



ONCOLOGY COMMUNICATION, TECHNOLOGY, AND EVENTS STUDY(OCTET)

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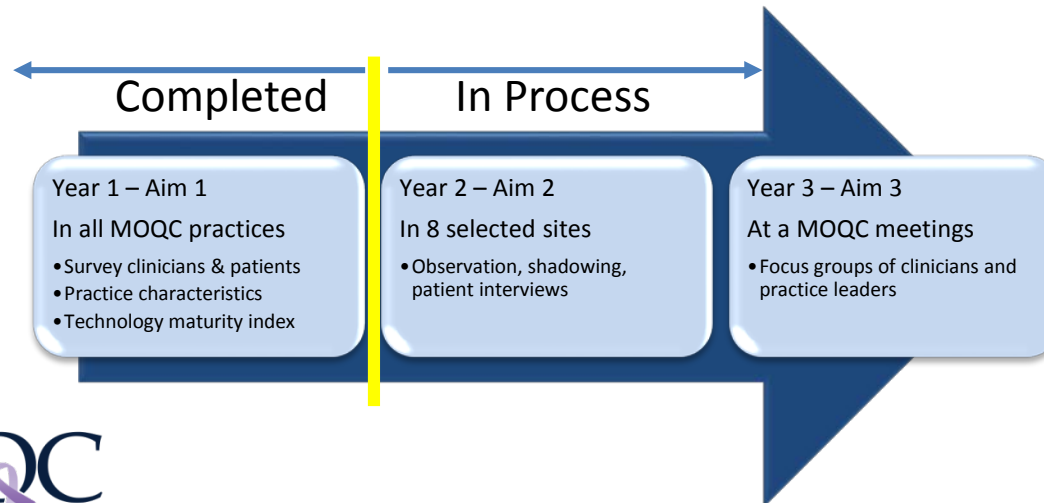
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Project Specific Aims

1. Characterize clinician communication processes, technologies, & adverse events
2. Examine how communication & technologies affect practice
3. Assess barriers & facilitators to safer cancer care





Year 1 Participation

- In 2017, **28** MOQC practices participated
- Data received from
 - **2,223 patients** – toxicities reported in past week PRO-CTCAE™ (nausea, vomiting, constipation, diarrhea, neuropathic pain, and general pain)
 - **184 nurses** – communication and technology
 - **114 prescribers** – communication and technology
- Overall participation: **68%**, (50-100% across MOQC)





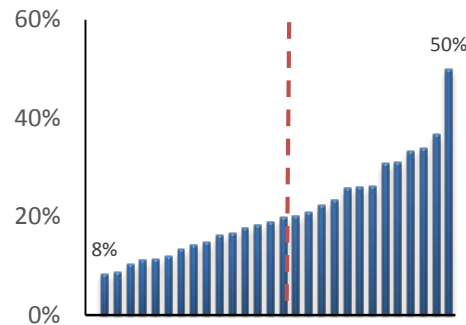
Year 1 Patient Data

Preliminary Results, Not for Distribution

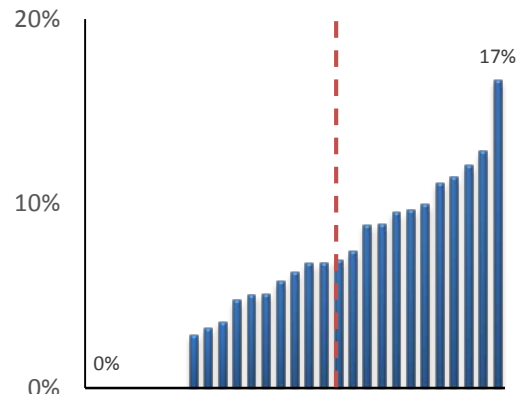
Unadjusted for patient severity or treatment intensity

- 20% rated \geq one toxicity as severe/very severe in the past week

- Pain 13%
- Neuropathy 6%
- Constipation 5%



- 7% used additional health care services to manage a toxicity in the past week

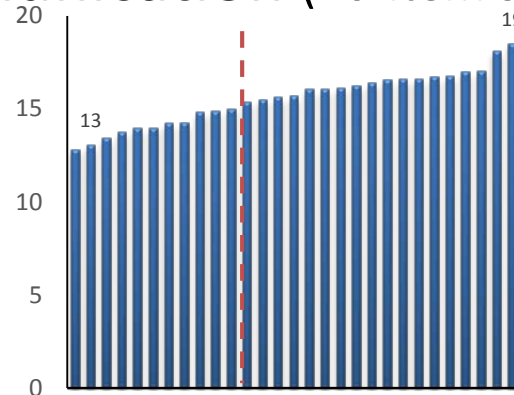




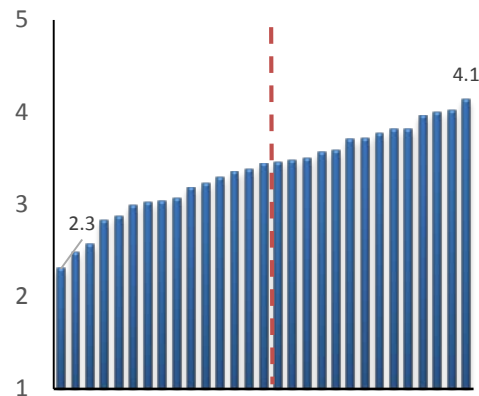
Year 2 Clinician Data

Preliminary Results, Not for Distribution

- **Clinician communication** (20-item score, higher is better)



- **Satisfaction with EHR/Documentation**
(5-point scale, higher is more satisfied)





What's next

- Interim reports to practices next week
- ASCO and AcademyHealth Abstracts
- Analyze patient, clinician, and daily log data
- Identify patterns and correlates of favorable patient and clinician outcomes
- Approach 8 MOQC practices to participate in Aim 2: 1-week observational study (U-M IRB approved, ≤minimal risk, sites “not engaged”)





Acknowledgments

- Participating practices and your patients
- MOQC Leadership and staff
- OCTET study team
- Agency for Healthcare Research and Quality (AHRQ)

Questions?

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