ASCO's Quality Training Program

Project Title: Increasing on Time Treatment Plan Delivery in

Radiation Medicine

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Simon Brown, MD Wolfram Laub, Phd, MBA Barb Agrimson, CMD Jo Price, RT(T)

Institution: Oregon Health & Science University Knight Cancer Center

Date: January 26th, 2017





Institutional Overview

Oregon Health and Science University is the state's only academic health center. It includes OHSU Hospital and Doernbecher Children's Hospital with a combined 576 beds.

In 2015 the hospital saw more than 1 million patient visits. More than half of the hospitalized patients are either uninsured or insured through a public payer.

Radiation Medicine at OHSU treated 1,108 patients last year.





Team Members



Jerry Jaboin, MD, PhD Vice-Chair for Clinical Affairs Team Leader



Simon Brown, MD Year 3 Resident



Wolfram Laub, Phd, MBA Clinical Associate Professor Therapeutic Radiation Physics



Barb Agrimson, RT(R)(T), CMD Medical Dosimetrist



Jo Price, RT(T) Lead Radiation Therapist



Jennifer Ruocco, PhD Director of Radiation Oncology



Dorothy Ryan, RT(R)(T) Chief Radiation Therapist



Stephanie Junell, PhD Medical Physicist



Jeff Hanson Finance and Operations Manager

Champions



Charles Thomas, MD Professor and Chair



Kevin Billingsley, MD Chief, Division of Surgical Oncology



Ellen Distefano Quality Management





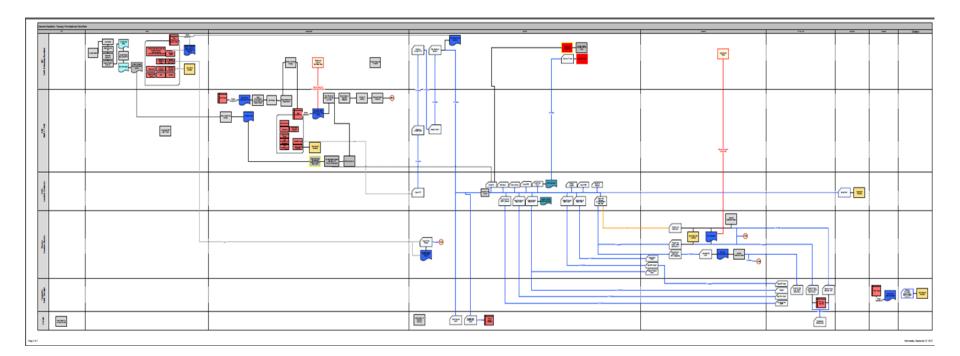
Problem Statement

Sixty-two percent of final Physics Quality Assurance (PQA) approvals for treatment plans (including3D/IMRT/Arc/SBRT/SRS plans) are not completed by 8:00 am the day prior to the patient's first treatment appointment.





