

# ASCO's Quality Training Program

Project Title: Decrease YRCC Patient ED Utilization

Presenter's Name: Bridgett Allen, NP

Institution: Yuma Regional Cancer Center

Date: June 28, 2019

# Institutional Overview

Yuma Regional Medical Center is a non-profit community hospital. Our Cancer Center is accredited by the American College of Surgeons' Commission on Cancer. We serve adult cancer/hematology patients from our local area, as well as many from surrounding rural areas. We also have a large population of patients that follow with our oncologists in the winter and in their home towns during the rest of the year. We strive to provide quality care and care coordination for our patients.

# Problem Statement

8% of YRCC patients on active IV chemotherapy have potentially avoidable visits to the ED leading to decreased patient satisfaction, negative effects on outcomes and increased cost of care.

# Team Members

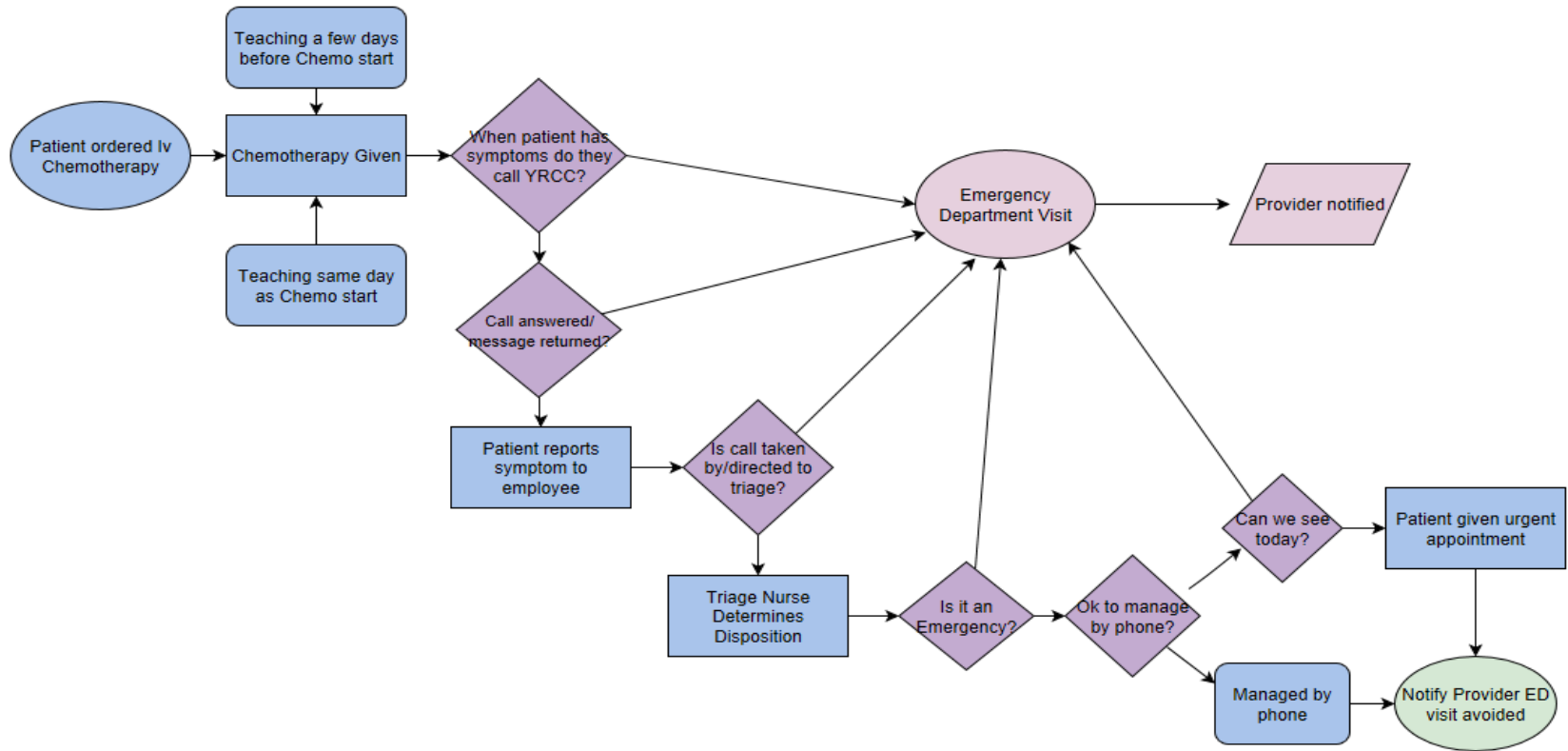
**Team Leader:** Dr Chandra, M.D., MSc, FACP

