



JOHNS HOPKINS
MEDICINE

An Actionable Framework to Support Equitable and Comprehensive Care

4R Oncology®



Julia Trosman, PhD, MBA

Director, Center for Business Models in Healthcare

Assistant Adjunct Professor, Northwestern University Feinberg School of Medicine and University of California, San Francisco



Al Benson, III, MD, FACP, FACCC, FASCO

Professor of Medicine, Robert H. Lurie Comprehensive Cancer Center at Northwestern Medicine



Josephine Louella Feliciano, MD

Medical Director, Thoracic Oncology Program; Co-director of the Outpatient Oncology Clinic, Johns Hopkins Bayview Medical Center

Presenters

Julia Trosman, PhD, MBA

Director, *Center for Business Models in Healthcare*

Assistant Adjunct Professor, *Northwestern University Feinberg School of Medicine*

Assistant Adjunct Professor, *University of California, San Francisco*

Al B. Benson, III, MD, FACP, FACCC, FASCO

Professor of Medicine

Associate Director for Cooperative Groups

Robert H. Lurie Comprehensive Cancer Center at Northwestern Medicine

Josephine Louella Feliciano, MD

Medical Director, Thoracic Oncology Program

Co-director of the Outpatient Oncology Clinic

Johns Hopkins Bayview Medical Center

Session Agenda

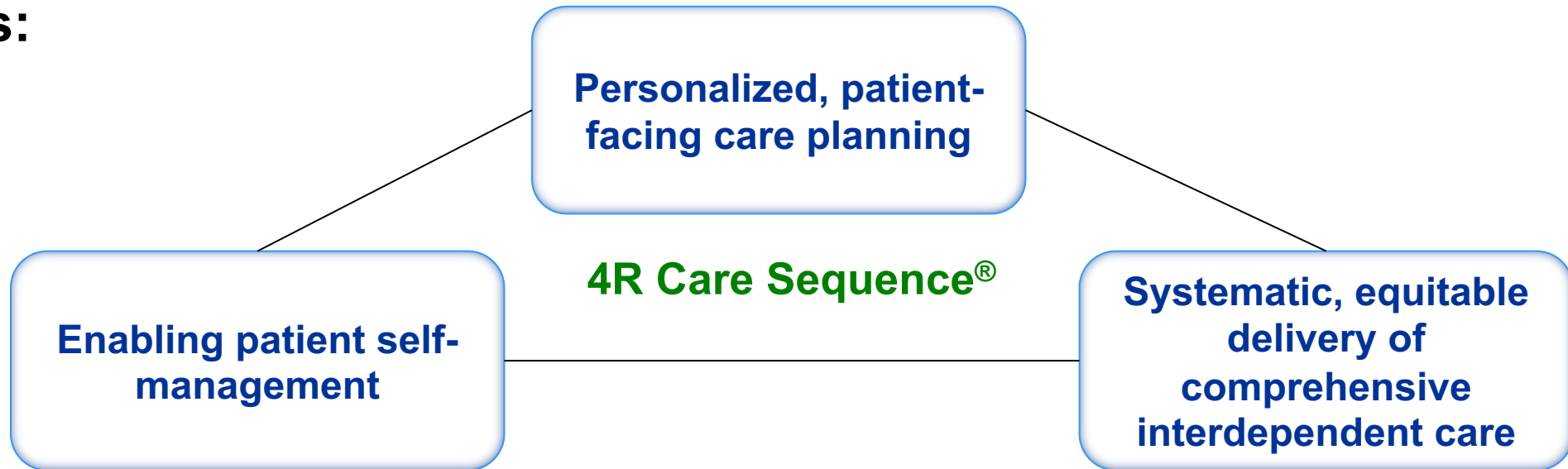
- Overview of the 4R Oncology[®] model:
 - Mission
 - Benefits to providers and care teams
 - Description and example
- The ACCC 4R Program and how to get involved
- Panel discussion:
 - Experience with 4R implementation
 - Approaches to integrating 4R into practice
 - Lessons learned and how to make it sustained

4R Oncology[®] and its goals

4R Oncology[®]:

- An approach and a set of tools and methods
- Used by patients / families and care team

4R goals:



4R Care Sequence[®]: guideline-based comprehensive personalized plan of action

4R Oncology® Mission

To expand 4R and its benefits to every patient diagnosed with cancer, in collaboration with cancer programs, organizations and advocacies

Already adopted at over 30 cancer centers, various settings: academic, community, VA, safety-net

4R the intellectual property of CBM-HC, but not a commercial product or service

The 4R tools are available to ACCC members via the 4R Oncology ACCC program at no cost

