Use of the Delphi method to develop a guideline-based geriatric oncology gap assessment

Abstract 347579

Elana Plotkin, William Dale, Kah Poh Loh, Efrat Dotan, Peggy Burhenn, Carolyn J Presley, Ginah Nightingale, Randall A. Oyer, Pamela Ginex, Meghan Sri Karuturi, Stuart M. Lichtman, Leigh Boehmer

ACCC Geriatric Oncology Advisory Committee; Association of Community Cancer Centers, Rockville, MD; City of Hope National Medical Center, Duarte, CA; University of Rochester Medical Center, Rochester, NY; Fox Chase Cancer Center, Philadelphia, PA; City of Hope, Duarte, CA; The Ohio State University, Columbus, OH; Thomas Jefferson University, Jefferson College of Pharmacy, Philadelphia, PA; Ann B. Barshinger Cancer Institute, Penn Medicine at Lancaster General Health, Lancaster, PA; Oncology Nursing Society, Pittsburgh, PA; The University of Texas MD Anderson Cancer Center, Houston, TX; Memorial Sloan Kettering Cancer Center, New York, NY

BACKGROUND

Older adults are more likely to be diagnosed with cancer than their younger counterparts. Because the underlying health status of older adults with cancer is generally heterogeneous, geriatric assessments (GAs) are helpful for uncovering age-related vulnerabilities and guiding subsequent care planning. GAs provide multidimensional, multidisciplinary evaluations of pertinent health domains. When used to evaluate an older adult with cancer prior to initiating therapy, GAs and screening tools can help oncologists differentiate between fit and frail patients and tailor their treatment accordingly.

METHODS

The Association of Community Cancer Centers (ACCC) conducted a 4-round Delphi method to achieve expert consensus (≥75%) related to 9 domains of geriatric oncology care from a multidisciplinary perspective (see Fig. 1). A survey was conducted with 70 international clinicians working in geriatric oncology to assess perspectives on guideline-recommended GA tools in clinical practice (See Fig. 2). Facilitator led focus groups were conducted to review the results in a large group format and come to consensus. Aggregated results were shared back with the group to ensure effective capture of group discussion regarding validated clinical practice tools to include as resources in the gap assessment instrument.

Figure 1: Geriatric Oncology Gap Assessment Tool Domains

Functional Status	**Psychological Health**
Cognition	**Nutrition**
Comorbidities	**Patient Goals and Needs**
Pharmacy/Medication Management	**Communication and Workforce Training**
Decision Making: Screening, Life Expectancy, and Chemo Toxicity	

CONCLUSION

- The ACCC Geriatric Oncology Gap Assessment offers cancer programs a validated way to evaluate care delivery for older adults with cancer.
- To optimize workflow, cancer programs should consider utilizing gap assessment results to develop and advance scalable quality improvement programs at their institution, taking into consideration resource level and infrastructure.

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Author Contact Information:

Elana Plotkin, CMP-HC
Assistant Director, Provider Education
1801 Research Blvd., Suite 400
Rockville, MD 20850
EPlotkin@accc-cancer.org
accc-cancer.org

Figure 2: Example of First Round Delphi Voting on Functional Status Category

FUNCTIONAL STATUS (BASELINE ASSESSMENT): Rate the ability of this tool or strategy to assess the domain.

Question	Poor		Basic		Good		Best		Total
ADLs	2.13%	1	17.02%	8	**55.32%**	**26**	25.53%	12	47
IADLS	2.13%	1	4.26%	2	**51.06%**	**24**	**42.55%**	**20**	47
MOS Physical Functioning	13.16%	5	7.89%	3	**65.79%**	**25**	13.16%	5	38
ECOG	21.74%	10	**56.52%**	**26**	13.04%	6	8.70%	4	46
Karnofsky	21.28%	10	**53.19%**	**25**	19.15%	9	6.38%	3	47

FUNCTIONAL STATUS (OBJECTIVE PHYSICAL PERFORMANCE): Rate the ability of this tool or strategy to assess the domain.

Question	Poor		Basic		Good		Best		Total
TUG	0.00%	0	9.09%	4	**68.18%**	**30**	22.73%	10	44
Gait speed	0.00%	0	13.04%	6	**58.70%**	**27**	28.26%	13	46
Short Physical Performance Battery	2.22%	1	2.22%	1	**53.33%**	**24**	**42.22%**	**19**	45
Hand grip test	4.26%	2	17.02%	8	**65.96%**	**31**	12.77%	6	47

RESULTS

A 32-question geriatric oncology gap assessment was developed in an online survey platform. This tool was beta tested by 30 individuals at cancer programs of various types and regions across the US. A final version was published and made accessible for multidisciplinary teams to self-assess care delivery for older adults with cancer in 9 domains: Functional Status; Cognition; Comorbidities; Decision Making: Screening, Life Expectancy, Chemo Toxicity; Pharmacy/Medication Management; Psychological Health; Nutrition; Patient Goals and Needs; and Communication and Workforce Training. Within each domain, respondents select the level (see Figure 3) that most closely represents the practice(s) at their institution. A personalized report is generated and emailed to the respondent.

Figure 3: Gap Assessment Sample Question

How does your program assess cognitive function?
Level 1: Not sure/not performing
Level 2: Ask simple questions of the patient or caregiver during the interview (e.g., How is your memory? Has your loved one experienced any memory issues or appeared to be confused?)
Level 3: Perform a validated screening tool that includes one of the following: Mini-Cog, clock drawing test, 3-item recall
Level 4: Perform one of the following validated screening tools: BOMC, MOCA, or MMSE