual/religious concerns

Other Problems:

YES NO Physical Problems

☐ Appearance

☐ Bathing/dressing

☐ Breathing

☐ Changes in urination

☐ Constipation

☐ Diarrhea

☐ Eating

☐ Fatigue

☐ Feeling Swollen

☐ Fevers

☐ Getting around

☐ Indigestion

☐ Memory/concentration

☐ Mouth sores

☐ Nausea

☐ Nose dry/congested

☐ Pain

☐ Sexual

☐ Skin dry/itchy

☐ Sleep

☐ Substance abuse

☐ Tingling in hands/feet

The NCCN Clinical Practice Guidelines in Oncology (NCCN Guidelines®) are a statement of evidence and consensus of the authors regarding their views of currently accepted approaches to treatment. Any clinician seeking to apply or consult the NCCN Guidelines® is expected to use independent medical judgment in the context of individual clinical circumstances to determine any patient's care or treatment. The National Comprehensive Cancer Network® (NCCN) makes no representations or warranties of any kind regarding their content, use, or application, and disclaims any responsibility for their application or use in any way. The NCCN Guidelines are copyrighted by National Comprehensive Cancer Network®. All rights reserved. The NCCN Guidelines and the illustrations herein may not be reproduced in any form without the express written permission of NCCN. 02/2018.

Disease flowsheet

Interval History Recent (since last visit) PCP Visit? <input checked="" type="button" value="Yes"/> <input type="button" value="No"/> Recent hospital admission? <input type="button" value="Yes"/> <input type="button" value="No"/> Recent imaging (x-rays or scans)? <input type="button" value="Yes"/> <input type="button" value="No"/> Any change in family cancer history? <input type="button" value="Yes"/> <input type="button" value="No"/>	<input type="button" value="Yes"/> <input type="button" value="No"/> Referral needed outside of WakeOne: <input type="checkbox"/> Livestrong <input type="checkbox"/> Cancer Services <input type="checkbox"/> Social Worker Preventative procedures have been performed as per recommended? <input type="checkbox"/> CT Scan <input type="checkbox"/> Colonoscopy <input type="checkbox"/> Mammogram <input type="checkbox"/> Suspend Preventative Procedure(s) Review of Systems General ROS <input type="button" value="Within Normal Limits"/> <input type="button" value="Within normal limits, except"/> Pulmonary ROS <input type="button" value="Within Normal Limits"/> <input type="button" value="Within normal limits, except"/> Musculoskeletal ROS <input type="button" value="Within Normal Limits"/> <input type="button" value="Within normal limits, except"/> Neurological ROS <input type="button" value="Within Normal Limits"/> <input type="button" value="Within normal limits, except"/>
Survivorship Health Maintenance Following immunizations reviewed with patient? <input type="checkbox"/> Flu (within 1 year) <input type="checkbox"/> TDAP (within 10 years) <input type="checkbox"/> Zoster (once in lifetime) <input type="checkbox"/> Pneumococcal <input type="checkbox"/> Covid-19 (single dose) Immunization Activity updated? <input type="button" value="Yes"/> <input type="button" value="No"/> Are you a VA patient?	

5/12/2023

Survivorship Care Plan

Cancer Treatment Summary
Provided by Wake Forest Baptist Health

General Information	
Patient Name:	
Patient DOB:	
Care Team	
Primary Care Provider:	
Breast Surgeon:	{ONCBCN Breast Surgeons:37356}
Radiation Oncologist:	
Medical Oncologist:	{ONCBCN Breast Oncologists:37357}
Cancer Diagnosis Information	
Diagnosis:	Malignant neoplasm of upper-outer quadrant of left female breast (HCC) {ONCBCN Breast Cancer Dx:37358}
Diagnosis Date:	12/14/2018
Staging Information	Cancer Staging No matching staging information was found for the patient.
Treatment Summary	
Clinical Trial	{ONCBCN Yes/No (with research SmartText):36906}
Surgery	{ONCBCN Yes/No (with breast surgery SmartText):37360}
Radiation	{ONCBCN Yes/No (with end date):36908}
Other Treatment	{N/A or comment (N/A default):34956}
Chemotherapy	
Treatment Goal	Curative

Follow up Visit Schedule

Coordinating Provider	When/How Often
Medical Oncologist	History and physical every 3-4 months for the first 2 years, then every 6 months for years 3-5 and then every year after that.
Radiation Oncologist	Rotate visits with medical oncologist
Cardiothoracic Surgeon	Rotate visits with medical oncologist

Cancer Surveillance or Other Recommended Related Tests

Test	What/When/How Often
Diagnostic mammogram	At the discretion of your provider and at least every 6-12 months for the first 2 years, then once a year

What will my Primary Care Physician help me manage?

