ASCO Quality Training Program

Reducing the Inpatient Length of Stay of Oncology Patients in Low Socioeconomic Communities

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Coaches: Steve Power & Grace Campbell

9/8/2020





Institutional Overview



- Academic Medical Center in Milwaukee, WI
- System also includes 4 community hospitals & 2 outpatient onc clinics
- 607 total inpatient beds
- Over 3,300 oncology inpatient discharges this fiscal year
- Over 5,300 cancer registry patients
- 3 inpatient units dedicated to oncology
- 24 Hour Clinic



Demographics

- Race/Ethnicity (FY18)
 - White: 81.7%
 - Black: 13.1%
 - Hispanic: 2.3%
 - Other: 2.8%
- Minorities
 - Racial: 18%
 - Rural: 22.8%
- Payer Types
 - Medicare: 49.2%
 - Medicaid: 6.9%
 - Uninsured: 2.9%





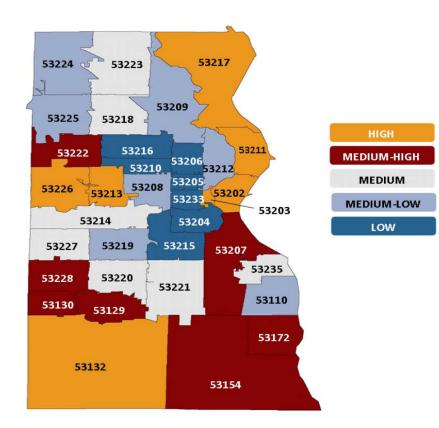
Problem Statement

In Q1 2018 – Q4 2019, Milwaukee County patients of low socioeconomic status (SES) with solid tumor malignancies (with medical admissions) had an average length of stay of 7.2 days. Patients in the high SES group had an average length of stay of 5.6 days.



Socioeconomic Status (SES)

- Map of Milwaukee County
 - Each zip code is identified by SES
- SES defined by
 - Income
 - % with Bachelor's degrees







Outcome Measure

Baseline data summary

Item	Description
Measure:	Inpatient hospital length of stay (LOS) in days, LOS index
Patient population:	Oncology, solid tumors, medical patients, inpatient adults, Q1 2018-Q4 2019, Milwaukee County residents
Calculation methodology:	 LOS index: A risk adjusted calculation of duration of hospital stay Observed / expected 1 = LOS is optimal, <1= better than expected, >1= worse than expected
Data source:	Vizient, Epic
Data collection frequency:	Quarterly



Data Analysis

Data Notes

- The original dataset has 1848 records.
- Demographics are summarized

Analysis Methods

- Over dispersed Poisson regression was used to analyze the length of stay (LOS) index. Specifically, the observed LOS was used as the outcome in the Poisson regression model with SES (or race) as the main predictor, and the logarithm of the expected LOS as an offset.
- This approach provides a multiplicative model for the LOS index.
- Analyses were performed using SAS 9.4 (SAS Institute, Cary, NC)



Process Measure

Diagnostic Data summary

- Consulted with inpatient oncology unit for factors contributing to length of stay
- Multidisciplinary team consisted of:
 - RNs
 - PT/OT
 - SW/CM
 - MDs

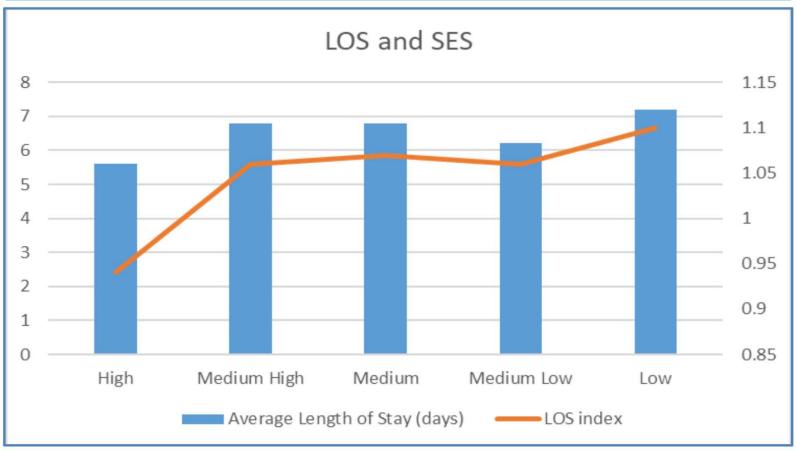
- Key Factors identified by team
 - Transportation
 - Insurance
 - Lack of PCP
 - Needing home support services
- It was agreed that all of these factors could be addressed by outpatient SW





