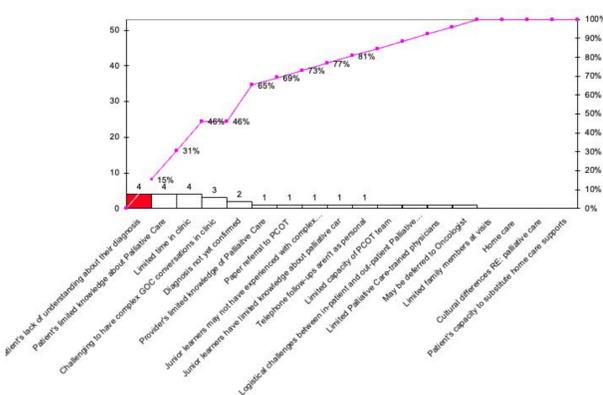
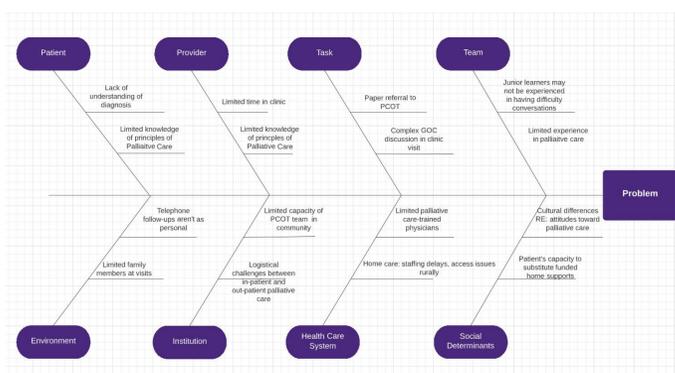


AIM Statement: Increase referrals of patients with locally advanced or metastatic lung cancer in the Diagnostic Assessment Program (DAP) to Palliative Care by 25% by March 2023.

PROBLEM DEFINITION

- Palliative Care (PC) has been shown to decrease mortality, improve mood and QoL, and reduces health care costs in non-small cell lung cancer (NSCLC)
- PC is underutilized in locally advanced and metastatic cancers, particularly in London with only 3 palliative care outreach teams (PCOT)

ROOT CAUSE ANALYSIS



Interview with Dr. Mitchell (Respirology), Dr. Malik (Palliative Care) and Ms. Raquel Clawson (DAP Nurse Navigator):

- Severely short-staffed PC service
- Diagnostic focus of DAP clinic, minimal symptoms
- RNs screening PC referral would not be feasible

Early Palliative Care referrals are evidence-based and have been shown to improve quality of life for patients with advanced lung cancer.

There are barriers preventing these appropriate referrals from happening regularly in practice.

A handout was designed to help debunk common myths about Palliative Care and help patients access the care they deserve.

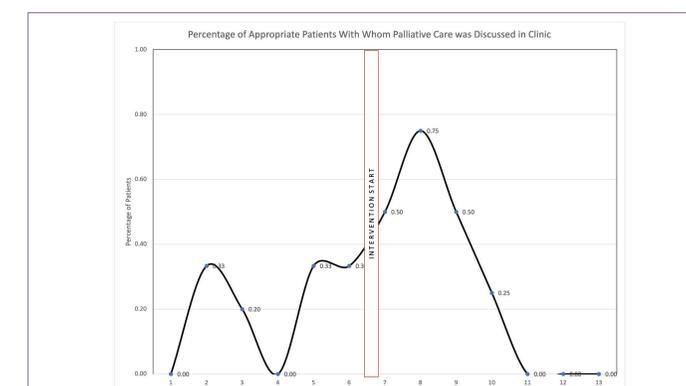


IMPLEMENTATION

PDSA Cycle 1	
What change will be tested?	Number of referrals of locally advanced/metastatic patients to PC from DAP/Pleural Clinic
How will the change be tested?	Survey the MDs weekly to see how many patients referred
Who will run the test?	R4s
Where will the test occur?	DAP Clinic and Pleural Clinic
When will the test occur?	February 2022
Predictions	1. The number of referrals will increase by 10% 2. There will be more documented discussions RE: palliative care at follow-up appointments 3. The handout provided will lead to more meaningful discussions RE: palliative care

Challenges - different root causes and fewer target patients per DAP clinic than expected

MEASUREMENT & RESULTS



Measures:

- 1) **Process Measure:** Number of pamphlets given out
- 2) **Balancing Measure:** MD surveys to assess satisfaction.

SUSTAINABILITY

1. Process owner: Dr. Michael Mitchell
2. Documentation of new standard: Clinic Notes
3. Monitoring plan: Ongoing check in with MDs and teaching with juniors RE: importance of PC referrals