Lung Cancer Patient Support ECHO Clinic: Helping You Provide The Best Care For Your Patients
## Agenda: ECHO Orientation Session

### 5/31/2018 (9:00-10:30 am ET)

<table>
<thead>
<tr>
<th>Topic</th>
<th>Lead</th>
<th>Time</th>
</tr>
</thead>
<tbody>
<tr>
<td>Check ZOOM connections</td>
<td>Dawn Wiatrek/IT support</td>
<td>10 minutes (9:00-9:10)</td>
</tr>
<tr>
<td>Introductions</td>
<td>Kevin Oeffinger, M.D. ECHO Lead Facilitator</td>
<td>20 minutes (9:10-9:30)</td>
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<tr>
<td>Ground Rules</td>
<td>Kevin Oeffinger, M.D.</td>
<td>5 minutes (9:30-9:35)</td>
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<tr>
<td>Anatomy of an ECHO/Today’s agenda</td>
<td>Dawn Wiatrek, Ph.D.</td>
<td>5 minutes (9:35-9:40)</td>
</tr>
<tr>
<td>“Didactic Presentation”: Overview of the ECHO Model and the Lung Cancer Patient Support ECHO</td>
<td>Kevin Oeffinger, M.D.</td>
<td>20 minutes (9:40-10:00)</td>
</tr>
<tr>
<td>Q &amp; A on Mock Didactic</td>
<td>Group</td>
<td>5 minutes (10:00-10:05)</td>
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<tr>
<td>Case Presentation Template Review</td>
<td>Dawn Wiatrek</td>
<td>10 minutes (10:05-10:15)</td>
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<tr>
<td>Q &amp; A on case presentation</td>
<td>Group</td>
<td>10 minutes (10:15-10:25)</td>
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<tr>
<td>Closing and preparation for next meeting</td>
<td>Kevin Oeffinger</td>
<td>5 minutes (10:25-10:30)</td>
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</table>
Introductions

• Facilitators
  ○ Name, Employer/Org/Facility, Expertise and related background
  ○ Include topics you will be addressing if also a SME

• Subject Matter Experts
  ○ Name, Employer/Org/Facility, Expertise and related background
  ○ Include topics you will be addressing

• ECHO Support Team

• Spoke sites:
  ○ What are your team’s biggest challenges in lung cancer patient support?
  ○ What do you hope to learn during the ECHO or what areas are you most interested in?
This ECHO clinic will not be successful without your participation. In order to ensure a great experience for everyone, please keep the following in mind:

- Mute microphone when not speaking (avoid extraneous noises such as eating, paper rustling, outside conversations)
- Position webcam effectively
- Test both audio & video
- Communicate clearly during clinic
- Use chat function/hand raise function in ZOOM
- Facilitator will call on participants who have a “raised hand” or chat comment

**Note:** Sessions will be recorded
Anatomy of An ECHO

One of the things that differentiates ECHO from other training and telehealth platforms is the use of **case based learning**.....

- Introductions of Hub and Spoke participants
- Brief 15-20 minutes didactic presentation by SME
- Brief Q & A
- Case presentation by 1-2 spoke sites including challenges, questions etc. (standard form and directions provided)
- Facilitated discussion between all sites and SMEs (will be given case information prior to session)
Didactic Presentation
Overview of the ECHO Model and The Lung Cancer Patient Support ECHO Clinic
The Lung Cancer Patient Support ECHO is part of a larger, multi-phase grant funded by the Bristol Meyers Squibb Foundation:

- Designed to improve lung cancer patient care from diagnosis through post-treatment transition and end of life support
- Focused on patient education and navigation in 8 target states including Alabama, Georgia, Mississippi, Tennessee, Kentucky, North Carolina, and South Carolina
- Ensure that patients have access to consistent high quality care by training:
  - Patient navigators
  - Cancer Information Specialists
  - Cancer Care/Health Care teams (medical neighborhood)
- The Lung Cancer Patient Support ECHO focuses primarily on cancer care/health care teams
What is the ACS Lung Cancer Patient Support ECHO?