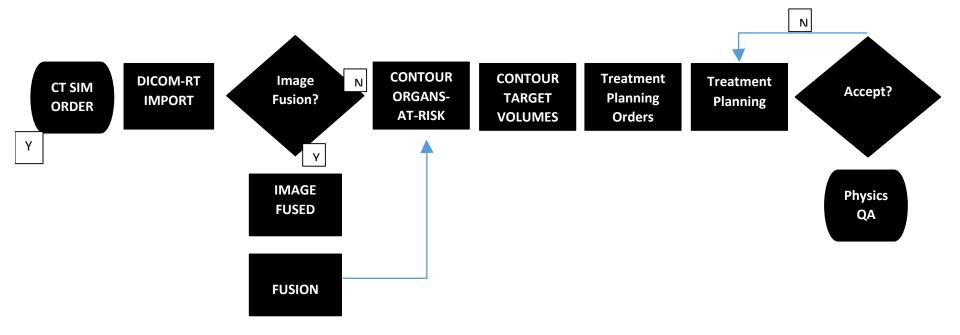
Process Map







Process Map

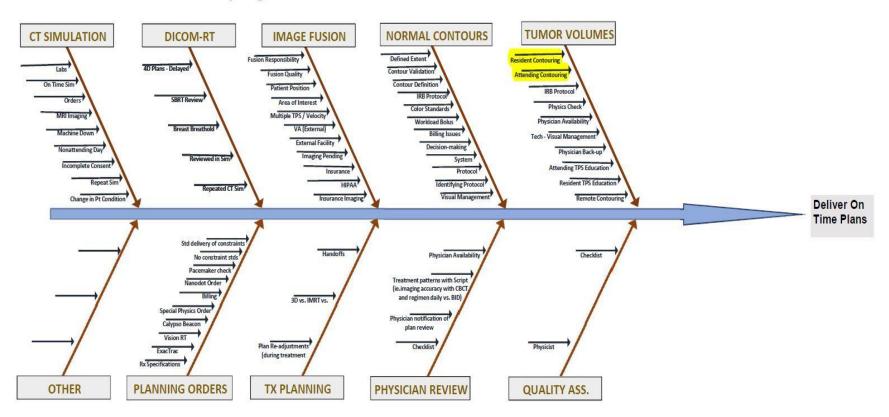






Cause & Effect Diagram

Ishikawa Groupings







Diagnostic Data

AS	CO Endpoint	s_RTT New	Starts From 2/18/2015		
OHSU W/	/out Emergency Starts to 8/24/201				
Attending	Patient Count	% Ready for Therapist QA by 8am day before New Start	Average CT to New Start (h)		
	28	42.9%	152		
	11	81.8%	161		
	275	57.1%	151		
	253	55.7%	248		
	50	72.0%	224		
	239	71.1%	220		
	2	0.0%	121		
	23	56.5%	144		
	2	100.0%	119		
	185	62.2%	223		
	3	66.7%	238		
All Attendings	1071	61.3%	205		

6 Month Tracking Period

All Data points retrieved by Mosaiq

Of 1071 patient plans completed approximately 62% were completed at 8 am prior to the start of treatment.



Aim Statement

Our rate of on time treatment planning delivery is a dismal 62% for all providers and 68% for the two providers we are tracking.

By January 2017, 90% of plans for those two providers will have final physics quality approvals completed by 8 am the day prior to the patient's start of treatment.





Measures

- Measure: Percentage of plans ready for therapist QA by 8 AM the day before New Start
- Patient population: Non-emergent radiotherapy patients
- Data sources: Mosaiq radiation therapy program and whiteboard Abnormality Tracker
- Data collection frequency: Daily
- Calculation methodology: MOSAIC QCL Scripting for task completions.
- Data quality(any limitations): Limitations dependent on data not automatically collected.





Intangible Measures

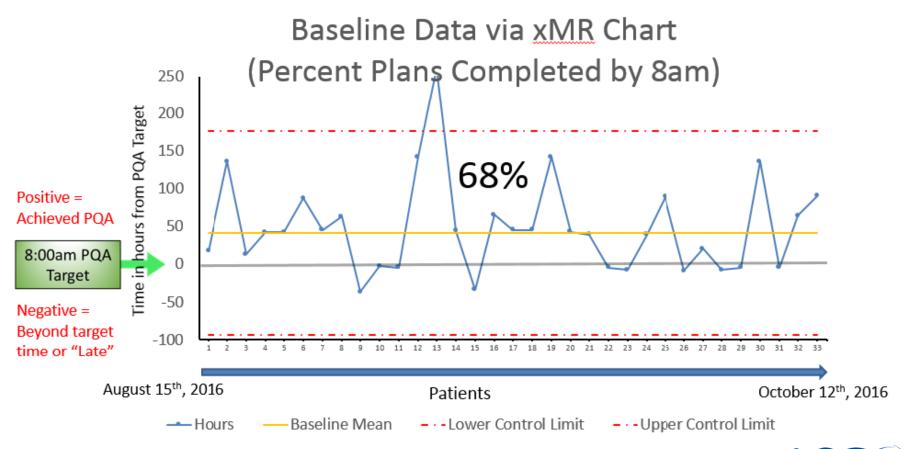
Ah ha Moments...