Demonstrated 4R benefits to patients

- Improves patient understanding of care, participation in care
- Increases ability to manage and organize their care
- Improves patients' awareness of timing and order / sequence of care
- Enhances sense of control, reduces feeling of being overwhelmed
- Increases patient satisfaction with providers
- 80% of surveyed patients found Care Sequences very useful or useful

1. Trosman, et al. Evaluation of the Novel 4R Oncology Care Planning Model in Breast Cancer: Impact on Patient Self-Management and Care Delivery in Safety-Net and Non-Safety-Net Centers. *JCO Oncol Pract*, 2021
2. Weldon, et al, Intervention to improve patient self-management and satisfaction in breast and lung cancers using the 4R Oncology model: Results by cancer, race and deprivation index. *JCO Oncol Pract* 19, 2023 (suppl 11; abstr 326)

What people are saying about benefit to patients



What people are saying about benefit to patients



Liliana Mendoza

Demonstrated 4R benefits to providers

- Increases effectiveness of comprehensive care delivery, coordination
- Improves quality of care, adherence to guidelines
- Optimizes timing and order / sequence of care
- Can be used for accreditation (CoC, NAPBC, EOM)
- Supports care coordination billing codes
- Improves clinician workload by:
 - Optimizing care delivery at the “right” time and sequence
 - Informing and engaging patients in their care

1. Trosman, et al. Evaluation of the Novel 4R Oncology Care Planning Model in Breast Cancer: Impact on Patient Self-Management and Care Delivery in Safety-Net and Non-Safety-Net Centers. *JCO Oncol Pract*, 2021

2. Liu, et al. Fostering a high-functioning team in cancer care using the 4R Oncology model: assessment in a large health system and a blueprint for other institutions. *JCO Oncol Pract*. Sept 2022.

3. Trosman et al. Does the 4R oncology model improve clinicians' effectiveness in patient-facing planning of complex cancer care? *J Clin Oncol* 40, 2022 (suppl 16; abstr 1542)

What people are saying about benefits to providers



How 4R facilitates equitable care

Health equity: “Everyone has a fair and just opportunity to attain their highest level of health.¹ There is no quality without equity, and no equity without quality²”

4R supports equitable care by enabling:

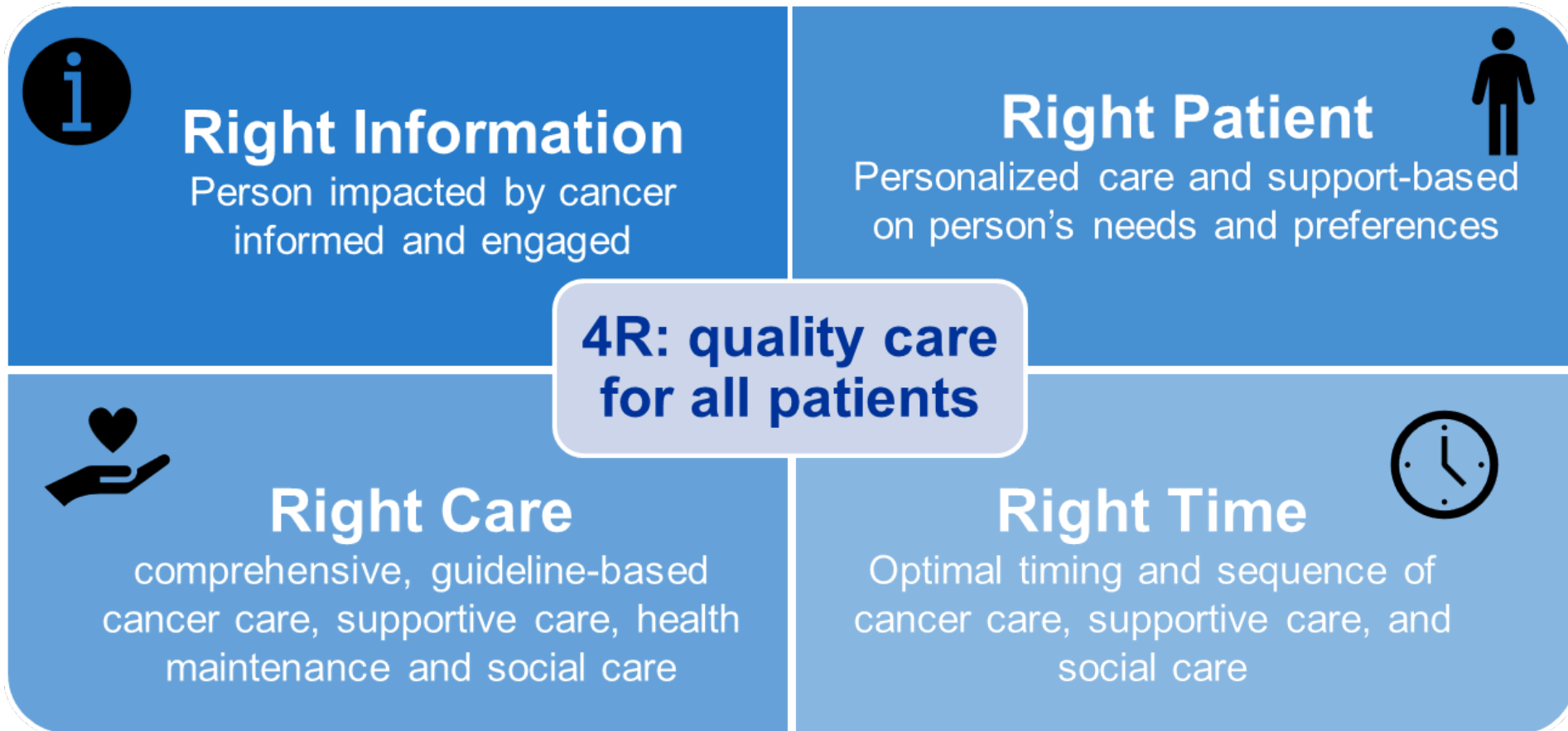
- Consistent quality of care, based on comprehensive care guidelines
- Personalized social support and health maintenance to mitigate relevant SDOH
- Patient engagement & self-management – necessary for optimal care, addressing disparities