- A monthly, 12 session series (1.5 hours each) of ECHO “clinics”, hosted by experts in lung cancer care, each focusing on different topics unique to lung cancer survivors

- Goal: Increase the quality of care provided by cancer care teams at participating cancer centers to lung cancer patients across the care continuum

- Designed to ensure that the entire cancer care/health care team in target communities is trained on the latest information related to:
  - lung cancer screening (guidelines including tobacco cessation and shared decision making components)
  - diagnosis/treatment (including new and emerging treatments, shared decision making and clinical trials)
  - care coordination (including virtual tumor boards)
  - symptom/comorbidity management (frailty)
  - rehabilitation
  - long term survivorship planning
  - hospice/end of life support.
Learning Objectives

Upon completing the Lung Cancer Patient Support ECHO Clinic participants will report:

- Increased knowledge on session topics
- Increased understanding of the importance of using care strategies/approaches addressed in sessions
- Increased confidence in delivering care strategies/approaches addressed in sessions
- Increased intention to implement care strategies/approaches addressed in sessions
What is ECHO?: A HUB & SPOKE Model

Hub includes:
- Facilitators (stay consistent across all sessions)
- Multidisciplinary team of SMEs (present for 10-15 minutes at one session and attend other sessions)
- IT POC

Spokes (Target) include (10-15):
- Multidisciplinary cancer care teams from community cancer centers (mid size: 500 cancer patients per year) in 8 target states
  - Recruited by ACS Hospital System Staff
- FQHCs that work directly with participating cancer centers

Not a traditional telemedicine model (provider to patient): Increases access to care by facilitating knowledge transfer between health care providers using case based learning.
<table>
<thead>
<tr>
<th>Topics</th>
<th>Date</th>
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<tbody>
<tr>
<td>Before Diagnosis: Lung cancer screening guidelines including criteria</td>
<td>Thursday, May 31, 2018</td>
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<td>and shared decision making</td>
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<tr>
<td>Before Diagnosis: Lung cancer screening and nodule management-diagnostic</td>
<td>Thursday, June 28, 2018</td>
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<td>follow up</td>
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<td>Tobacco treatment across the cancer care continuum</td>
<td>Thursday, July 26, 2018</td>
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<tr>
<td>Treatment planning: Overcoming lack of concordance with staging and</td>
<td>Thursday Aug. 30, 2018</td>
</tr>
<tr>
<td>management guidelines</td>
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<tr>
<td>Treatment: Disparities in receipt of curative-intent surgery for early</td>
<td>Thursday Sept. 27, 2018</td>
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<td>stage NSCLC</td>
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<tr>
<td>Treatment: Variability in access to and use of mutational testing for</td>
<td>Thursday Oct. 25, 2018</td>
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<tr>
<td>expression of immune markers and targeted therapy</td>
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<tr>
<td>Treatment: Lung Cancer Treatment-common and new/emerging treatments;</td>
<td>Thursday Nov. 29, 2018</td>
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<tr>
<td>supporting patients in shared decision making</td>
<td></td>
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<tr>
<td>Multidisciplinary teams; care coordination</td>
<td>Thursday December 27, 2018</td>
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<tr>
<td>Stigma/Psychosocial issues (including best practices in navigating</td>
<td>Thursday Jan. 31, 2019</td>
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<td>patients to overcome barriers to care</td>
<td></td>
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<tr>
<td>Managing side effects and symptoms (including managing common</td>
<td>Thursday Feb 28, 2019</td>
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<tr>
<td>comorbid conditions; frailty)</td>
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<tr>
<td>Preparing for post-treatment survivorship: Transitions to primary care,</td>
<td>Thursday March 28, 2019</td>
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<tr>
<td>survivorship care plans and/or treatment summaries</td>
<td></td>
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<tr>
<td>End of life/Hospice</td>
<td>Thursday April 25, 2019</td>
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The facilitation team is a diverse group of experts who will attend all ECHO sessions and assist in guiding the discussion, connecting ideas between sessions, and encouraging productive dialogue.

