

Fostering Oral Chemotherapy Understanding and Safety (FOCUS) Project: Improving Knowledge and Compliance with National Safety Standards

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Background

- Oral chemotherapy drug development and use has increased.
- Evidence suggest variability in oral chemotherapy administration practices.
- Variability in safety practices can cause gaps in care as oral chemotherapy does not have the same safeguards intravenous (I.V.) chemotherapy¹
- Need for improved safety practices has been acknowledged.²
- Without appropriate structure of processes to meet the unique needs of patients on oral chemotherapy, unaddressed complications may threaten therapeutic outcomes and patient safety³

Purpose

This quality improvement (QI) project sought out to:

Assess provider & staff general knowledge on oral chemotherapy and national safety standards

Evaluate the implementation and ease of use of an electronic medical record (EMR) integrated chemotherapy documentation template to improve compliance with national safety standards

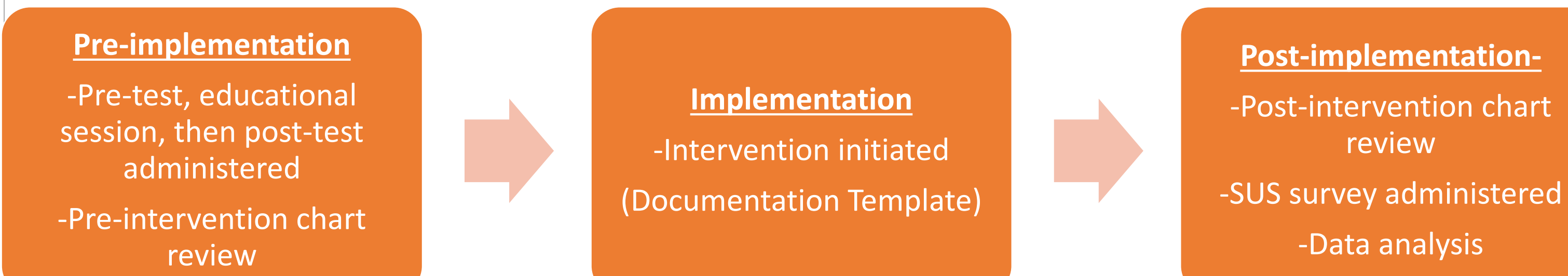
Methods

Design: Pretest-Posttest Design

Setting: Outpatient ambulatory oncology clinics center within an academic medical center

Translational Framework: Pronovost's Model for Large Scale Knowledge Translation

Phases of implementation:



Results-Knowledge Gained

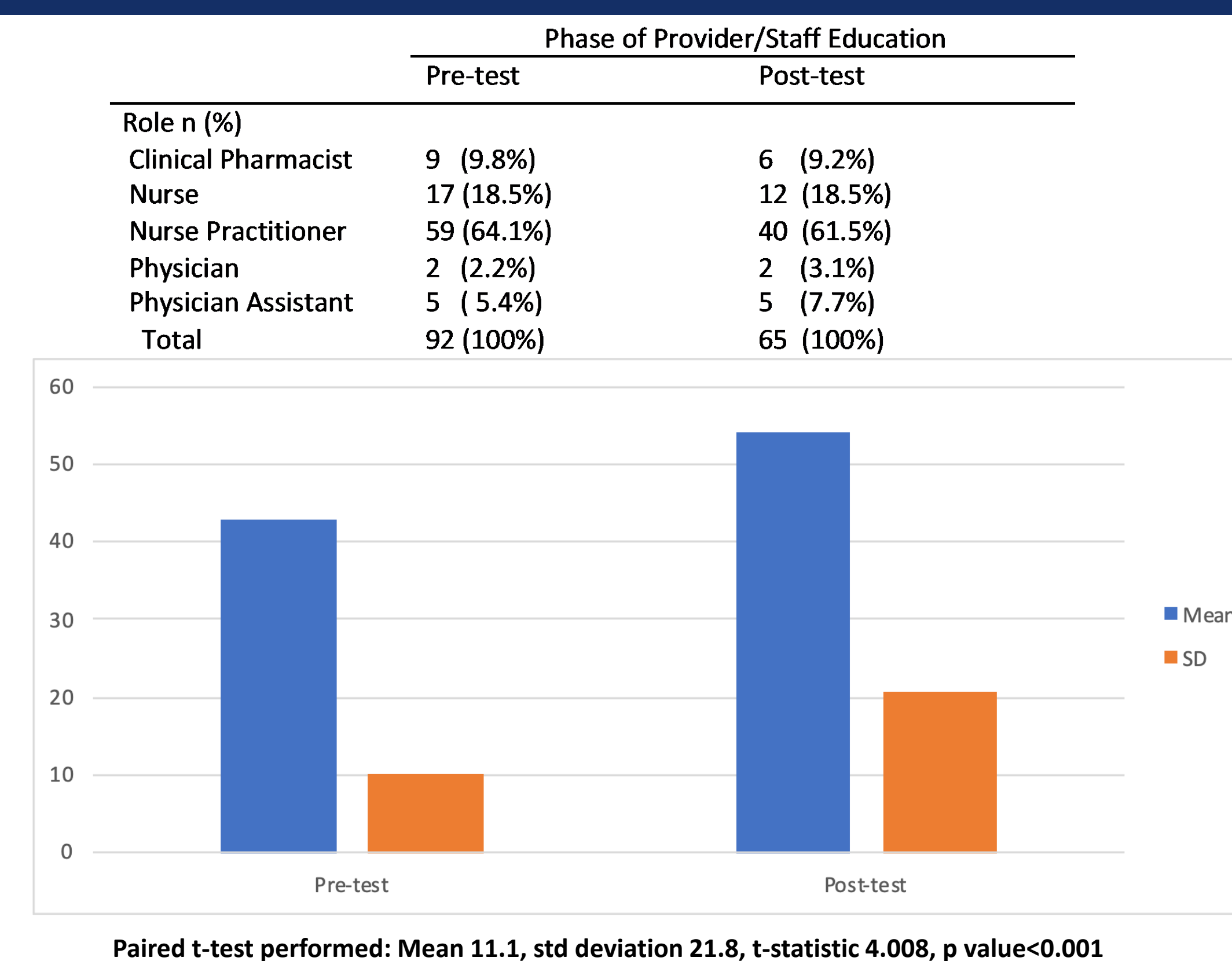
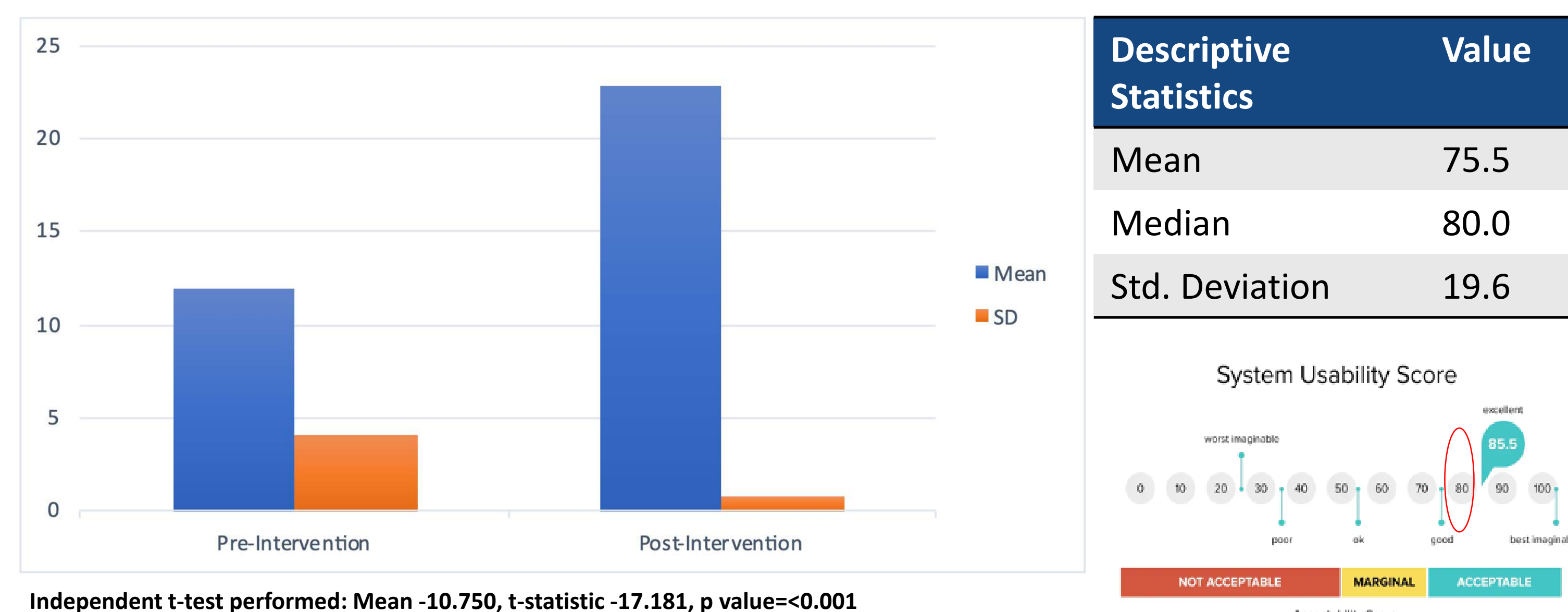