Your Primary Care Provider is an integral part of maintaining your health. All preventive care (like helping arrange your colonoscopy, pap smear, prostate exam, and annual physical exam) will be critical. David Michael Haimes, MD should also manage any other chronic condition they have helped you with in the past. This may include things like blood pressure control, diabetes management, cholesterol control, weight management, etc.

Resources

Congratulations on completing your treatment! Your Cancer Care Team would like you to be aware of the many resources available to you to help you transition back to a healthy or even healthier lifestyle, both physically and emotionally. Below you will find some online resources that may be helpful to you.

MyWakeHealth

<http://www.myWakeHealth.org/>

Your secure online chart where you can access your medical information including this care plan and contact your providers.

Common Needs/Concerns	Suggested intervention(s)
Fatigue	<ul style="list-style-type: none"> This is the most common symptom experienced by breast cancer survivors. You are not alone! Results of trials in breast cancer survivors overwhelmingly show that regular physical activity as the best intervention for fatigue. Start slowly and build your stamina. Discuss an evaluation for hypothyroidism, anemia, sleep disturbance, or depression with your doctor. Meet with our Cancer Rehabilitation specialists. Ask your doctor for a referral or call 336-716-1585. Join our Seasons of Survival program which helps patients transition from illness to wellness. Free lunch. Call 336-716-1693 to sign up. Consider Cancer Transitions, a 4 week wellness program hosted at night with dinner included. Phone 336.760.9983 to sign up. Join LiveStrong, a free 12 weeks exercise program designed specifically for cancer patients. FREE for you and a friend. To find a Y near you and to sign up go to www.ymcanwnc.org/programs/livestrong-at-the-ymca/. Consider CancerFITT a 12 week supervised group exercise program for cancer patients at The Fitness Center in High Point. Call 336-878-6221 for more information. Join a Breast Cancer support group. Call Cancer Services at 336.760.9983 for more information. Try hiking with the Celebrate the Trail to Recovery program with UNCG. More information at http://ctr.wp.uncg.edu/celebrate/ or by calling 336-334-5327 For more information, visit the National Cancer Institute's (NCI) website: http://www.cancer.gov/about-cancer/treatment/side-effects/fatigue

Clinic Note



CLINIC:

Cancer Survivorship

REASON FOR VISIT:

Treatments summary visit & to address acute survivorship needs

INTERVAL HISTORY / REVIEW OF SYSTEMS:

Review of Systems

General ROS: Within Normal Limits(He has been supportive of friend who's wife recently passed away. He has gone out to eat a couple of times and is more hopeful since he has recieved his 2nd COVID vaccine.)

Pulmonary ROS: (!) **Within normal limits, except**(Some shortness of breath with exertion- stable. No cough/hemoptysis/oxygen use or inhaler use.)

Musculoskeletal ROS: Within normal limits, except(Chronic back and hip pain- unchanged. Mobility primarily affected by balance and neuropathy.)

Neurological ROS: Within normal limits, except(Chronic bilateral neuropathy - especially in feet. Chronic balance issues. Uses rolling walker wherever he goes. Denies falls in the last 6 months.)

Interval History

Recent (since last visit) PCP Visit?: (P) No(3-12-21)

Do you have a PCP visit scheduled?: (P) Yes

Recent hospital admission?: (P) No

Recent imaging (x-rays or scans)?: (P) Yes

Any change in family cancer history?: (P) No

Survivorship Health Maintenance

Following immunizations reviewed with patient?: (P) TDAP (within 10 years);Flu (within 1 year);Zoster (once in lifetime);Pneumococcal (within 5 years);Covid-19 (#2)

Immunization Activity updated?: (P) Yes

Are you a VA patient?: (P) Yes

Do you have a follow-up scheduled with the VA?: (P) No

Preventative procedures have been performed as per recommended?: (P) CT Scan

Survivorship SmartSet



Lung Cancer Survivorship Visit ↗

▼ Progress Note

▼ Lung Cancer Survivorship Note

☒ ONCBCN LUNG SURVIVORSHIP VISIT

▼ Imaging

▼ Lung Cancer Survivorship Imaging

☐ CT CHEST WO CONTRAST (\$\$\$\$)