1. Centers for Disease Control and Prevention. Health Equity in Cancer. <https://www.cdc.gov/cancer/health-equity/equity.htm>

2. Dzau VJ, et al. Equity and Quality-Improving Health Care Delivery Requires Both. JAMA. 2022 Feb 8;327(6):519-520. doi: 10.1001

3. Kamal AH, et al. Addressing Issues of Cancer Disparities, Equity, and Inclusion Through Systemized Quality Improvement. JCO Oncol Pract. 2021 Aug;17(8):461-462

How 4R facilitates equitable care



What people are saying about 4R and equitable care



Mary M. Pasquinelli, DNP, FNP-BC, CTTS

Lead Advanced Practice Nurse, Pulmonary and Medical Oncology

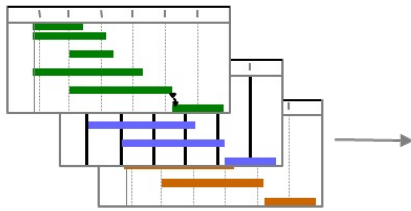
Adjunct Clinical Instructor – UIC College of Nursing

University of Illinois Chicago

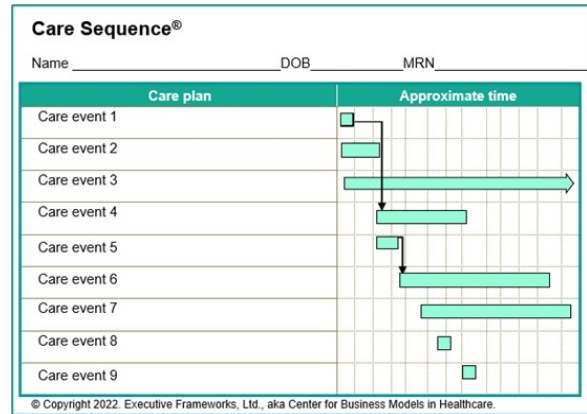
Department of Medicine

The 4R Oncology[®] Framework

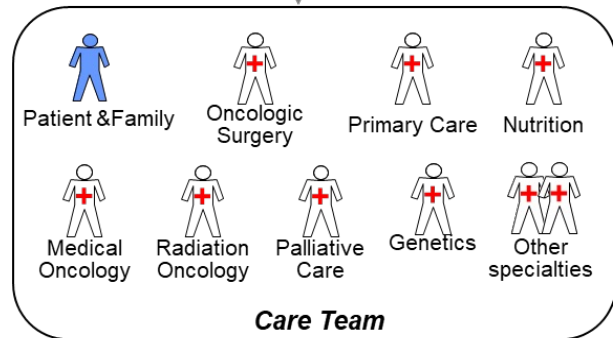
Guideline-based 4R Care Sequence[®] templates



4R Care Sequence[®]



