



Association of Community Cancer Centers

ONCOLOGY ISSUES

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FROM THE EDITOR

A New Set of Wheels

BY CHRISTIAN DOWNS, JD, MHA



parents were both very reluctant to let me have the car. But, being the typical teenager, I insisted that any future success I might have depended entirely on my ownership of this Jeep. (Mom never really said yes, and Dad agreed only if I paid for the gas and repairs out of my part-time job at the machine shop.)

In cancer care delivery today, we have put great focus on “quality of care.” Oftentimes this brings to mind the newest technology, for example EHRs that are capable of spitting out reams of outcomes data or spray charts that show deviations from clinical pathways. But just maybe quality cancer care can actually mean something as simple as access to “wheels.”

In this edition of *Oncology Issues*, we highlight two cancer programs that improved the patient experience tremendously by developing transportation programs for their patients. For Linda Bily and her colleagues at Stony Brook Cancer Center, it all started with a donated mini-school bus. In its two years of service, Stony Brook’s NET (Non-Emergency Transportation) Program has improved patient adherence to treatment plans, made better use of chair time by improving “on time” arrivals, and allowed patients to receive treatment close to home. My takeaway from Bily’s article: It truly takes a community to develop a successful transportation program.

Our second article describes the transportation program at the J. Phillip Citta Regional Cancer Center that also started with a donated vehicle and two volunteer-drivers. After a hugely successful pilot program, social worker Sherry Laniado proposed making the transportation program permanent. Today it includes two cars, two part-time salaried drivers, and a program coordinator who works with a support team to ensure that cancer

We all remember our

first car. Mine was a Jeep CJ—huge V8 engine, full-time four-wheel drive, and painted a nausea-inducing shade of green. My

patients are able to make their radiation treatment and outpatient infusion appointments.

Just think of all of the quality indicators these transportation programs touch on: access to care, improved time to treatment, improved patient adherence to treatment plans, increased patient satisfaction, etc.—not to mention the programmatic benefits, such as streamlined workflow.

Do these quality initiatives have the same “pop” (or cost) of some fancy hi-tech solution? No. Do they play a key role in delivering quality cancer care in the community? Absolutely.

So back to the Jeep. Mom was right to be scared of me getting behind my first set of wheels, but my Dad was too smart by half. You see, when I got the Jeep, it was about 15 years old, had 140,000 miles on it, and got about 3 miles to the gallon. Really! In the end, my meager part-time job barely covered the cost of repairs, and there was nothing much left over for the gas-guzzling engine. I drove the car maybe half a dozen times and then went off to college in August; Dad sold it that September. So much for my first set of “wheels.” I’m happy to say, however, that the cancer programs and cancer patients featured in this *Oncology Issues* are having a much better experience with their “new set of wheels!” 