- "Boy the CT sim initiates and manages a large number of processes"
- "I had no idea Physics did that"
- "I could not believe how much workflow is managed by the residents"
- "The brainstorming process itself was really enjoyable"
- "We need to really work on reducing the load on Dosimetry"





Baseline Data







PDSA Plan (Test of Change)

Date of PDSA Cycle	Description of Intervention	Results	Action Steps
October 13, 2016	Morning Hallway Whiteboard Huddle required commitment from all department divisions (subgroups)	Visual hallway Whiteboard didn't provide consistent understanding or knowledge of it's purpose and information wasn't disseminated	Presented the project to all members of the department.
October 13, 2016	Simulation contour schedule	Attending's understood required times for plan completion. Big improvement in goal.	Additional Visual management tool
November 3, 2016	Dosimetry Digital QCL Whiteboard Tracking Monitor	Dynamic display of project workflow (contour completion)	Another method to communicate task workflows.

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PDSA Plan (Test of Change)

Date of PDSA Cycle	Description of Intervention	Results	Action Steps
December 7, 2016	Screen capture of digital dosimetry whiteboard email sent out daily to Attending's	Clearer understanding of pending work	Communicate the Attendings workflow to their assigned Residents
December 20, 2016	Residents added to digital dosimetry whiteboard daily email.	Pending	To Be Determined





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

High

Impact

Low

Digital Whiteboard
Daily Email
Digital Whiteboard

Sim to Start Schedule

Daily Huddle

Easy Difficult





Materials Developed

Due/Over Due Contours - MHR (6 days before start)

1/10/2017

1/11/2017

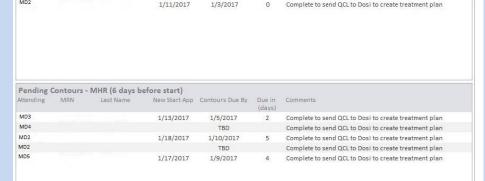
Dosimetry Digital Whiteboard

Simulation to Start Schedule Workflow Starts On Monday Monday Tuesday Wednesday Attending Completed CL Complete Wednesday Plan to Planning Planning Plan to Physics Therapists by 8 Off on Plan Monday Tuesday Wednesday Thursday Friday Start

Dosi Daily Quality Check List Add Change Delete Complete Skip Note Date Range: All Complete Complete Incomplete Show All Incomplete Items Overdue Show Only Items Requested By Staff v Due Date Task Patient pp 12/28/2016 Ready to Plan 1 Dosimetry MHR 12/30/2016 Ready to Plan (Re-plan/no c... Dosimetry MHR Complete task to send QCL to MD Patient 12/30/2016 Workflow Check -Contours I... Contours completed 3 business days before treatment, Y(Complete) N(Skip) Dosimetry MHR 12/30/2016 Ready to Plan 4 12/28/2016 Patient QA Request (Boost) [... Dosimetry MHR Complete task to request QA, Skip if patient does not req QA measurements (D Export Structures and Plan to "AlignRT"; Complete to notify PHY/RTT Pre-Port for 3D SBRT Reque. Complete task to request Pre-Port for 3D SBRT from Therapists Export Plan, Structures, CT, and Dose to Mobius; Complete to notify PHY 12/28/2016 ExacTrac Export (Skip if NA) ^ Dosimetry MHR Create patient in Calypso; Complete to notify PHY/RTT 12/28/2016 Calvoso Export (Skip if NA) A Dosimetry MHR Must match plan RX - energy, dose, fraction # and isodose Dosimetry MHR Fix doses, enter (if any) bolus thickness; Set CT image to "review not req" 12/28/2016 Import DRR & set CT to "revi-Dosimetry MHR check box to display in field definition window Dose Tracking Dosimetry MHR Check doses add up to Rx (inc cumulative dose for boosts) Dosimetry MHR Site Setup and create CBCT Dosimetry MHR Copy sim notes, enter shifts, verify iso position, approve Import Plan Docs A Dosimetry MHR import plan doc, assign to prescription(s) and approve Export plan to RadCalc; Monaco- to file; Eclipse- verify calc point added Request special physics Image Fusion review if applicable New Start App Contours Due By Due in

