Wendell Yarbrough’s patient was having a trying day. She saw him for a follow-up appointment after her surgery to remove the cancer in her larynx (voice box), had an imaging procedure in a different building, and finally needed to make her way to the speech pathologist to get a prosthetic to enable her to speak. He spotted her in front of the wrong building shortly before that third appointment. Dr. Yarbrough pushed the patient’s wheelchair to the correct clinic. While that solved her immediate problem, he knew that other patients faced similar hurdles.

“We can’t expect patients to navigate all this when they are sick,” explained Dr. Yarbrough, MD, MMHC, Professor of Surgery and Pathology. Dr. Yarbrough leads the Head and Neck Cancer Program at Smilow Cancer Hospital, whose patients typically encounter a large number of team members both before and after therapy. Dr. Yarbrough met with the program team and leaders in Smilow and they set out to make the logistics of getting all that care simpler. The team redesigned the patient experience using one overarching question: “If you were the patient, how would you want to be treated?”

A variety of innovations in scheduling and communication are now in place to streamline care. The Head and Neck Cancer Program is the vanguard of a larger clinical redesign involving the entire hospital. Making care more efficient will help us care for more patients, according to Rogerio Lilenbaum, MD, Chief Medical Officer of Smilow Cancer Hospital.

As part of a larger multidisciplinary project to improve patient flow, patients began noticing differences as soon as they entered the building. Blood drawing is now centralized to Smilow’s fourth floor lab, which patients pass when they enter from the parking garage. More phlebotomists and nurses have been hired to speed the process. An increasing number of patients will be getting their blood drawn at various labs in their own communities before their appointments so that results are ready when they meet with their doctors.

Some appointments take much longer than others. “A visit here is by nature more complex than it is in a private office,” Dr. Lilenbaum said. So physicians have been asked to design a ‘realistic template’ that creates a true picture of how long various patients need. Scheduling according to these templates – rather than to an arbitrary appointment length – should cut down on patient wait times.

Often doctors will be ready to see a patient, but there is no available room, Dr. Lilenbaum said. Smilow has implemented new electronic status boards to notify staff immediately when a room is empty. Another innovation to speed patient care is encouraging oncologists to write chemotherapy orders before the visit. These orders will, of course, be verified before administration, but should reduce the amount of time a patient waits for his or her chemotherapy to be mixed in pharmacy.

Patient care will also be improved by making better use of nurse practitioners and physician associates, Dr. Lilenbaum explained, and by giving patients the option to go to one of the 8 Smilow Cancer Hospital Care Centers scattered throughout the state.

While trying to make services more efficient for a large volume of patients, services are also being expanded. “We want to offer psychological support for oncology patients who may be in distress,” he said. Genetic testing will also be more widely available with more rapid access. Screenings are being increased for various kinds of cancers as well. “We are renewing our efforts to be a leader in patient experience and patient satisfaction,” Dr. Lilenbaum said.

Great communication is critical to both. “Patients want to know: Is my spouse going to need a hotel room? Will I know how to take care of the drain when I go home?” Dr. Yarbrough said. The Head and Neck Cancer Program connects each patient with a clinical coordinator, a point person who plays the key role of answering questions and connecting the patient with available services.

Patients with head and neck cancer require care from many providers to assure the best outcomes. The Head and Neck Cancer Program strives to coordinate as many visits as possible into a single day – a major feat of scheduling and space allocation that involved many departments. Getting different professionals to work together has long been seen as critical to effective health care, but it is equally vital to delivering health care that is convenient and patient-centered. ©