



Models of Survivorship Care Delivery

Mary S. McCabe

Models of Care

- **Structure of the model and type of provider depend on:**
 - **Risk** of recurrence and late effects
 - **Type** of services to be provided
 - Medical
 - Psychological
 - Social
 - Rehabilitation
 - Financial
 - **Timing** of the services
 - Transition visit at the end of therapy
 - Specified time points after treatment ends
 - Ongoing care



Models of Care High Risk

Multi- disciplinary Care Model

Pediatric survivorship care model. Care is provided by different providers with expertise in long-term effects, such as cardiology, psychology and endocrinology. Takes place in a setting separate from the oncology practice.

Models of Care

Moderate Risk

Disease/Treatment Specific Clinic	Type and Intensity of follow-up care is determined by type of cancer treatment received
Integrated Care Clinic	Imbedded in the oncology practice of a cancer center, community hospital or private practice. May be physician (MD), nurse practitioner (NP) or physician assistant (PA) as provider. Care is coordinated with primary care provider (PCP).
Consultative	One time consultation to coordinate the survivorship plan of care. Follow-up may be with the oncologist or PCP. May be a MD, NP or PA as provider.

Models of Care

Low Risk

Community Generalist Model

Transition of survivor occurs early with follow-up care provided by Primary care physician, internist, nurse practitioner or physician assistant.

Provider Models - State of the Science

- Comparisons of providers
 - Nurse-led and PCP follow-up may be equivalent to oncologist care in detecting recurrence
 - Patient satisfaction with this approach is mixed even when care is focused on recurrence
- Most models of care assume a role for the PCP
- Transition care processes require written information between providers, but the details are not established.
- Diverse outcomes measured across models and often focus on recurrence and QoL endpoints.

Jefford M., Trials 2013

Gates P. Cancer Forum, 2009

Grunfeld E. JCO 2011

Knowles G Eur J Onc Nurs 2007

Howell D, J Cancer Surv 2012

Self Management Model

- Evidence supports health improvements for:
 - Arthritis, diabetes, heart disease and lung disease
- Promote skills for chronic illness management
 - Problem solving
 - Decision-making
 - Timely communication with health professionals
 - Taking action (motivation and self-efficacy)
- Survivorship research has focused on:
 - Psychosocial support
 - Managing symptoms
 - Healthy behaviors

The screenshot displays the MyMSK patient portal. At the top, there are navigation links for MSKCC.org, Locations, FAQs, and Contact Us. A user is logged in as 'portalsummary1' with options for Account Settings and Log Out. The MyMSK logo and Memorial Sloan Kettering Cancer Center logo are visible. A search bar is present. The main navigation menu includes Home, Appointments, Messages, Medical Info (highlighted), Billing, Patient Profile, and Forms. Below this, there are links for Medical Information, Lab Results, Radiology Results, Treatment Summary, Request Medical Records, Educational Resources, Visit Summary, My Medications, and My Allergies. The main content area is titled 'Patient Treatment Summary and Care Plan' with a Print icon. A text box explains that upon completion of cancer treatment, a Patient Treatment Summary and Care Plan document will be provided, containing treatment history and recommendations. It also notes that the document was prepared by a nurse practitioner or doctor and encourages users to give a copy to other healthcare providers. Below this is a table with two columns: Date and Provider.

Date	Provider
November 09, 2012	JASON A KONNER, MD
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Wilson P J Cancer Surviv, 2008
Beckmann K, Austral J Prim Health, 2007
Krouse R, Pscho-Onc, 2016

Group Visits

- Well established evidence supporting cost effectiveness and health improvement for:
 - Diabetes, heart failure, prenatal care and dermatology
- Components
 - Health Assessment
 - Medical or psychological issues related to cancer or its treatment
 - Education
 - Core content is critical, but interactive format allows for patient-focused issues to be addressed
 - Support
 - Knowledgeable facilitator
 - Evaluation



Trotter, K CJON, 2011
Sirorsky Arch Derm, 2010
Vachon JNMA, 2007
Wagner Diab Care, 2001

Virtual Follow-up Care

- Telemedicine visits
 - Symptom management
 - Psychosocial screening
 - Counseling
 - Health promotion
 - Survivorship Care Plan
- E-Health self reports
 - Identify and monitor problems
 - Risk stratify care pathway
- Telephone
 - Counseling
 - Psychosocial
 - Health promotion
 - Reinforcement
 - Care plan implementation
- Triage



Warrington L Acta Onc, 2015
Bomar K JCO supp, 2016
Cole-vadjic K JCO supp, 2016

Survivorship Models of Care Research

- Develop a common understanding of “usual care” to compare with survivorship models
- Develop a common taxonomy for the various models of survivorship care
- Develop a set of outcomes that are important for each group of survivors based on their risk
 - Apply a common set of characteristics for evaluation
- Evaluate the content, delivery and utility of Care Plans to the recipients
- Assess cost of formal survivorship care and services in order to determine the value in terms of the individual/family and the health care system
- Identify the unique needs of survivors in underserved populations

Halpern, M. JOP 2015
Howell D. J Cancer Surviv, 2012