Outcome Measure

Baseline data



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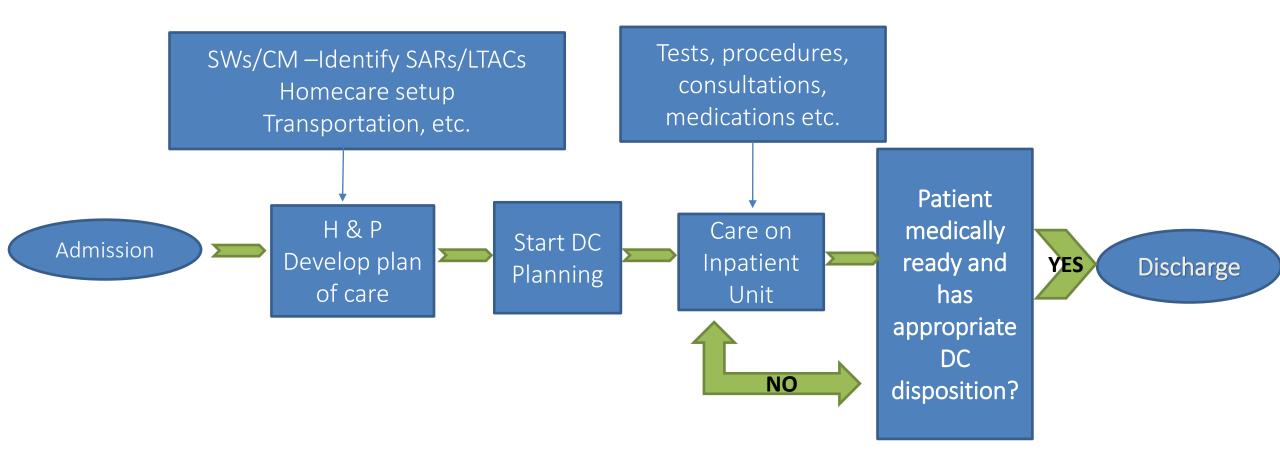
Aim Statement

• By May 2021, to reduce the LOS of patients at Froedtert Hospital with solid tumors and low SES by 10% from baseline.



