Clinical Pathway and Education Implementation to Support Guideline Adherent Breast Cancer Care for Rural Women Under Age 50

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Abstract
Background: Adherence to National Comprehensive Cancer Network (NCCN) guidelines improves breast cancer therapy outcomes. While physician guideline adherence is often high, room for improvement exists.

Methods: The Consolidated Framework for Implementation Research (CFIR) informed our process with the goal of reducing barriers to pathway acceptance. To increase physicians' confidence in the pathways, development was led by an expert medical oncologist known in the community. Ease of access was supported by hosting pathways on a newly developed Pathwaytocure.org website along with expert-developed, NCCN guideline supported, educational webinars. Transparency was increased by seeking input on draft pathways from the multidisciplinary oncology teams at the Fred & Pamela Buffett Cancer Center and collaborating rural cancer centers using surveys measuring pathways' logic and feasibility, representation of evidence-based care, multidisciplinary approach, variability for patient preferences, promotion of patient-provider communication and shared decision-making. Stakeholders were also involved by engaging “champion” physicians at the rural centers to encourage pathway use. Evaluation at six months post-implementation will determine whether pathways meet providers' and patients' needs and assess NCCN guideline adherence.

Results: Six pathways based on ER, PR, and HER2 status were developed to map pre-treatment assessments, consultations, considerations, neoadjuvant and adjuvant therapy and survivorship care. Oncology provider survey return rate was 33%. Results indicated satisfaction but changes needed to pathway design and content. Modified pathways were implemented in September 2019. Website analytics and pathway outcomes will be reported.

Conclusion: Stakeholder input is essential to identify clinical pathway modifications necessary to support physician acceptance, satisfaction, and use.

Clinical Pathways and Website Development
• A series of clinical pathways focused on young women with breast cancer were developed with input from a multidisciplinary team.
• Pathways were reviewed by participating champion physicians.
• To date, NINE educational webinars have been developed (Genetics, Survivorship, Endocrine Therapy, Radiation Oncology, Reproductive Wellness, Decision Making, Lymphedema, Distress Reduction, and Fitness) and are hosted on the website.
• In addition to clinical pathways and educational content, website users can obtain continuing education credits through webinar participation.

Reviewed Clinical Pathways
• Adjuvant Chemotherapy ER/PR (+) HER 2 (-)
• Neoadjuvant Chemotherapy ER/PR (+) HER 2 (-)
• Adjuvant Chemotherapy HER 2 (+)
• Neoadjuvant Chemotherapy HER 2 (+)
• Adjuvant TNBC
• Neoadjuvant TNBC

Feedback on Pathways
Editorial
• Duplicate testing listed

Treatment-Related
• Appointment regimen not evidence-based in neoadjuvant
• Sentinel node biopsy recommendation with port
• More emphasis on lymphedema care
• Opioids management
• Neuropathy management

Content-Related
• Dental consult for non-metastatic disease
• Feasibility of genetics, plastic surgery, chronic disease management, and fertility

Lead Cancer Centers
Fred & Pamela Buffett Cancer Center, Omaha NE
Nebraska Medicine Cancer Centers Bellevue and Village Pointe

Collaborating Cancer Centers
CHI Health St. Francis Medical Center, Grand Island, NE
Great Plains Health Callahan Cancer Center, North Platte, NE

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