

Improving Care Coordination for Patients on Oral Oncolytic Therapy

AIM To increase the percentage of *coordinated office visits & Ibrance dispenses* (within the defined 3-day window) from **45%** (during the baseline period of July 2020 - December 2020) to **80%** between May 1 & May 31st, 2021.

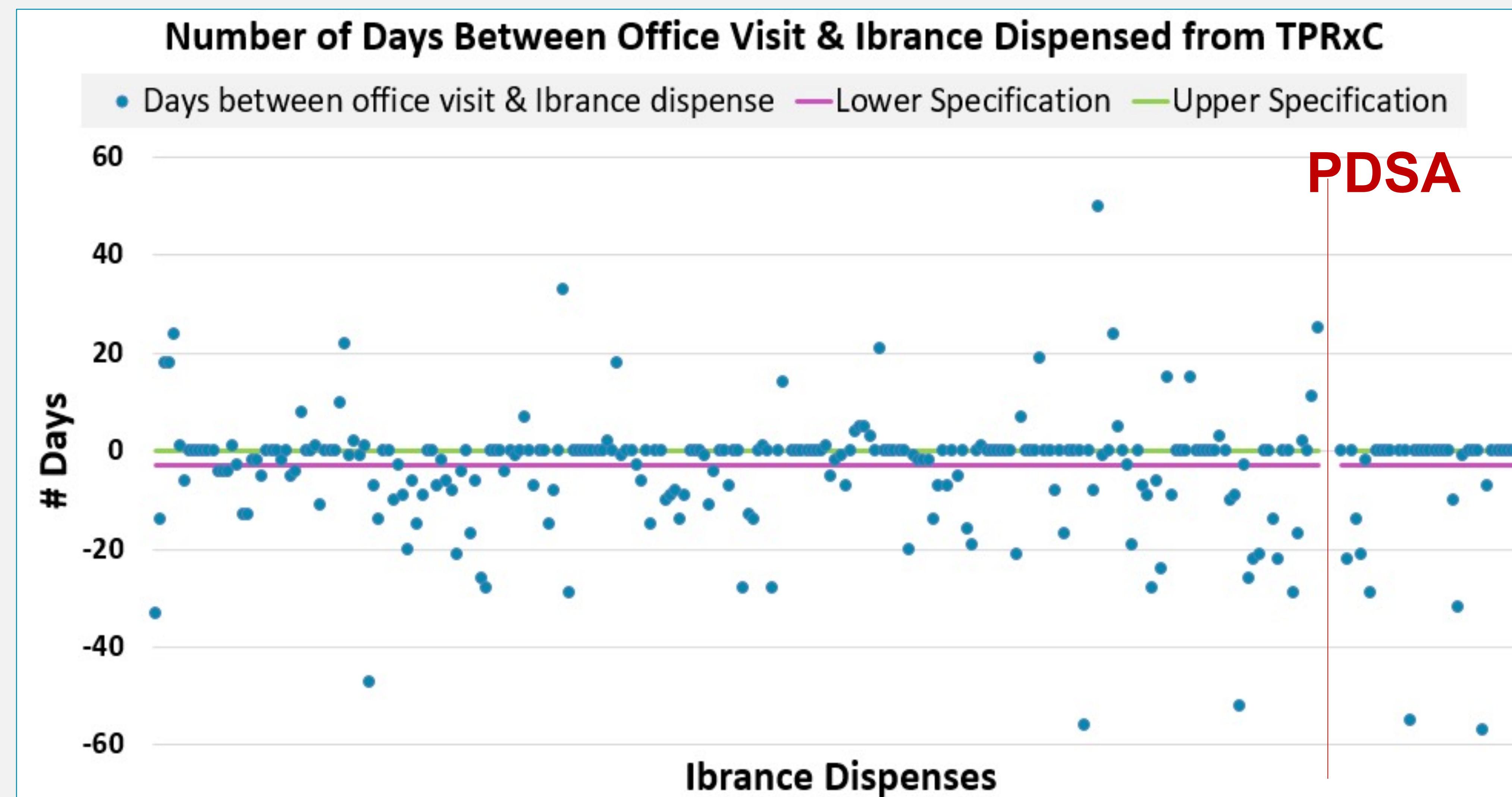
INTERVENTIONS

- ✓ Added “medication pick-up” appointment to the patient’s schedule, enhancing visibility, compliance & tracking
- ✓ Implemented use of a laminated pharmacy “stop sign” to prompt patients to stop at the pharmacy before leaving
- ✓ Updated oral care plans to include a pharmacy dispense activity, increasing clarity of the treatment flowsheet
- ✓ Enhanced weekly communication between Advanced Practice Provider & Oncology Nurse Navigator (ONN) to review patients on orals, encouraging comprehensive review of patient’s needs, treatment plan & future orders
- ✓ Standardized the initial ONN follow-up for patients on oral therapy

HOACNY TEAM

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RESULTS



SNAPSHOT

Baseline Period
7/1/2020-12/31/2020
Dispenses within Specifications
45%

Post-Intervention Period
5/1/2021-5/31/2021
Dispenses within Specifications
74%

CONCLUSIONS

- ✓ HOA improved the coordination of Ibrance dispenses relative to office visit appointments from **45%** to **74%**.
- ✓ Improved coordination of Ibrance dispenses relative to labs from 78% to 87%, and improved coordination of dispenses relative to the next cycle start date from 72% to 82%.
- ✓ Improved accuracy & visibility of the patient’s treatment plan and enhanced communication across teams.

NEXT STEPS

- ✓ Understand differences in this process compared to patients receiving oral therapy through external specialty pharmacies and identify care coordination needs.