Lead facilitator: Kevin Oeffinger, MD, Duke Cancer Institute
Co-facilitator: Robert Smith, Ph.D., American Cancer Society
Co-facilitator: Samuel Kerr, MD, Oncologist, Lancaster Health
Co-facilitator: Thomas Asfeldt, RN, Sanford Health, ACCC Advisory Board
The project team is here to support you and your site in getting the most out of the ECHO experience. They coordinate sessions etc. and encourage you to share any questions, concerns, ideas etc. with them on a regular basis.

**Project Co-PI:** Katherine Sharpe, MTS, American Cancer Society

**Project Co-PI:** Dawn Wiatrek, Ph.D. American Cancer Society

**Project Manager:** Octavia Vogel, MPH

**Project Support:** Patrice Bowles, MBA American Cancer Society

**ACS IT Support:** Lorraine McCawley, American Cancer Society
## Subject Matter Experts (SMEs)

*Facilitators will also serve as SMEs*

<table>
<thead>
<tr>
<th>Name</th>
<th>Affiliation</th>
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<tbody>
<tr>
<td>Joelle Fathi, DNP, RN, ARNP</td>
<td>Washington State Nurses Association, University of Washington</td>
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<tr>
<td>Patricia Rivera, MD</td>
<td>UNC Chappell Hill</td>
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<tr>
<td>Robert Volk, Ph.D.</td>
<td>MD Andersen Cancer Center</td>
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<tr>
<td>Jamie Ostroff, Ph.D.</td>
<td>Memorial Sloan Kettering Cancer Center</td>
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<tr>
<td>Jennifer King, Ph.D.</td>
<td>Lung Cancer Alliance</td>
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<tr>
<td>Jamie Studts, Ph.D.</td>
<td>University of Kentucky College of Medicine/Markey Cancer Cntr</td>
</tr>
<tr>
<td>Doug Wood, M.D.</td>
<td>University of Washington</td>
</tr>
<tr>
<td>ACCC Pilot sites</td>
<td>Optimal Care Coordination for Lung Cancer Patients on Medicaid</td>
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<tr>
<td>Angela Criswell, M.A.</td>
<td>Lung Cancer Alliance</td>
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<tr>
<td>Tom Houston, M.D.</td>
<td>AAFP Representative to the American Cancer Society Lung Cancer Roundtable</td>
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<tr>
<td>Gerard Silvestri, M.D.</td>
<td>Medical University of South Carolina</td>
</tr>
<tr>
<td>David Spigel, M.D.</td>
<td>Sarah Cannon Health</td>
</tr>
<tr>
<td>Jim Jett, M.D.</td>
<td>National Jewish Health System</td>
</tr>
<tr>
<td>Peter Mazzone, M.D., MPH</td>
<td>Cleveland Clinic</td>
</tr>
<tr>
<td>Michael Stubblefield, M.D.</td>
<td>Rutgers University New Jersey</td>
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### Spoke Sites (Cancer Centers)

- Cancer Care teams participating in ECHO sessions (Share details about center)