**Team Members:** Bridgett B. Allen, FNP-C, AOCNP  
Mary Sweigart, R.N., BSN, OCN  
Pamela Shadle, R.N.

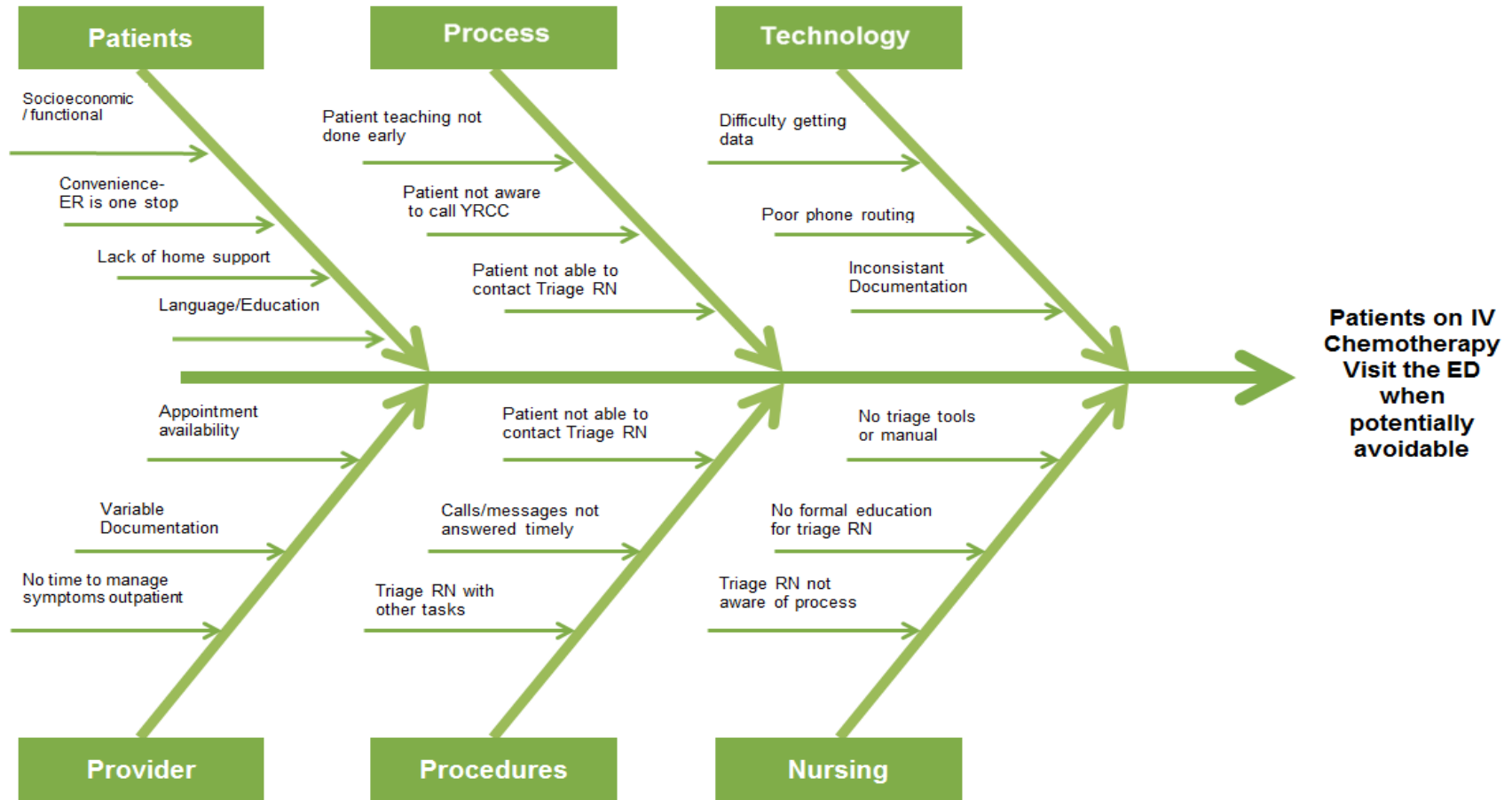
**Project Sponsors:** Justin Farren

**Patient/ Family Members:** Awaiting input

# Process Map

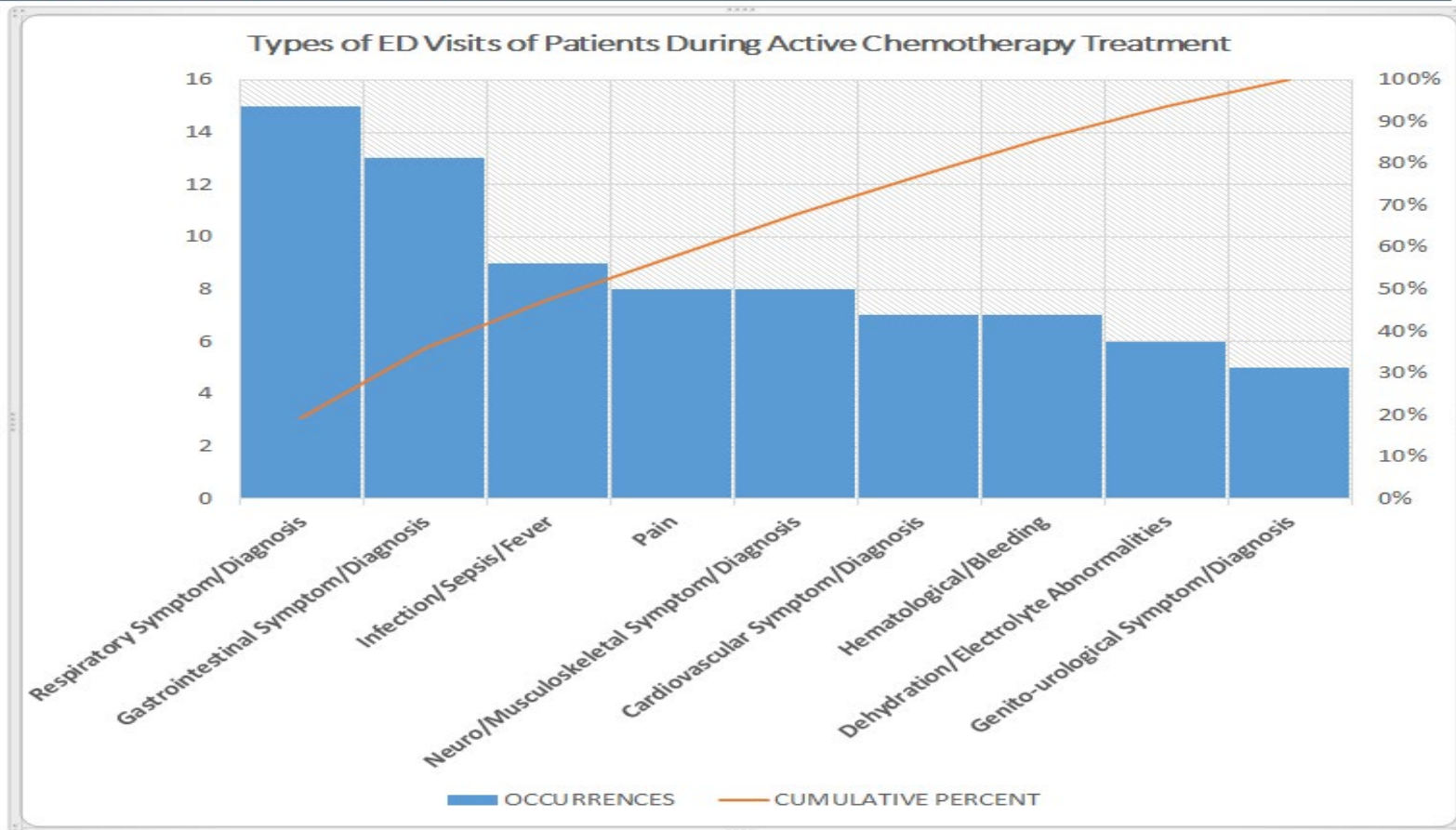


# Cause & Effect Diagram



# Diagnostic Data

## PROBLEM ANALYSIS - PARETO



# Diagnostic Data

## PROBLEM DATA

PROBLEM AREA	OCCURRENCES	PERCENT OF TOTAL	CUMULATIVE PERCENT
Respiratory Symptom/Diagnosis	15	19.23%	19.23%
Gastrointestinal Symptom/Diagnosis	13	16.67%	35.90%
Infection/Sepsis/Fever	9	11.54%	47.44%
Pain	8	10.26%	57.69%
Neuro/Musculoskeletal Symptom/Diagnosis	8	10.26%	67.95%
Cardiovascular Symptom/Diagnosis	7	8.97%	76.92%
Hematological/Bleeding	7	8.97%	85.90%
Dehydration/Electrolyte Abnormalities	6	7.69%	93.59%
Genito-urological Symptom/Diagnosis	5	6.41%	100.00%