Chart Review Demographics

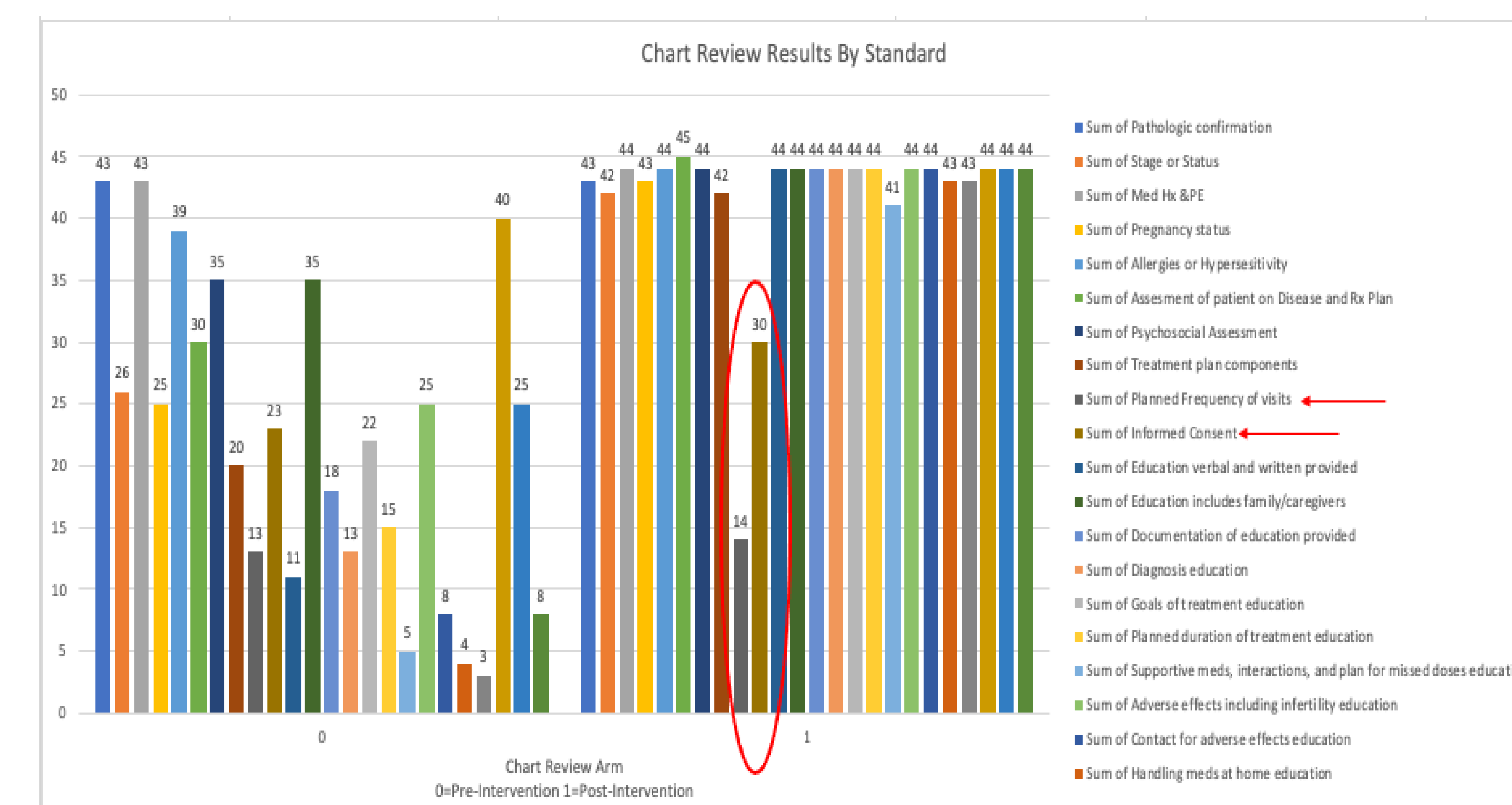
	Pre-intervention	Post-intervention
Age, mean (SD)	Mean 68.3 (11.6)	Mean 65.0 (13.7)
Gender n (%)		
Male	24 (54.5%)	25 (56.8%)
Female	20 (45.5%)	19 (43.2%)
Race		
Black	7 (15.9%)	5 (11.4%)
White	35 (79.5%)	39 (88.6%)
Asian	1 (2.3%)	0 (0%)
Other	1 (2.3%)	0 (0%)
Ethnicity		
Hispanic or Latin	22 (50.0%)	27 (61.4%)
Not Hispanic or Latin	22 (50.0%)	17 (38.6%)
Diagnosis		
Solid Tumor	37 (84.1%)	37 (84.1%)
Hematologic	7 (15.9%)	7 (15.9%)