Used by Patient / Caregiver and Care Team



- Patient receives Care Sequence[®] at diagnosis; transitions between treatments
- Care Sequence[®] integrates cancer care, supportive care and social support
- 4R includes other tools: contacts, resources, patient self-management
- 4R includes methods to optimize care to enable delivery according to Care Sequence[®]

Example of a Care Sequence®

- Pre-printed templates, 1 page, in color
- Front page = care plan, personalized
- Back page = Contact & Resources
- Can be given in person or by telehealth
- Can be available in English, Spanish and several other languages

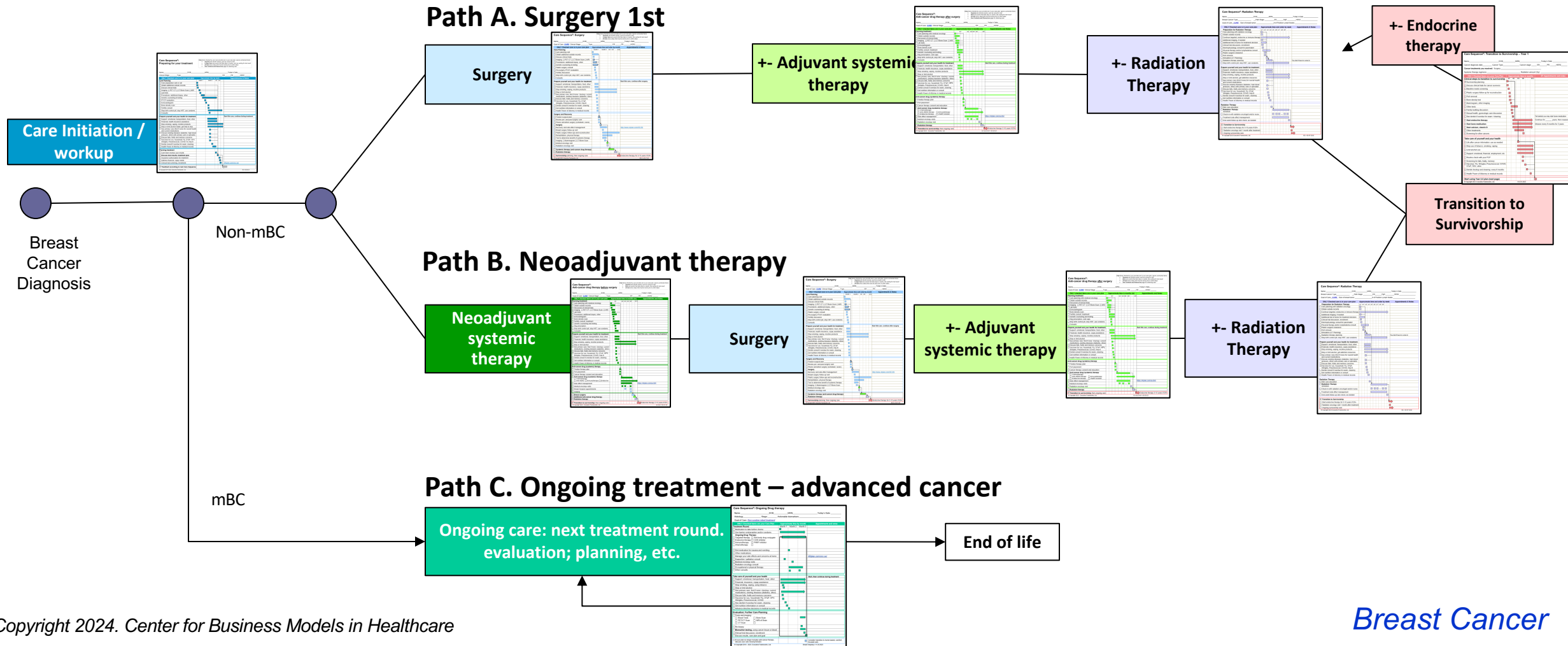
Care Sequence®:
Cancer drug therapy before surgery

Name _____ DOB _____ MRN _____ Today's Date _____
 Goal of Care: **CURE** Clinical Stage _____ Grade _____ Type _____ ER _____ PR _____ HER2 _____