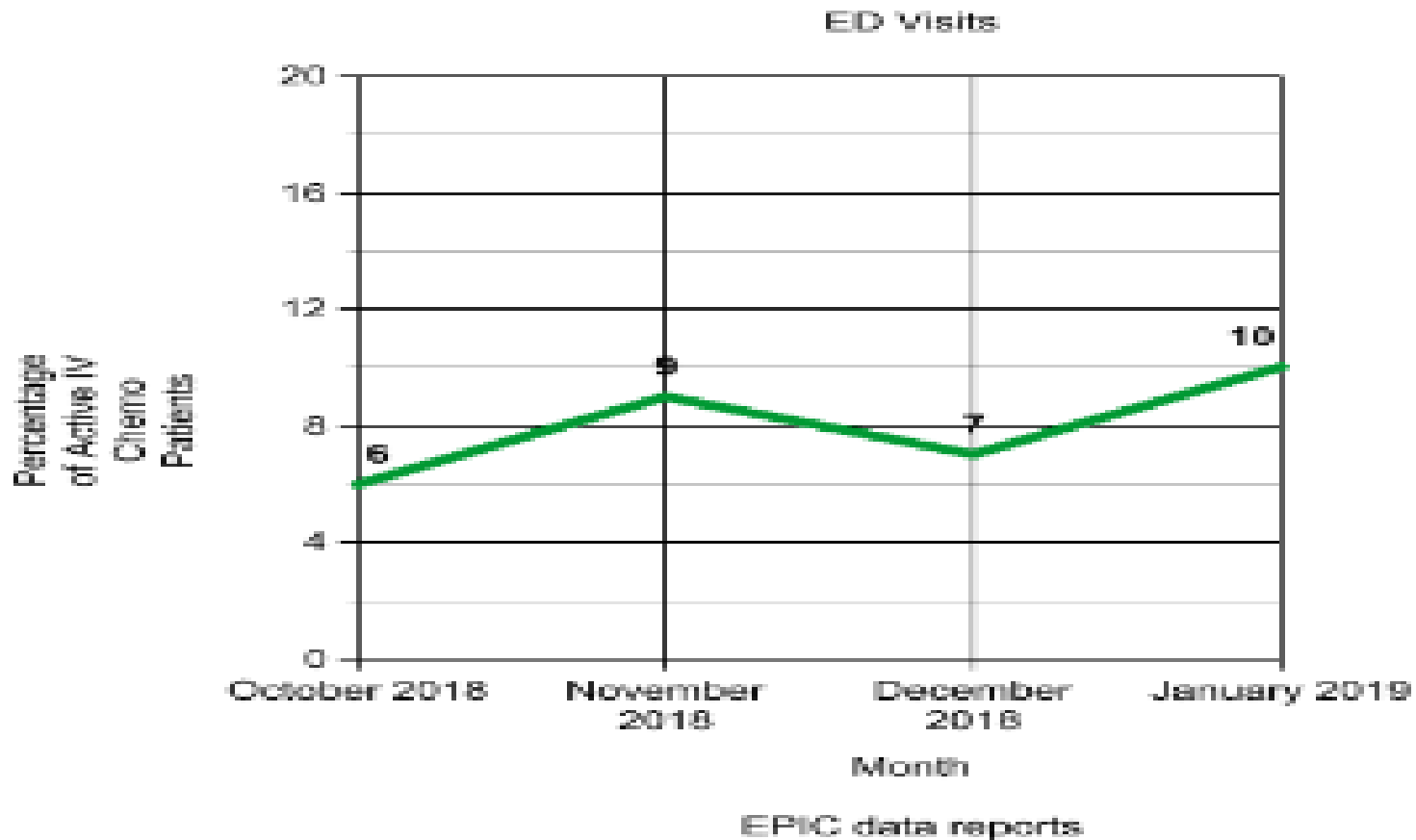
# Aim Statement

Reduce potentially avoidable ED visits for YRCC patients on active IV chemotherapy to 6% by June 15, 2019.

# Measures

- Measure: Percent of patients on active chemotherapy who visit ED.
- Patient population: Only patients with active IV chemotherapy plans
- Calculation methodology: Number of patients/Number of active chemotherapy plans
- Data source: EMR data via reports
- Data collection frequency: Monthly
- Data quality(any limitations): Must go through each report to ensure accuracy

# Baseline Data



# Prioritized List of Changes (Priority/Pay –Off Matrix)

<b>Impact</b>	<b>High</b>	Educate Staff (multiple areas) Educate patients (call us first)	Create and use APP for patients
	<b>Low</b>	Change call tree Create new paper for patients	EMR embedded triage tools
		<b>Easy</b>	<b>Difficult</b>

# PDSA Plan (Test of Change)

Date of PDSA Cycle	Description of Intervention	Results	Action Steps
April 3, 2019- May 31, 2019	Changed phone tree so #1 directs to triage nurse	Number of calls directed to triage up to 83%	Communications department changed tree
April 12, 2019- May 31, 2019	Education of staff/patients- CALL US FIRST	Before: Average 8% visit ED After: Average 6.9% visit ED	-Triage RN educated (book, same day appt.) -Staff educated on push to "call us first" (staff/MOR meetings) -Patients educated and new flyer in use
June 3, 2019-june 28, 2019	Triage phone management – Increase calls answered	Missed calls went from 33% down to 28% of calls made	-Charge nurse met with triage nurse -planned coverage for lunches and phone roll over

# PDSA Plan (Test of Change)

Date of PDSA Cycle	Description of Intervention	Results	Action Steps
June **, 2019 - End	Triage APP/e-mail to cell phone Pre-chemo teaching	AWAITING	Designed and tested -IT currently working out kinks

# Materials Developed

## *Yuma Regional Cancer Center* **Conditions to Report to Triage Nurse**

**Call 928-336-2953 (M-F)**

You may experience side effects from your treatments. Please call us FIRST to report any questions or symptoms. Our goal is to provide excellent care WITHIN our clinic. We can often manage your symptoms over the phone and with same day visits.

