

Development and Utilization of an Acuity Scale for Oncology Patient Navigation

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Published In/Presented At

Roman, R., Beaupre, L., Sevedge, K., Zubia, J., Chicas, M., McHugh, D., Morrone, D. & Kichline, T. (2014, September, 18-21). *Development and Utilization of an Acuity Scale for Oncology Patient Navigation*. Poster presented at the Academy of Oncology Nurse & Patient Navigators Fifth Annual Navigation and Survivorship Conference, Orlando, FL.

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Background and Purpose:

The oncology navigation team at LVHN developed a Needs Assessment and Acuity Scale to help in assessing newly referred patients. The tools are used to determine which components of care can be addressed by other internal cancer support resources, which patients are appropriate for navigation, and the level of navigation needed.

During the quarter from March 1, 2014-May 31, 2014, 4% of patients had an acuity score of 0, 21% had an acuity score of 1, 24% had an acuity score of 2, 27% had an acuity score of 3, and 23% of patient had an acuity score of 4.

- 0 = Not appropriate for Navigation ie: no diagnosis of cancer, not incurrent treatment.
- 1 = Stable navigation needs, no active navigation needed at present.
- 2 = Low acuity for navitation
- 3 = Moderate acuity for navigation
- 4 = High acuity for navigation

Conclusion:

By utilizing the needs assessment and acuity scale, the navigators are able to determine if patients are appropriate for navigation, have stable needs, or require active navigation. The intensity of navigation is also indicated. In the future, we hope to include the acuity measurements to help determine workload.

Acuity Scale Pilot

Navigator Acuity Scale Patient name _____ MR# _____

0 Not appropriate for Navigation
1 Stable- Navigating on an "as needed" basis
2 Low Acuity
3 Moderate Acuity
4 High Acuity

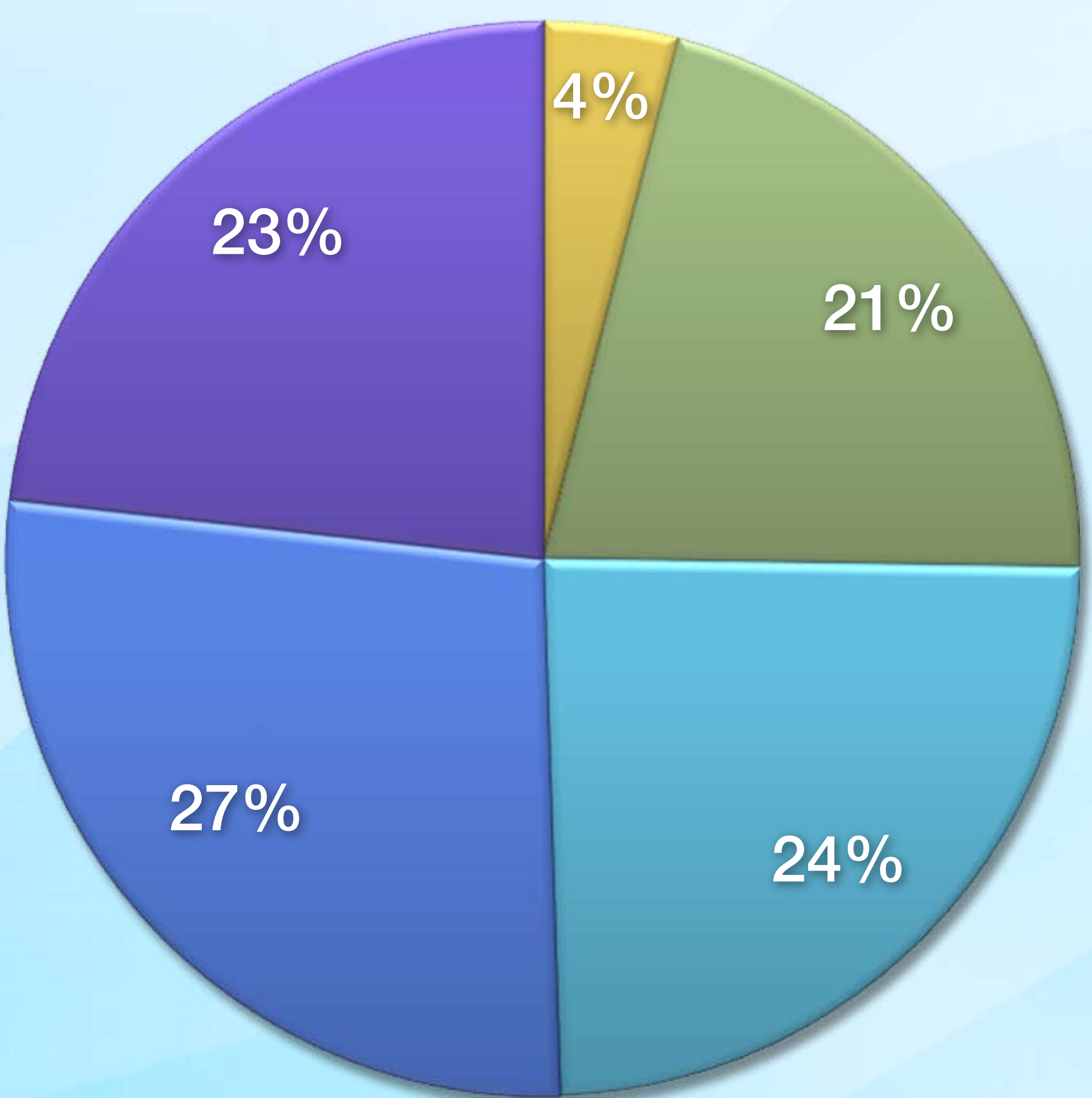
Low Acuity Needs
Surgery >1 day in hospital/ complex inpatient care
No health surveillance
No PCP
Fertility preservation needs/ pregnant
Cognitive Impairment/Sensory deficits (HOH, vision, speech)
Dental needs
Difficulty coping
Other _____
Comments _____

