



SITE VISIT 2

Harold C. Simmons Comprehensive Cancer Center

UT Southwestern Medical Center, Harold C. Simmons Comprehensive Cancer Center, Dallas, Texas, is located in an urban setting in a large metropolitan area. The cancer center is part of a large university-affiliated academic medical center with 460 beds where care was provided to 3,600 new cancer patients in 2014. Racial and ethnic minorities make up 33 percent of the cancer patient population (approximately 15 percent African American; 13 percent Hispanic; 4 percent Asian; 1 percent other). Simmons Cancer Center is a National Cancer Institute (NCI)-designated cancer center. The site visit involved a multidisciplinary team, including:

- The associate vice president for Cancer Programs
- The director of Ambulatory Oncology Operations
- The assistant director for Oncology Support Services
- The clinic manager for the Bone Marrow Transplantation/Hematologic Malignancy Clinic
- Nursing supervisors
- Oncology social workers
- A clinical dietitian
- Two IT specialists.

TOOLS & RESOURCES

The Simmons Cancer Center distress screening tool originated from the Edmonton Symptom Assessment Scale. Screening is verbally administered by a nurse as part of the nursing assessment. The five screening questions include: a nutritional assessment, followed by three independent ratings on a 0-10 scale (depression, anxiety, and spouse or family concerns) and then a question about whether the patient would like contact from a support services professional. Two Spanish-language interpreters are tasked specifically to the cancer center for office visits. There is also a medical assistant in the Bone Marrow Transplantation Program who is a certified Spanish-language interpreter. If needed, the medical teams use telephone interpretation services.

Simmons Cancer Center has a number of resources available for patients. A cancer psychologist and four full-time equivalent (FTE) social workers provide counseling support. Simmons Cancer Center has two outpatient dietitians who see all patients for pre-screening before they start chemotherapy. Additional resources include music therapy, physical



therapy, a palliative care team (physician, nurse practitioner, social worker), and financial counselors who connect with patients before their first visit to the cancer center. Simmons Cancer Center also offers a series of survivorship classes focused on exercise, mindfulness, and coping.

DISTRESS SCREENING PROGRAM

Simmons Cancer Center established its distress screening program in 2011 after the associate vice president for Cancer Programs hired a psychologist to develop this type of program for the cancer center. (The psychologist had developed a distress screening program at the cancer center where he previously worked.)

Distress screening is done at every office visit by nurses in Medical Oncology and Surgical Oncology in the clinic room or by nurses in the chemotherapy infusion center. Patients are first asked about nutritional changes and then asked to make the three verbal ratings (depression, anxiety, and spouse or family concern) on a 0-10 rating scale. Patients are also asked whether they want to be contacted by the oncology dietitian, cancer psychologist, cancer social worker, or a medical center chaplain. The responses are immediately entered into the EHR, which is shared by Medical Oncology and Surgical Oncology. An indication of nutritional changes and/or a score of 8 or above on any of the 3 rating scales is considered a positive screen and triggers an electronic alert through the EHR to the relevant resource. Dietary issues alerts to the dietitian, anxiety or depression alerts to the psychologist, and spouse or family concerns alerts to social work. When a provider follows up to an alert, a note is entered into the EHR. Patients are also referred if they indicate interest in being contacted by one of the listed providers.

Patients are educated about distress screening by the nurses in the clinic setting, with efforts to normalize both the experience of distress, as well as referral to cancer center resources. Staff is educated about distress screening through in-services provided by the cancer psychologist.

PROGRAM SUCCESSES

Simmons Cancer Center's initial screening program, which was implemented in 2011, relied on a paper-and-pencil tool. This process generated some challenges in terms of tracking the paper screening tool and timely alerting of relevant staff to a positive screen. The site implemented the electronic screening protocol (described above) in 2015. There have been 2,512 to 2,843 screenings per month with the new system, with 8 to 11 percent of screens being positive. Simmons Cancer Center has identified three current and future initiatives:

1. To research the impact of distress screening on medical utilization.
2. To grow the education and training mission for Oncology Support Services. Simmons Cancer Center thinks that bringing in trainees may help to extend their clinical capabilities.
3. To change to a validated standardized screening tool, but Simmons Cancer Center acknowledged that this is unlikely to happen.