**After-hours 928-317-2518** \*If office is closed the answering service will notify the on-call doctor.

The following conditions can be **SERIOUS** and  
**SHOULD** be reported quickly

- 
- ✓ Temperature over 100.5
  - ✓ Unusual bleeding or bruising
  - ✓ Increased shortness of breath
  - ✓ Pain - worsening or new
  - ✓ Diarrhea - new or not controlled
  - ✓ Vomiting - new or not controlled
  - ✓ Constipation - new or not controlled
    - ✓ Dark or decreased urine
    - ✓ New skin rashes

## *Yuma Regional Cancer Center* **Condiciones Para Informar a la Enfermera de Evaluación** **Llame al 928-336-2953 (De Lunes a Viernes)**

Usted puede experimentar efectos secundarios de sus tratamientos. Por favor llámenos PRIMERO para reportar cualquier síntoma o si tiene una pregunta. Nuestro objetivo es proporcionar una excelente atención en nuestra clínica. A menudo podemos controlar sus síntomas por teléfono y con visitas el mismo día.

**Horario de atención 928-317-2518** \* Si la oficina está cerrada, nuestro servicio de respuesta notificará al médico de guardia.

Las siguientes condiciones pueden ser **SERIAS** y  
**DEBEN** ser informadas rápidamente

- 
- ✓ Temperatura sobre 100.5
  - ✓ Sangrado raro o moretones
  - ✓ Aumentado o falta de respiración
  - ✓ Dolor- empeorando or nuevo
  - ✓ Diarrhea - nuevo o no controlado
  - ✓ Vomitir - nuevo or no controlado
  - ✓ Estreñimiento - nuevo or no controlado
    - ✓ Orina oscura o disminuido
    - ✓ Nuevas erupciones en la piel

# Materials Developed



## **Triage Cancer Center \*CALL US FIRST \***

Yuma Regional Cancer Center  
(928) 336-2953

Call us first Monday - Friday 8 - 5pm  
After hours or weekends call 928-317-2518  
Emergencies call 911

