

Pacific Oncology Outreach Evaluation

Background and Statement of Problem

Dr. Brian Goldsmith of the Radiology Department authored a proposal in FY96 to develop and test the use of the Internet as a medium to conduct tumor boards between remote locations and a major Medical Treatment Facility. His goal was to provide a tertiary level of care, via the tumor boards, prior to the patient's evacuation from the primary care location. The DoD Breast Cancer Initiatives (BCI) accepted the proposal and the Internet Tumor Board (ITB) commenced in October 1996 as a demonstration project. In FY 99, the funding for the ITB shifted from the BCI to the Pacific Regional Program Office with the goal of assessing the impact that the Internet Tumor Board has had on the clients and providers it is designed to assist.

Project Description

The Pacific Oncology Outreach Project utilizes the Internet and telephone to conduct weekly scheduled tumor boards, provide educational offerings, consultations and social support between remote military treatment facilities and Tripler Regional Medical Center's multi-disciplinary oncology specialist team. The Internet Tumor Board (ITB) allows for case discussion and evaluation of treatment options for oncology care, providing needed educational offerings and communications to outlying health care providers, and potentially negating the necessity of some client medical evacuations. Based on the strongly expressed desire from the outlying sites for expanding the scope and services of the tumor board, counseling services, business meetings and social support services are presently being piloted. The first year of this project developed the strategy, defined goals and objectives, purchased the needed equipment and trained personnel on the ITB process. The second year piloted the platform between one outlying site (Guam) and TAMC, expanded the concept to four other outlying sites, purchased outlying site equipment, trained personnel, hired an administrative base and conducted a conference to gather all participants together for training and future planning. The third year operationalized the process to all 5 outlying sites, began weekly educational offerings and Internet support services and collected multiple process metrics. This year's focus (FY99) is on evaluating the impact of this project through collection and analysis of outcome metrics, process metrics and cost analysis. The Cost analysis and the evaluation of outcome metrics are the final steps needed to present a comprehensive business plan to DOD Health Care policy planners to justify this project's future institutionalization. Very little has been published about tele-oncology and there have been few studies that have examined the areas of satisfaction and cost effectiveness.

Research Question

This proposal is a project evaluation of the Internet Tumor Board designed to answer the following:

What is the Pacific Oncology Outreach Project's impact on:

1. Quality of Oncology Care:



- A. Access: (Time from diagnosis to treatment, stage at diagnosis, sub-specialist involvement, and avoidance of inappropriate Medical evacuation transport from retrospective and prospective data collection)
- B. Satisfaction: (Patient and provider satisfaction surveys)
- C. Cost effectiveness: (Stage migration cost savings, decreased costs involved in entry to pathway waiting period, and cost avoidance secondary to continuing education credits awarded and medevac avoidance savings)
- 2. Effects of Quality oncology care
 - A. Quality of life (Fact B Quality of Life tool)
 - B. Survivability (Stage at pathway entrance)

Timelines and Deliverables (See Attached)

TIMELINE AND MILESTONES OF DELIVERABLES

Time (in months)

	1	2	3	4	5	6	7	8	9	10	11	12
Weekly Internet Tumor Boards established	X											
2. Expand ITB to include at least 50% other	X	İ										
oncology cases												
Presenting form on Webpage for other cancers:												
Melanoma												
"Other"	X											
F/U	X											
	X											
3. Additional sites conferencing with ITB:												
Misawa, Japan	X											
Camp Lejeune	X											
Okinawa	X											
Korea				X								
Palau	X											
4. Internet Support Services fully functioning on												
webpage:												
(a) Obtain Software	X											
(b) Integrate into Webpage	X											
(c) Patient information (PI) guide developed				X								

5. Fact B Quality of Life tool completed on	T	X	T	\top	\top		\top	T	\top	T	T	T
breast cancer patients from remote sites		1.										
(a) Translation of QOL tool: Japanese,												
Korean. Other as needed				X								
6. Patient/Provider Satisfaction tool	1		†		1	1	1	1	†	1		1
(a) Develop Consent Form	X											
(b) ROL to research, locate tool	X	X										
(c) Selection, modification if needed of tool		X	X									
(d) Administer to ITB providers				X	X	X	X	X	X			
(e) Administer to ITB patients				X	X	X	X	X	X			
(f) Evaluation of results									X	X		
7. Technical Troubleshooting Guide developed	Ţ	X	Ţ	T	Ţ	1	Ţ	Ţ	T	T	Ţ	T
and on webpage	\perp											
8. Cost Analysis		X						1			1	<u> </u>
9. Complete Cost Analysis	\perp										X	
10. Outcome Metrics												
(a) Tracking Mechanism	X											
(b) Data Collection		X	X	X	X	X	X					
(c) Analysis		\perp						X	X			
11. Process Metrics												
(a) Tracking Mechanism	X											
(b) Data Collection		X	X	X	X	X	X					
(c) Analysis				4		<u> </u>		X	X			<u> </u>
12. Direct Patient Consultative Services												
(a) Developed Mechanism	X											
(b) Data Tracked		X	X	X	X	X	X					
(c) Process Evaluated								X	X			
13. Quarterly Reports			X			X			X			X
14. Business Plan for TAMC	\perp					ļ						X