Note. The data source was from chart review performed on a total of 88 patients via electronic medical record.

Results-Intervention & Feasibility



Results-By National Safety Standards



Conclusion

- A multidisciplinary approach and leveraging the use of the EMR can make a significant impact in patient safety and meeting quality and accreditation indicators of care.
- The role of nurse practitioners is prominent in chemotherapy education (over 60% of participants).
- Provider and staff awareness, understanding, and education is a critical component in achieving high safety standards in which further focus should be placed.

Future Directions/Sustainability

- Refine the documentation template to meet the needs of other areas (i.e., stem cell transplant) and lessen time needed to complete.
- Follow-up visit documentation template created to address adherence/toxicity.
- Build out reports for Quality Department to assure continued high compliance rates for upcoming accreditation survey.
- Develop annual education for providers as a refresher on the safety standards.

References:

¹Roop, J.C. & Wu, H. (2014). Current practice patterns for oral chemotherapy: Results of a national survey. *Oncology Nursing Forum*, 41(2), 185-194.
²Duffy, A.P. & Cho, J. (2017). Comparing oral chemotherapy safe prescribing practices in an academic health system: A retrospective analysis. *Journal of Hematology Oncology Pharmacy*, 7(2), 83-90.
³Solomon, J.M., Ajewole, V.B., Schneider, A.M. Sharma, M., & Bernicker, E.H. (2019). Evaluation of prescribing patterns, adverse effects, and drug interactions of oral chemotherapy agents in an outpatient cancer center. *Journal of Oncology Pharmacy Practice*, 25(7), 1564-1569.

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Image credit: 10up.com; Retrieved from: <https://xd.adobe.com/ideas/process/user-testing/sus-system-usability-scale-ux/>