Spanning three states in the Mid-South United States, Baptist Cancer Center brings to life its mission of treating patients close to home. The cancer center is part of Baptist Memorial Health Care, a regional healthcare system that consists of 23 locations across Tennessee, Arkansas, and Mississippi, with its largest cancer center in Memphis. Physicians and staff at Baptist Cancer Center provide high-quality care in both rural and urban locations by prioritizing standardization across its network and establishing access to care for patients in need. The Baptist Cancer Center network is accredited by the National Accreditation Program for Breast Centers and the Commission on Cancer. Its network is also certified by the American Society of Clinical Oncology’s Quality Oncology Practice Initiative.

### Multi-State Care

Baptist Cancer Center has 17 cancer treating clinics and sees approximately 7000 new patients annually. “Our catchment area covers most of the counties in Mississippi, a large portion of western Tennessee, and eastern Arkansas,” explains Nick Faris, director of thoracic oncology at Baptist Cancer Center. “The Delta Regional Authority, which is a congressionally mandated area of great socioeconomic disparities, almost completely overlaps with our catchment area for our patient population.” The Delta Regional Authority is a federal-state partnership dedicated to improving the quality of life of those living in the Mississippi Delta. This wide footprint poses unique challenges to the healthcare system, such as staffing and treatment standardization.

“While our hub is in Memphis, our other sites are located where patients needed us the most—close to home,” explains Jon Linn, director of marketing at Baptist Cancer Center. Each clinic is operated by the hospital with which it is associated, and its clinical and non-clinical staff are employed by that hospital—all clinicians are employed by the Baptist Medical Group, which falls under the umbrella of Baptist Memorial Health Care. Oncology clinicians typically provide care at two or more Baptist Cancer Center locations, and non-clinical staff are permanent to their location.

Since its expansion across the Mid-South, leadership at Baptist Cancer Center has prioritized the standardization of its policies, procedures, processes, initiatives, and projects. Therefore, patients receive the same high-quality care no matter where they are treated. The health system is able to help ensure this standardization through its system directors committee, which meets monthly to make decisions that impact the network.

### Staffing and Services

Each Baptist Cancer Center location is composed of a clinic and an infusion area. Patients are greeted and checked in at the front desk upon their arrival. Due to COVID-19, everyone on site is screened, new patients are tested before starting treatment, and everyone must wear personal protective equipment. In the clinic, patients have their lab work done, vital signs taken, and assays recalculated and see their physician. The clinic area is staffed by advanced practice providers, medical assistants, nurses, laboratory staff, and customer service representatives.

Registered nurses and pharmacy staff provide services in the infusion suite. Infusion nurses must go through a rigorous orientation program, and within a year of working with the cancer center, they are required to take the Oncology Nursing Society chemotherapy-immunotherapy provider course to become an oncology certified nurse. Each clinic location has an infusion-dedicated pharmacy that is staffed by a pharmacist and one or two pharmacy techs, depending on the location’s size. The pharmacy staff mix and compound infusion drugs on site for nurses to administer, and the Baptist Specialty Pharmacy dispenses oral prescriptions.

The infusion suites of each Baptist Cancer Center location are set up in a similar manner. Infusion chairs encircle the perimeter of the infusion area and are separated by half-walls or curtains. A nursing
station sits at the center, so all nurses have access to and a direct view of each chair. Its Memphis location has 14 chairs, and its smallest location has 8 chairs.

Baptist Cancer Center also provides surgical oncology, hematology, and radiation oncology treatments at its clinics. Through its network of clinics, Baptist Cancer Center offers a full range of high-tech radiation equipment, including a CyberKnife accelerator, linear accelerators, computed tomography and 4D simulators, and a high dose rate brachytherapy unit. If radiation services are not available at a smaller location, patients are referred to the closest radiation center to receive treatment.

The cancer center has also recently implemented intraoperative radiation therapy for patients with breast cancer, which has reduced the long-term toxicities of radiation in patients. It employs gynecology oncologists who are also surgeons, breast surgeons, a colorectal surgeon, a pancreatic surgeon, a lung surgeon, a melanoma specialist, and a sarcoma specialist to provide patients specialized care. For now, patients must travel to Memphis or a larger hospital-affiliated location within Baptist Memorial Health Care to receive surgical oncology services and these specialty provider visits. Plans are in place to regionalize surgical oncology services throughout the health system.

A Multidisciplinary Approach
Baptist Cancer Center sees high rates of lung, breast, gastrointestinal, and colon cancers. The high rate of lung cancer can be linked to the health system’s central location in the Mississippi Delta region, explains Faris. Due to this need for lung cancer care, the cancer center has developed a robust thoracic program to promote early screening in local communities and provide multidisciplinary care.

As with its other screening programs, the thoracic clinic is focused on early detection using two screening programs—an incidental pulmonary nodule program and a low-dose computed tomography screening program. If a patient is identified as high-risk through one of these programs or is referred by a physician, his or her case is discussed in a multidisciplinary thoracic oncology conference, which includes medical oncology, thoracic oncology, surgical oncology, cardiovascular, radiation oncology, genetics, pathology, and advanced practice providers. This conference—as well as ones dedicated to gastrointestinal, breast, head and neck, and brain and spine cancers—is held weekly in the Memphis location where patient treatments are discussed. Once patient cases are reviewed and discussed in the thoracic conference, they are referred to the cancer center’s thoracic oncology clinic, where patients see multiple providers at once to determine their treatment plan. With this format, physicians and staff can establish care coordination and treatment plans before patients return to their communities to receive care.

To better meet the needs of its diverse patient population, Baptist Cancer Center expanded its nurse navigator program. Nurse navigators screen all patients via an intake tool before their first visit and refer them to the appropriate supportive care resources based on specific needs or requests. Support services include genetic screening and counseling, nutrition, social work, financial counseling, inpatient and outpatient rehabilitation services, and clinical trials. These services are available at each Baptist Cancer Center location, provided by the hospital with which the clinic location is affiliated, and free to all patients, who can also self-refer to services. “The nurse navigator program has been instrumental in helping us get patients to treatment and have better outcomes,” explains Tori McCurdy, director of oncology nursing at Baptist Cancer Center. Because Baptist Cancer Center provides supportive care through affiliated hospitals, patients do not have to travel to receive these services.

Access to Clinic Trials
Baptist Cancer Center strives to provide its patients the most current and ground-breaking treatment across its clinic locations. Clinical research coordinators, procurement specialists, pharmacy staff, and administration staff make up its large clinical trial department. These coordinators have oversight of all rural clinics and can see patient data to help determine which patients qualify for which clinical trial. All patients are screened for clinical trial participation and can participate wherever they are receiving treatment. Patients are also referred to a coordinator via the screening intake tool provided by a nurse navigator.

Through the cancer center’s partnership with the National Cancer Institute, Baptist Cancer Center receives research study grants that enable it to conduct an array of cooperative group trials and partners with industry to provide sponsored trials. “I think the one area we really shine, maybe potentially over our competition, is that we do provide rural-based care. Patients are not a number here. It’s very personal,” says McCurdy.