Combining Psychology, Rehabilitation and Palliative Care into a Multi-Specialty Clinic

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Background
- Multiple outpatient supportive care services at academic cancer center
- Cross-over of some patients allows for increased collaboration
- Program development
  - Psychology – Mature
  - Palliative Care – Mature
  - Onco-Rehab – Establishing
- Dreaming and planning since 2018
- Clinic space extremely valuable
- Leadership solicited innovation
- COVID unlocked telehealth upgrade

Concurrent outpatient evaluation with three supportive care specialists utilizing telehealth and pre-visit surveys increases access to patients early in their cancer illness.

Patient Flow
- Oncology
- Psych & PC
  - Survey – REDCap
  - EHR – EPIC
  - Telehealth – Zoom (EHR Integration)
- Worked with billing on multiple visits billed
- Avoid time-based billing since sharing time
- Pilot phase Aug 2020-Nov 2020
- Sustainability phase starts April 2021
- Patients new to each service
- Early in their disease course

Findings & Limitations
- Screening important to find needs in 2 of 3 area
- Pre-visit surveys extremely helpful, low burden
- Seeing younger patients, within 8 weeks of dx
- Learning from direct observation of each other
- Visits are intense, patients fatigue towards end
- Positive informal feedback
- Clinic is currently during admin time, limits growth
- Limited numbers so far – 6 total patients

Future Directions
- Moving clinic from admin to regular clinic hours
- Involve other clinicians from our divisions
- Strong leadership support, potential philanthropy
- Add longitudinal survey, research component
- Include more oncologists slowly to handle volume
- Involve trainees, other disciplines (SW, dietician)