<table>
<thead>
<tr>
<th>Cancer Center Name</th>
<th>City</th>
<th>State</th>
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<tbody>
<tr>
<td>Northeast Georgia Medical</td>
<td>Gainesville</td>
<td>GA</td>
</tr>
<tr>
<td>University of Mississippi Medical Center</td>
<td>Jackson</td>
<td>MS</td>
</tr>
<tr>
<td>St. Dominic's Cancer Center</td>
<td>Jackson</td>
<td>MS</td>
</tr>
<tr>
<td>Princeton</td>
<td>Birmingham</td>
<td>AL</td>
</tr>
<tr>
<td>Huntsville Hospital</td>
<td>Huntsville</td>
<td>AL</td>
</tr>
<tr>
<td>Scotland Health Care System</td>
<td>Laurinburg</td>
<td>NC</td>
</tr>
<tr>
<td>Grady: Georgia Cancer Center for Excellence</td>
<td>Atlanta</td>
<td>GA</td>
</tr>
<tr>
<td>Mission Hospital</td>
<td>Ashville</td>
<td>NC</td>
</tr>
<tr>
<td>Duke Cancer Network (May include multiple sites)</td>
<td>Durham</td>
<td>SC</td>
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</tbody>
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Benefits to Clinicians

- No cost CMEs and CEUs
- Professional interaction with colleagues with similar interest
  - Less isolation with improved recruitment and retention
- A mix of work and learning
- Access to specialty consultation with oncologists, pulmonologists, tobacco cessation experts, and survivorship experts

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“Spoke sites” will be asked to:

- Identify a team of health care providers to participate in the 12 ECHO sessions plus a “test ECHO session”
- Help identify and invite other health care systems or practices that make up your medical neighborhood
- Identify a primary contact at your site to assist in reviewing and assessing technology needs
- Identify a space/room for each ECHO session
- Ensure that all technology is ready and in working order for each ECHO session
- Ensure that your team prepares and presents a minimum of 2 case studies during the 12 sessions (following the directions provided and on the agreed upon dates)
- Ensure that your team participates fully in each ECHO session and completes any requested evaluation/survey documents as needed
IT Requirements

- The technology can include
  - individual using a laptop,
  - a hand-held mobile device,
  - a small room set-up for 1-2 people or,
  - a videoconferencing room to allow the participation of groups.

- Use a cloud-based, system called Zoom [http://zoom.us](http://zoom.us) which can be accessed free of charge for participation in ECHO.

- We recommend that spoke sites meet in a room with videoconferencing set up

- Spoke sites should connect to Zoom once they confirm participation to ensure that there are no issues with firewalls or required software updates (May 8).

- Funding is available to assist with IT needs if required by sites

- We will host a “Mock ECHO” in mid-May to pilot our connection across all sites
Additional Resources Available

Lung Cancer Patient Support
TeleECHO™ Clinic

Participant Welcome Guide

A multidisciplinary team of experts will be supporting the Lung Cancer Patient Support ECHO including the following facilitators:

- Kevin Offenberger, MD
  Director, Duke Center for Once-Primary Care Ovarian Cancer Institute

- Barbara J. Kaye, MD
  Oncologist
  Lombardi Comprehensive Cancer Center

- Katharine J. Johnson, RN, MS
  Director, Supportive Medical Oncology, Outpatient Cancer Research & Education Oncology
  Robert Smith, Ph.D.
  Vice President, Cancer Screening and Early Detection
  American Cancer Society

What is ECHO?

ECHO (Enhancing Capacity through E-learning) is a program designed to provide a virtual grand rounds setting for local healthcare providers to learn and apply new knowledge to improve patient care.

- During the ECHO sessions, cancer care teams (providers and their patients) will work closely with expert physicians to enhance patient care and improve patient outcomes.

- These case-based discussions will be supplemented by expert didactic presentations for the provider teams to improve content knowledge and share best practices.

- Cancer center coordinators are encouraged to invite other members of their medical neighborhood (PCPs, screening centers) to participate as well.