Expected: 6 Months, Routine, Ancillary Performed

▼ Referrals

▼ Lung Cancer Survivorship Referrals

☐ Ambulatory Referral To Family Practice

Internal Referral, Routine, Family Medicine, Specialty Services Required

☐ Amb Ref Communication Eval/Treat-Speech Therapy

Internal Referral, Routine, Speech Therapy, Specialty Services Required

☐ Ambulatory Referral To Nutrition-Cancer Ctr

Internal Referral, Routine, Specialty Services Required

☐ Ambulatory Referral To Genetic Counseling - Oncology Only

Internal Referral, Routine, MC CC 04 GENETIC COUNSELING, Genetics, Sp

☐ Referral to Pulmonary Rehab

Internal Referral, Routine, Evaluation and Treat

☐ Ambulatory Referral To Pulmonology

Internal Referral, Routine, Pulmonology, Specialty Services Required

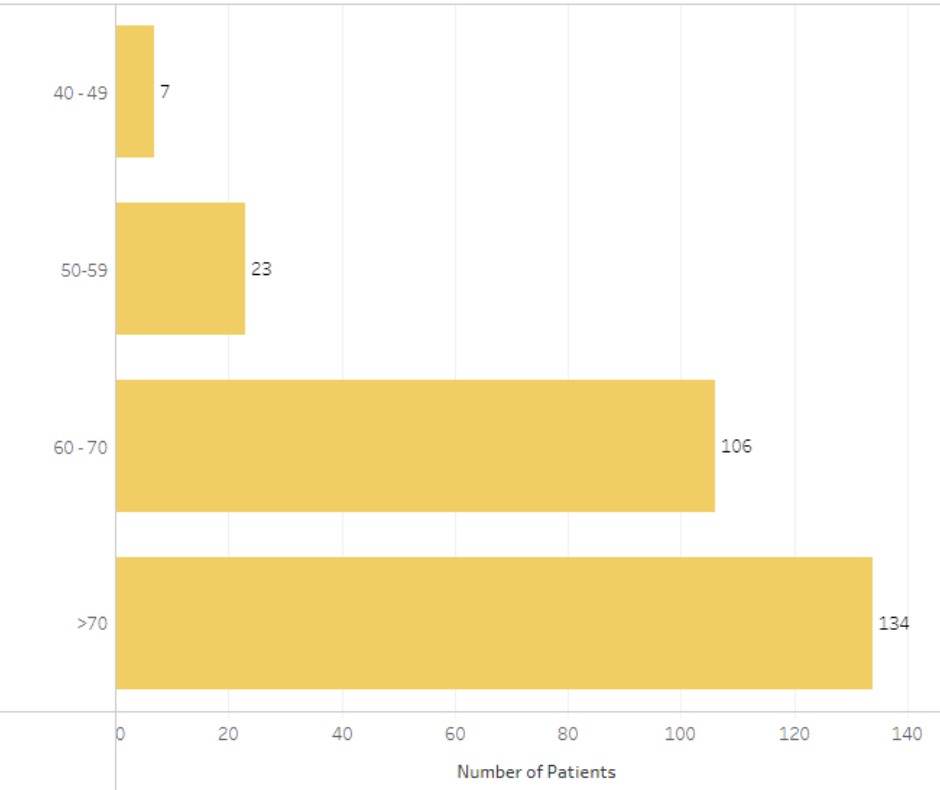
☐ Amb Referral to Tobacco Cessation

Internal Referral, Routine, Pharmacy, Specialty Services Required

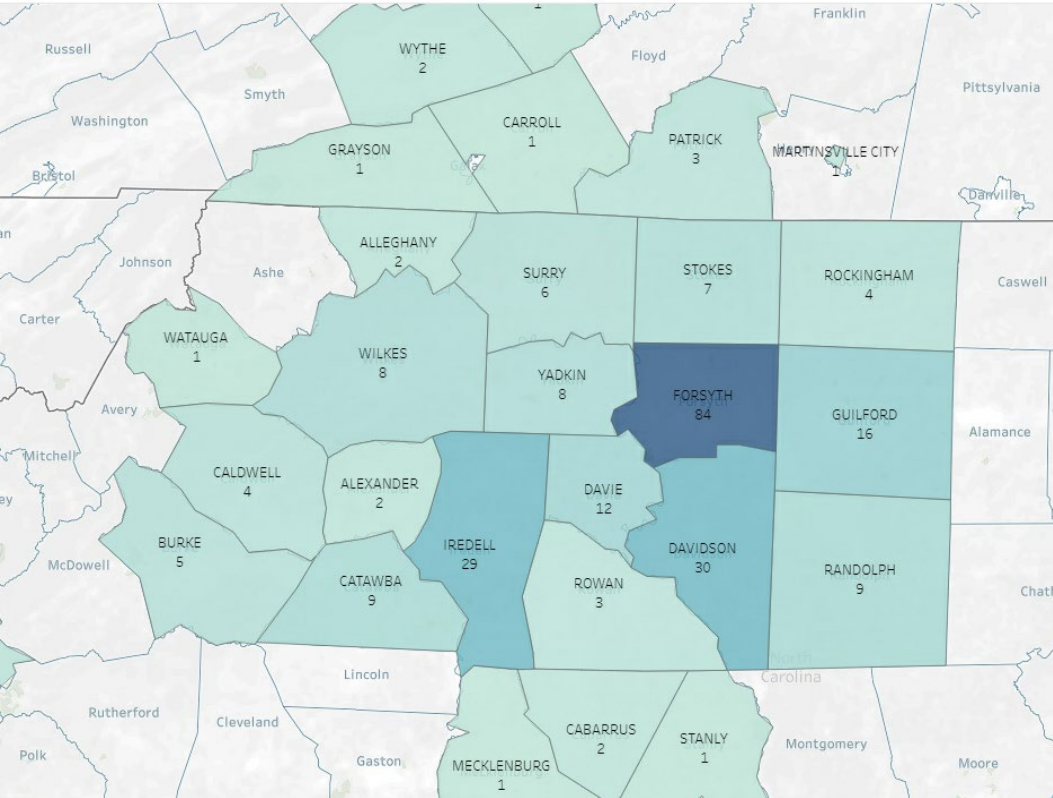
Results

Lung Cancer Survivorship

Age



Service Area



Patient Feedback

answered assistant awesome better care clinic comfortable
concern deborah dr easy enjoy everybody everything
explained explanation feel fine found friendly
health helpful informative jill
kat knowledgeable medical needed nice nurse past
people personable pleasant professional
provider questions results review sherri
staff talk thank things thorough treatment
understand visit waiting wonderful

Innovations

PROMIS-29 Referral

Cancer Patient Support Program Workflow