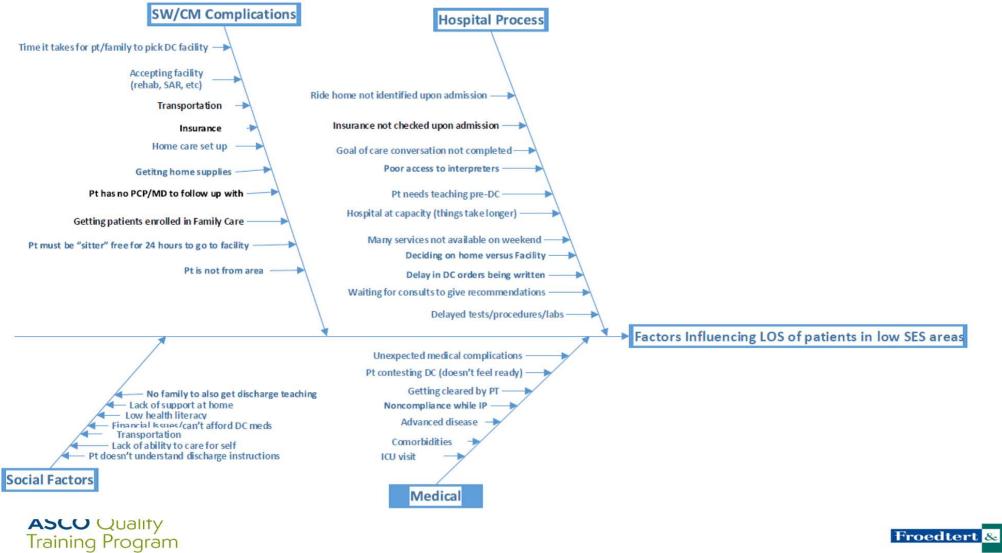
Process Map: Admission to Discharge

Flow of Patients from Admission to Discharge





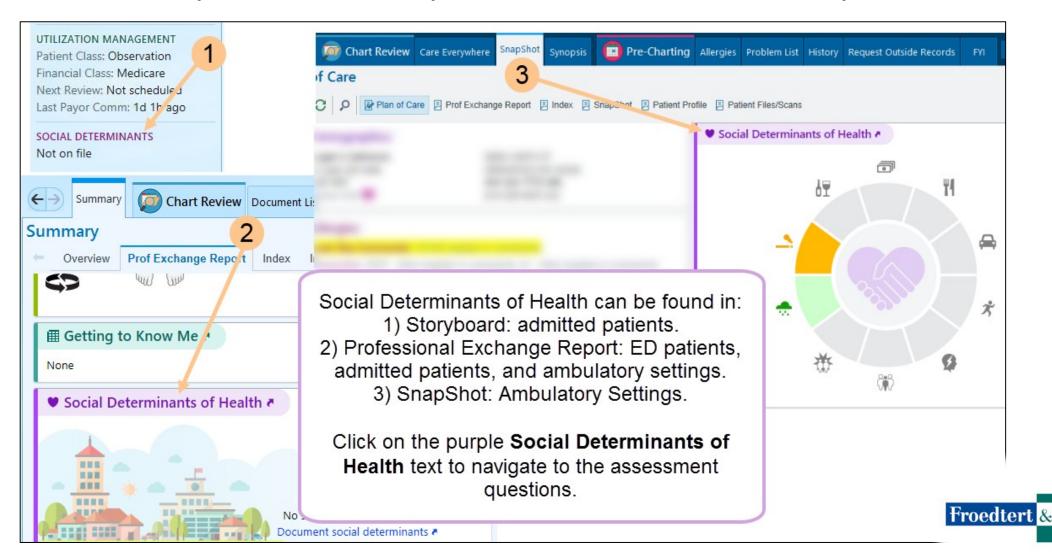
Cause and Effect diagram



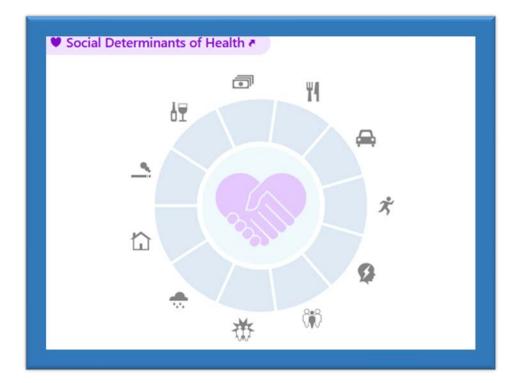
Froedtert & Medical

Social Determinants of Health

SW and CM staff in all hospital settings will assess for Social Determinants of Health (SDoH) for their patients to determine resource and support needs. This work supports efforts to reduce unnecessary hospital admissions and improve the overall health of the community.



Test of Change PDSA Plan–Preliminary Results



Financial Resource Strain Food Insecurity Transportation Needs Physical Activity Stress Social Connections Intimate Partner Violence Depression Housing Stability Tobacco Use Alcohol Use





SDoH Screening Demographics Financial Resource Strain Food Insecurity Transportation Needs Substance abuse Lifestyle Relationships Housing Stability

E Demographics				
Marital Status:	Primary Language:			
Single Married Legally Separated Divorced Widowed	English 🔎			
Unknown Significant Other Patient Refused	Ethnicity:			
Spouse Name:	Patient Refused			
	Race:			
Number of Children:	Patient Refused			
Years of Education:				
What is the highest level of school you have completed or the highest degree you have received?				
Ø ⁻				
Financial Resource Strain				
How hard is it for you to pay for the very basics like food, housi Not hard at all Not very hard Somewhat hard Hard Very hard				
Not hard at all intervery hard isomermat hard intervery hard				
M Food Insecurity				
Patient refused all				
Within the past 12 months, you worried that your food would ru Never true Sometimes true Often true Patient refused	n out before you got money to buy more.			
Never and Someanies and Onen and I allent relased				
Within the past 12 months, the food you bought just didn't last a	and you didn't have money to get more.			
Never true Sometimes true Often true Patient refused				
A Transportation Needs 🛈				
Patient refused all				
In the past 12 months, has lack of transportation kept you from	medical appointments or from getting medications?			
Yes No Patient refused				
In the past 12 months, has lack of transportation kept you from meetings, work, or getting things needed for daily living?				
Yes No Patient refused	······································			

Test of Change PDSA Plan and Outcome Measures

Date5/1/2020	PDSA Description
4/28/2020	Screening for Social Determinants of Health (SDoH) for all inpatients at the time of admission
May-Nov/2020	Evaluate the efficacy of SDoH screening project in patients with low SES
May-Nov/2020	 Identify the barriers for discharge (transportation, accepting facility) Home health services (wound check, IV antibiotics) Medication management Palliative/Hospice management



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Outcome Measures

Primary Outcome

• Inpatient LOS for solid tumor oncology patients from low SES communities in the city of Milwaukee effectiveness in LOS

