

# Patient Navigation

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# BACKGROUND

- Patient Navigation dates to the American Cancer Society's "Report to the Nation of Cancer in the Poor in 1989"
- The report found low-income patients frequently face both financial and non-financial barriers when attempting to seek cancer diagnostic test and often do not seek proper or timely care due to these barriers

# BACKGROUND

- Due to late stage cancer diagnosis and/or incomplete cancer treatment, the poor disproportionately experience pain, suffering and death
- Freeman and colleagues were the first to identify an association between low socioeconomic status and racial differences in cancer survival

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- In 1990, Dr Harold Freeman implemented a novel navigator program for women with abnormal mammograms, which resulted in earlier presentations and better survival
- Some of the barriers identified include lack of insurance, poor social support, poor coping styles, health beliefs and poor health literacy skills

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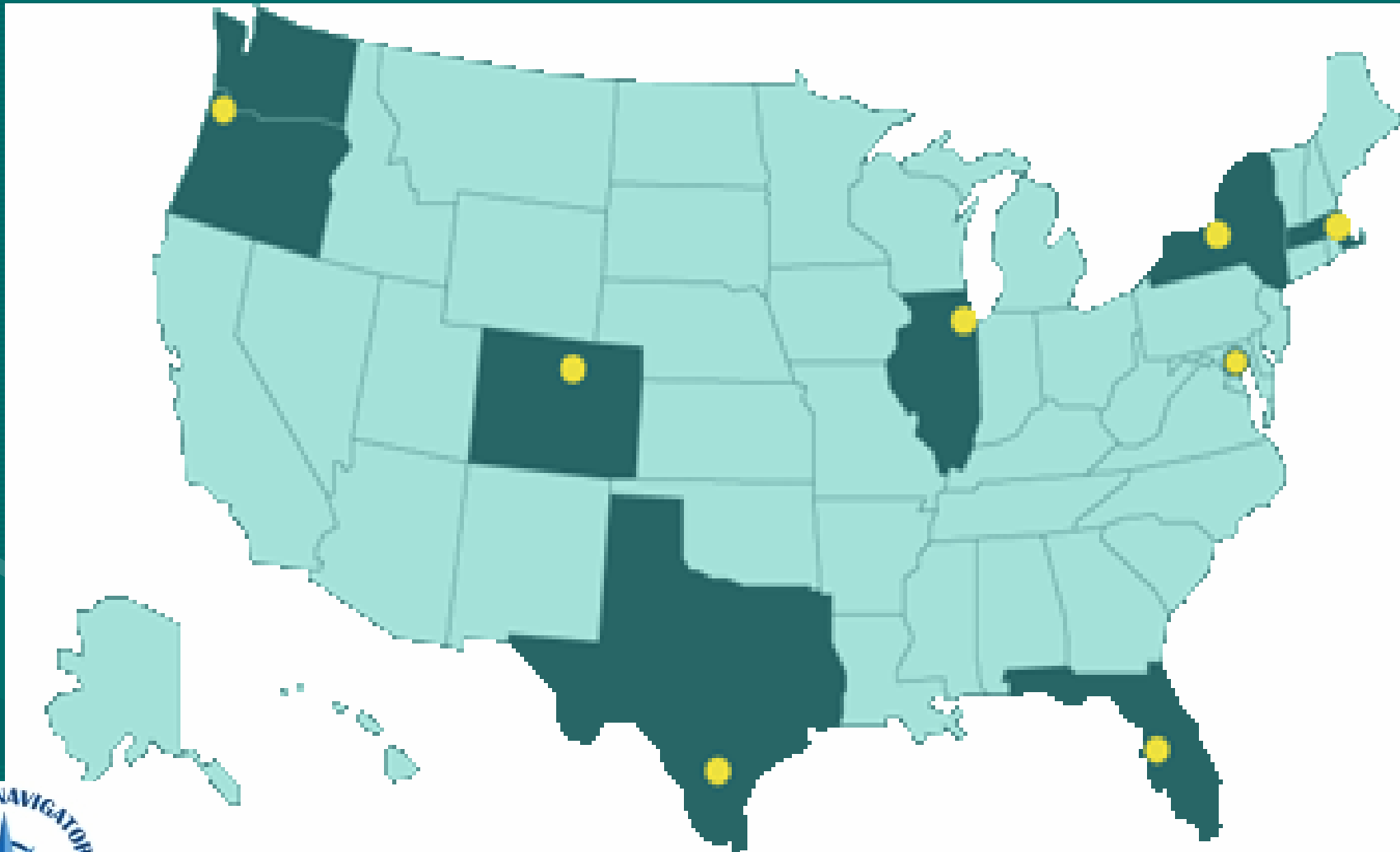
- Single-site navigator programs have been subsequently implemented
- Building on this work, the National Cancer Institute is funding implementation and evaluation navigator programs at nine sites in the United States

# National Evaluations of Patient Navigation Programs

- NCI Patient Navigation Research Program
- 9 Sites Nationally
- 4 Screenable Cancers
  - Breast
  - Colon
  - Cervical
  - Prostate
- Continuous, Concurrent Control Group



# NCI PNRP Sites



# Target Populations

	Black	Hisp	A/PI	AI/AN	Low- Income	Any Female
Northwestern—Chicago	√	√			√	
UT—San Antonio	√	√			√	√
University of Rochester	√				√	
Boston University	√	√			√	
Northwest Indian Health				√		
Ohio State	√	√			√	
GWU—Washington, DC	√	√				
Denver HHA	√	√	√		√	
Moffitt—Tampa	√	√			√	

# Aggregated Projected Sample Size

Cancer Site	Intervention	Control
Breast	5,295	5,014
Cervix	3,528	3,268
Colorectal	5,507	5,521
Prostate	1,167	1,192
Column Total	15,497	14,995
<b>Total Sample Size</b>		<b>30,492</b>

# Type/Number of Navigators

	APN	RN	LPN	SW	Lay	Other
Northwestern—Chicago	2			2	4	
UT—San Antonio			4			4
University of Rochester					3	
Boston University (#s not specified)		√	√			√
Northwest Indian Health		3			4	
Ohio State						3
GWU—Washington, DC				5	2	
Denver HHA					4.5	
Moffitt—Tampa						3

# Common Data Elements

## Outcome Variables

- Time from abnormal screening to diagnosis
- Time from diagnosis to completion of treatment
- Patient satisfaction
- Cost Effectiveness