Clinic Schedule

- 1st Wed. of month
  - 1st hour: Orientation to the Lung Cancer Patient Support ECHO
  - 2nd hour: Lung Cancer Screening and Early Detection

- 2nd Wed. of month
  - 1st hour: Tobacco Cessation Across the Continuum
  - 2nd hour: Treatment Planning: Honoring the Impact of Imaging Timing and Management of Patient Preferences

- 3rd Wed. of month
  - 1st hour: Treatment: Special Topics in Adult Lung Cancer: Clinical Trials and Molecular Testing
  - 2nd hour: Treatment: Variability in access to and use of additional therapies: Empowering of service members and their families

- 4th Wed. of month
  - 1st hour: Treatment: Cancer and Vascular Interventions (including Drug Trials and Shared Decision Making)
  - 2nd hour: Cancer Care Coordination in Multidisciplinary Settings: Integrating tumor-specific and tumor-informative care

- 1st Thu. of month
  - 1st hour: Managing side effects and patient fatigue: SYSTEM (Supportive care for patients with cancer and their caregivers)
  - 2nd hour: Preparing for your treatment: a shared decision-making approach

- 2nd Thu. of month
  - 1st hour: Addressing stigma and psychosocial issues
  - 2nd hour: Understanding how genetic testing is used in cancer care

- 3rd Thu. of month
  - 1st hour: Understanding how the ECHO model improves patient care: 2020 Revising the ECHO model in lung cancer
  - 2nd hour: Enhancing patient engagement and care coordination

- 4th Thu. of month
  - 1st hour: ECHO: A Model for Patient Education and Delivery of Care
Questions?
Case Review
Fields and Instructions
Case Review Instructions

• Please identify a recent lung cancer patient case (or process) to present/review at the next ECHO meeting. Select a case that you would like to receive feedback on from the expert ECHO team. If possible, attempt to identify a case that relates to the topic of the day.

• Briefly describe relevant aspects of your case and draft your question(s) for the ECHO team using the Case Review Form located in your Welcome Packet.

• It is not necessary to complete every field on the Case Review Form, only those you think are relevant.

• Please comply with HIPPA regulations and do not use any Patient Identifiers when submitting cases for review.

• This form should be submitted at least 5 business days before the next ECHO so that it can be shared with subject matter experts.

• Email your completed form to Octavia.vogel@cancer.org.

• Be prepared to present the case in 20 minutes or less.
Case Review Fields

- Presenter’s name:
- Clinical Site:
- Role/ Title:
- Primary concern/question addressed in case review:
- Point on the continuum
  - Screening
  - Diagnosis
  - Tobacco Cessation
  - Treatment
  - Psychosocial support
  - Symptom management
  - Post-treatment survivorship
  - Palliative care
Case Review: Patient Data

- Patient Demographics:
  - Age
  - Sex
  - Occupation
  - Marital Status/ Living arrangements
  - Height and weight
  - BMI

- Pertinent Physical Findings on Examination

- Relevant Past Medical History (Other adult illnesses)

- Family Cancer Risk Assessment Genetic/hereditary /risk factors

- Social History
  - Smoking
  - Alcohol
  - Recreational drugs
Case Review: Patient Data

- Cancer Treatment Summary
  - Diagnosis
    - Cancer Type/Location/Histology Subtype
    - Diagnosis Date
    - Stage
  - Treatment
    - Surgery (yes or no)
    - Surgery Dates
    - Surgical procedure/location/findings
    - Radiation (yes or no)
    - Body area treated
    - End date (year)
    - Systemic Therapy (chemotherapy, hormonal therapy, other) (yes or no)
      - Agents used and end dates (year)
      - Persistent symptoms or side effects at completion of treatment
  - Pertinent labs and imaging
Case Review Data: Patient Data

- Cancer Surveillance or other recommended related tests (What/When/Frequency)
- Resource/Psychosocial concerns
  - Resource needs (financial, transportation etc)
  - Screening for Pain and symptom & management
  - Communication, team and family
  - Function, mobility
  - Understanding of illness/Prognosis
  - Decision making preferences/values/Goals of Care (Advance care planning); health care proxy
  - Spiritual, emotional and existential distress
  - Ethical issues
  - Caregiver situation
- Concerns Related to Survivorship Care Management
Next Clinic
June 28, 2018
Lung Cancer Screening Part 1: Guidelines including criteria and shared decision making