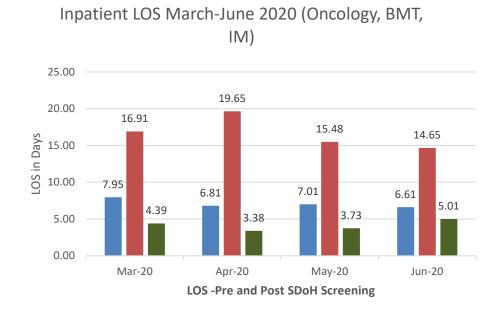
Secondary Outcomes

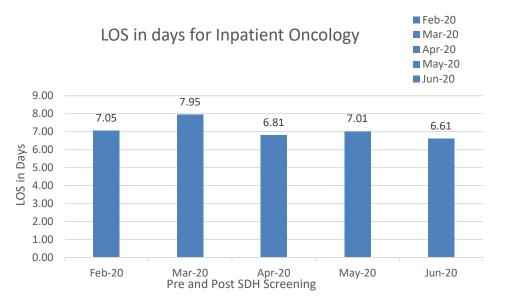
- Readmission rates
- Transportation
- Home health services
- Medication management





Inpatient LOS (2018, 2019, [March-June 2020])



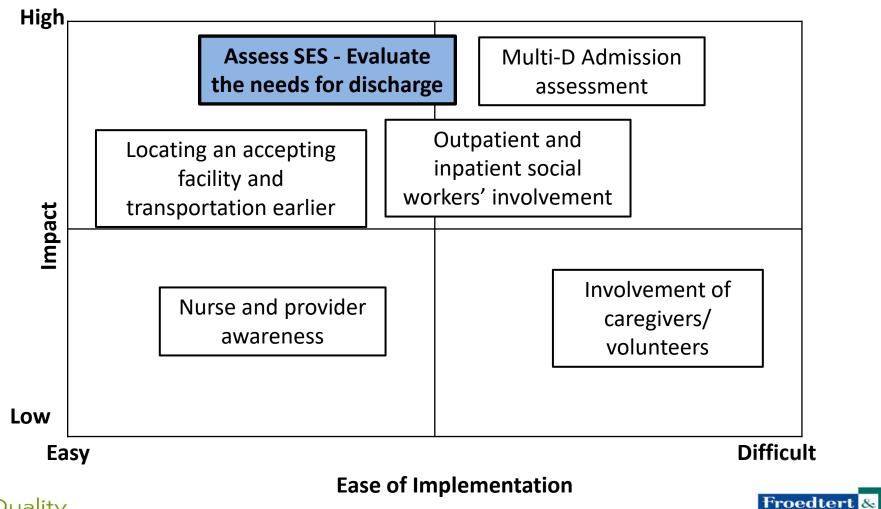






Priority / Pay-off Matrix

Countermeasures



MEDICAL COLLEGE of



Next steps-Sustainability Plan

Next Steps	Owner
Ongoing quarterly evaluation of LOS for patients with low SES	 ASCO-QTP – MCW team Inpatient manager
Continued discussion with inpatient teams and the hospital administration	ASCO-QTP- MCW team
Ongoing education	Inpatient teams
Inpatient and Outpatient SDoH questionnaires- build a software to connect to EPIC to generate referrals (home health, transportation etc.)	FMLH administration

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Presentations

Oral abstract – research retreat, MCW/FMLH ASCO-Quality Care Symposium

<u>Publication</u> Journal of Oncology Practice





Conclusions

- Implementation of SDH screening to assess SES
- Better collaboration with inpatient management, pharmacy, nutrition, social worker, case management and nursing.
- Possibility of reducing the LOS by $\leq 10\%$ by May 2021
- Potential novel technologies
 - inbuilt EPIC software
 - generate automated referrals in preparation for discharge
 - if effective, plan on implementing the same on outpatient side





Thank you

Team members

Team Member		Role
Sailaja Kamaraju	Oncologist	Leader
Tamiah Wright	Clinical Nurse Specialist	Co-leader
Kathleen Jensik	Program Manager	Team Member
John Charlson	Oncologist	Team Member
Kevin Richardson	Data Coordinator	
Colleen McCracken	Nurse Educator	
Julia Olsen	Clinical Nurse Leader	
Lisa Lamontagne	Social Worker	
Jackie Grams	Social Worker	
Aniko Szabo	Statistician	
Donggwan Lee	Statistician	
Parameswaran Hari	Division Chief	Sponsor
Steve Power	ASCO Coach	
Grace Campbell	ASCO Coach	







- Valarie Ehrlich, PA-C, MPAS (Inpatient APP Manager, Hematology-Oncology, BMT)
- Jenni Cadman, MSN, RN (Director of Nursing, Case Management and Social Work)
- Janelle Skarda, BS (Manager, Analytics Service)





Reference List

- Conduent Healthy Communities Institute. (n.d.). Socioeconomic Status and Health. Health Compass Milwaukee. Retrieved date. Retrieved from <u>http://www.healthcompassmilwaukee.org/tiles/index/display?id=146057311458</u> <u>936237</u>
- Vizient Clinical Data Base/Resource Manager [™]. Milwaukee, WI: Froedtert & Medical College of Wisconsin; 2020. https://www.vizientinc.com. Accessed February 20, 2020.