Moderate Acuity Needs
Comorbidities new () chronic ()
Dental needs
Language barrier/ cultural barriers
Cognitive Impairment/ sensory deficits (HOH, vision, speech)
Difficulty coping
PEG needs new () established ()
Trach needs new () established ()
Ostomy needs new () established ()
Other _____
Comments _____

High Acuity Needs
Starting treatment (chemo/RT)
Treatment non-compliance/ appointment no-show >2
New PEG tube
New Tracheostomy
New Colostomy/Ileostomy
Complex treatment/ overwhelming for patient
Requires office visit with Navigator
ECOG equal or greater than 2 with no caregiver
Coordination of multiple appointments/ referrals/ departments
Uncontrolled pain
Language barrier/ cultural barriers
Cognitive Impairment/ sensory deficits (HOH, vision, speech)
Experiencing treatment side effects
Other _____
Comments _____

Acuity Score _____
Date _____
Reassessment date _____

Acuity Score



- 0: Not appropriate for navigation
- 1: Stable navigation needs
- 2: Low acuity for navigation
- 3: Moderate acuity for navigation
- 4: High acuity for navigation

Navigator Needs Assessment

Patient name _____ MR# _____

Needs Assessment

Financial Concerns none ()
Underinsured or uninsured/MA pending/Prescription assistance needed
() Referred to financial coordinator/date comment _____

Social Needs none ()
Housing needs/problems Transportation needs
Toxic home environment Lack of social support
Head of household/caregiver No job/income
Undocumented/non-citizen Diff. paying bills
Prosthesis/wig needs Food/formula needs
() Referred to Social Worker/date comment _____

Psych/Social Needs none ()
Past psych history/on psych meds
Suicidal ideation
Current s/s ongoing depression/ anxiety
Body image/ sexuality help needed
Substance abuse currently/ history
ETOH () Prescription meds ()
Tobacco () Recreational drugs ()
() Referred to CSS/Substance Abuse/date comment _____

Dietary/Nutrition None ()
Weight loss/gain
Difficulty swallowing
Malnutrition
() acute
() chronic
() Referred to Dietician/ Speech Therapist/ Date _____
Comment _____
Homecare Referral ()
Rehab Referral ()
OACIS Referral ()