! Your patient has a Moderate severity T-Score in 1 or more categories from their PROMIS survey. Please sign the referral below and inform your patient that a CPSP team member will follow up with them in 1-3 business days to address their concerns.

Open Order Set Do Not Open Cancer Survivorship CPSP Referral [Preview](#)

Acknowledge Reason _____

Referral Placed Patient Declines Referral Provider Addressed



▼ OSQ ONCBCN SURVIVORSHIP CPSP REFERRAL MODERATE

☒ Ambulatory Referral To Psychosocial Onc ☐

Class: Internal Ref

Referral: To dept: Hematology and
spec: MC CC 03 CANCE

Reason: Specialty Services Evaluation and Treat

Priority: Routine Routine Urgent Elective

A Diagnosis for referral: moderate to severe promis T-score

Location may change due to patient preference?
Yes No

Priority: Routine Routine STAT

Status: Normal Standing Future

Expected Date: Today Tomorrow 1 Week 2 Weeks 1 Month 3 Months 6 Months
☐ Approx. 1 Month 2 Months 3 Months 4 Months 6 Months 1 Year 18 Months

Flowsheet generates referrals

- 8 change in Family History → 6 Genetic Counseling referrals
- 9 No PCP visit scheduled → 4 PCP referrals

Where do I start?



People

- Identify clinical champion
- Determine best-fit model
- Include supportive care
- Enlist community resources



Technology

- Create referral guidelines
- Automate documentation
- Think about PROs
 - (PROMIS- 29 >>>DT)
- Pilot something!



Resources

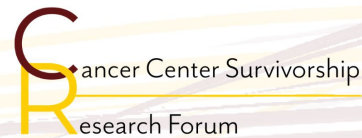
Cancer Survivorship Provider Network – thecspn.org

CCS Research Forum - ccsrf.umn.edu

Fred Hutch Symposium on Cancer Survivorship – fredhutch.org



SAVE THE DATE



September 2023

Hosted by



Cancer Institute



Jump in!

A legend is what you do.
A legacy is who you are.