ONLY checked items are in your care plan	Approximate time in months (m)	Appointments and Notes
Planning treatment		
<input type="checkbox"/> Care planning with medical oncology	m1	
<input type="checkbox"/> Obtain outside records	m1	
<input type="checkbox"/> Imaging: <input type="checkbox"/> PET-CT <input type="checkbox"/> CT/Bone Scan <input type="checkbox"/> MRI	m1	
<input type="checkbox"/> Lab tests:	m1	
<input type="checkbox"/> Procedures: additional biopsy, other	m1	
<input type="checkbox"/> Echocardiogram	m1	
<input type="checkbox"/> Bone density scan	m1	
<input type="checkbox"/> Discussion of clinical trials	m1	
<input type="checkbox"/> Fertility consult, treatment	m1	
<input type="checkbox"/> Genetic counseling and testing	m1	
<input type="checkbox"/> Wig prescription, inquire about cold caps	m1	
<input type="checkbox"/> Stop birth control pill, stop HRT, use condoms	m1	
<input type="checkbox"/> Consults:	m1	
Prepare yourself and your health for treatment		
<input type="checkbox"/> Support: emotional, transportation, food, other	m1	Start, then continue during treatment
<input type="checkbox"/> Financial, health insurance, copay assistance	m1	
<input type="checkbox"/> Stop smoking, vaping, using tobacco	m1	
<input type="checkbox"/> Stop or limit alcohol	m1	
<input type="checkbox"/> See primary care, find if none: checkup, current medications, existing diseases (diabetes, other)	m1	
<input type="checkbox"/> Discuss falls, frailty, and memory concerns	m1	
<input type="checkbox"/> Vaccines for you, household: Flu, DTaP, HPV, Shingles, Pneumococcal, COVID	m1	
<input type="checkbox"/> See a dentist if overdue for an exam, cleaning	m1	
<input type="checkbox"/> Get nutrition information or consult	m1	
<input type="checkbox"/> Health Power of Attorney in medical records	m1	
Cancer drug (systemic) therapy		
<input type="checkbox"/> Finalize therapy plan	m1	Insurance authorization as needed
<input type="checkbox"/> Port placement	m1	
<input type="checkbox"/> Cancer therapy consent and education	m1	
Cancer drug (systemic) therapy		
<input type="checkbox"/> Chemotherapy <input type="checkbox"/> Immunotherapy	m1	
<input type="checkbox"/> Anti-HER2 <input type="checkbox"/> Endocrine	m1	
<input type="checkbox"/> Side effect management:	m1	
<input type="checkbox"/> Medical oncology visits	m1	
<input type="checkbox"/> Breast Surgeon appointments	m1	
<input type="checkbox"/> Imaging	m1	
Breast surgery		
<input type="checkbox"/> Additional anti-cancer drug therapy	m1	
<input type="checkbox"/> Radiation therapy	m1	
<input checked="" type="checkbox"/> Transition to survivorship: then ongoing care	m1	Endocrine therapy 5-10 years if ER+

more info: <https://caresequence.net/breast-neo/> BC-NEO v 11.30.23

When different Care Sequences[®] are provided



Who can provide a Care Sequence[®] to patients

- 4R works within existing resources and clinic workflows
- Care Sequences[®] can be provided by physicians, nurse navigators, other advance practice providers, or community health workers
- In person / in the clinic or via telehealth (electronic templates are available)
- Can be adopted by a single practice or rolled out throughout cancer program or health system



Raymond Liu, MD

Medical Director, Kaiser Permanente San Francisco Cancer Center

Director of Research, Hematology-Oncology Service Line

Co-Chair, ASCO Survivorship Task Force

Assistant Clinical Professor, Kaiser Permanente Bernard J. Tyson School of Medicine

Assistant Clinical Professor, UCSF

ACCC 4R Program

- Care Sequences and other 4R tools available to members at no cost
- Available now for Breast cancer
 - Templates: Neoadjuvant therapy, Surgery, Adjuvant therapy, Radiation, Metastatic treatment
- Coming soon: Lung, Head & Neck, other cancers, pan-cancer for solid tumors, heme malignancies
- Available in Spanish
- Program includes initial implementation support, ongoing access to 4R experts and other participating centers

How to get involved

- Contact us directly: 4rplan.com/info
- We will schedule a short call to determine which templates and tools you need; provide initial advice how to use
- We will be available for questions; will advise how to address challenges
- We will ask for feedback and ideas for our 4R Learning system

To learn more, go to 4roncology.com

Panel discussion





Al Benson, III, MD, FACP, FACCC, FASCO

Professor of Medicine, Robert H. Lurie Comprehensive Cancer Center at Northwestern Medicine



Josephine Louella Feliciano, MD

Medical Director, Thoracic Oncology Program; Co-director of the Outpatient Oncology Clinic, Johns Hopkins Bayview Medical Center



Julia Trosman, PhD, MBA

Director, Center for Business Models in Healthcare

Assistant Adjunct Professor, Northwestern University Feinberg School of Medicine and University of California, San Francisco