Daily email to Attendings/Residents





1/2/2017

1/3/2017

Complete to send QCL to Dosi to create treatment plan

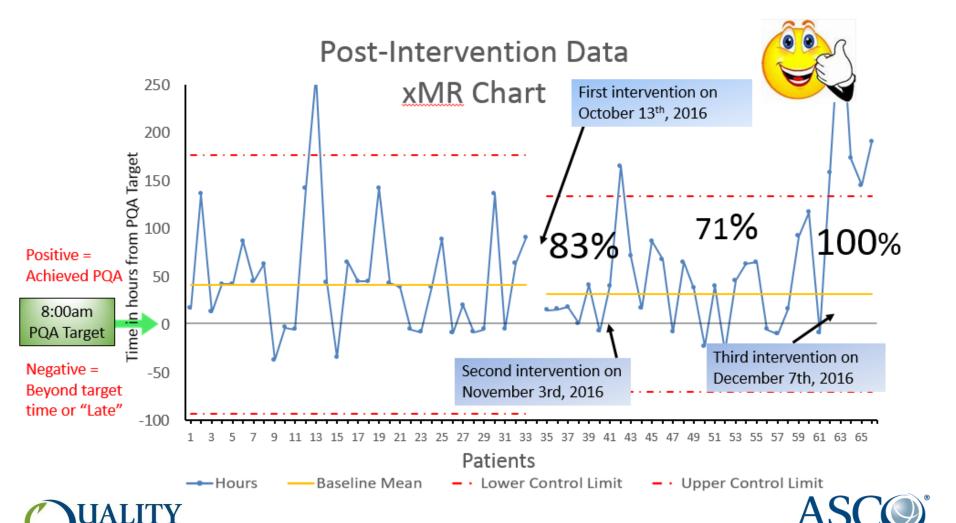
Complete to send QCL to Dosi to create treatment plan

Home



complete to send QCL to Dosi to create treatment plan

Change Data



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Conclusions

- Our data suggests we have reached our goal, but we don't have sustainability yet. We are on our way to reaching our goal.
- Each intervention resulted in a positive change, but more interventions were required.
- We need to identify more steps to reach our goal for all providers and maintain it.





Next Steps/Plan for Sustainability

- Continue process and identify future interventions
- Run xMR chart for last pending PDSA
- Implement process to include all providers
- Hold quarterly meetings





Increasing On-Time Treatment Plan Delivery in Radiation Medicine

AIM: Our rate of on time treatment planning delivery is a dismal 62% for all providers and 68% for the two providers we are tracking. By January 2017, 90% of plans for those two providers will have final physics quality approvals completed by 8 am the day prior to the patient's start of treatment.

INTERVENTION:

- Recorded the time (in hours) from planning CT Simulation to treatment Start
- Recorded success rate of achieving PQA by 8am the business day prior to treatment start
- Created a cause-and-effect analysis via Ishikawa groupings
- Implemented visible flow chart and patient log with time points to assist providers with planning and scheduling
- Using the PDSA method we implemented a digital whiteboard tracking monitor and an alert system to notify providers of incomplete contours.

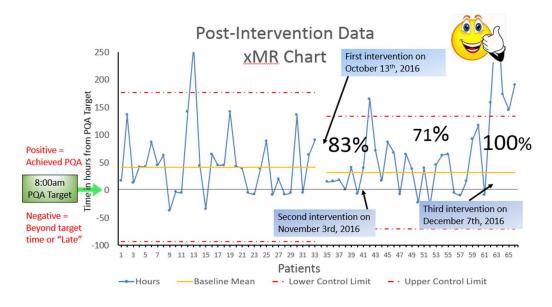
TEAM:

Department of Radiation Medicine

PROJECT SPONSORS:

- Dr. Charles Thomas, MD
- Dr. Kevin Billingsley, MD
- Ellen Distefano

RESULTS:



CONCLUSIONS:

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Thank you