Temp > 100.5

Unusual bleeding or bruising

Increased shortness of breath

Pain worse or new

Diarrhea new or not controlled

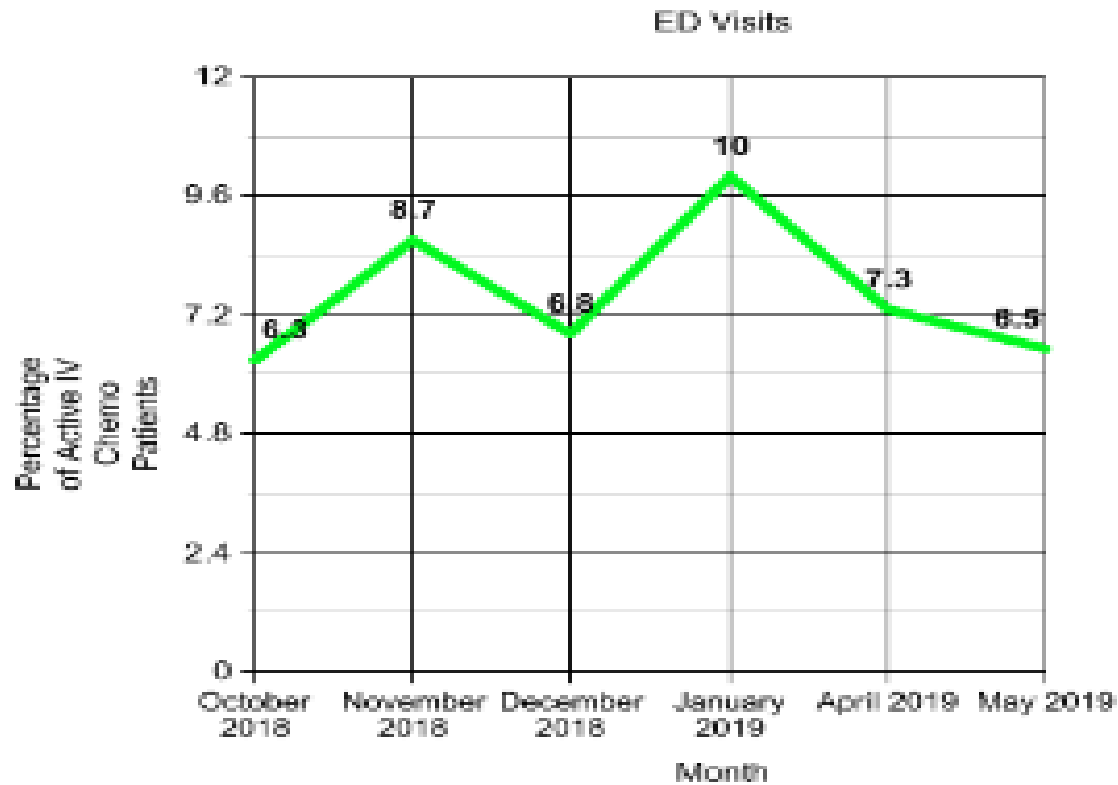
Vomiting new or not controlled

Dark or decreased urine

New skin rashes

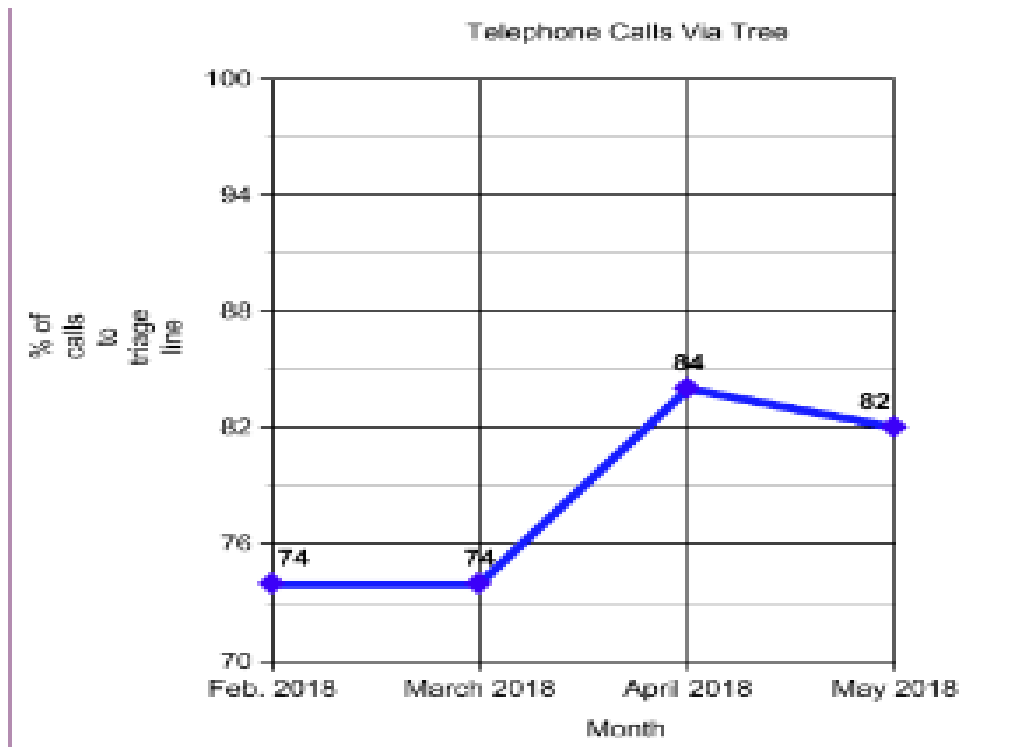


# Change Data



EPIC data reports

# Change Data



# Conclusions

- We did not quite meet the goal, but we did decrease from 8% to 6.9%
- We were able to increase the number of calls to the triage line
- This created an influx of calls that were not answered
- By creating a new PDSA cycle we were able to increase phone coverage
- We will continue the project through June/July
- We submitted this project to the ASCO Quality symposium for consideration

# Next Steps/Plan for Sustainability

- The next step is to put the application to use
- Will be attempting to do another PDSA cycle that includes teaching a few days before start of chemotherapy (rather than same day)
- Will have the APP installed on the patient/family phones during that education session