

spotlight

Lahey Hospital & Medical Center Cancer Services Burlington, Mass.



Lahey Hospital & Medical Center (LHMC) in Burlington, Mass., serves a densely populated area in eastern Massachusetts, southern New Hampshire, and southern Maine. Formerly Lahey Clinic, LHMC is an academic teaching center and one of five hospitals within the Lahey Health System. The LHMC cancer center is a key component of the Lahey Health Cancer Institute, created in 2014 to address the need for integrated and expanded cancer services across seven Lahey Health System cancer services sites.

Leveraging a Virtual Model

The LHMC cancer center is a virtual cancer center that includes LHMC's comprehensive oncology service line; in Burlington, those services are located throughout the hospital and include medical, surgical, and radiation oncology. Additional cancer services are offered at Lahey Medical Center in Peabody, Mass., where medical and radiation oncology are co-located, and in Derry and Salem, N.H., where medical oncology services are offered. This virtual cancer center sees more than 3,000 new analytic cases annually on an inpatient and outpatient basis and has 24 infusion bays in Burlington, with 109 additional infusion bays spread across the health system. The Burlington location is staffed by 12 medical oncologists, 4 hematologists, 7 radiation oncologists, 15 radiation therapists, 11 advanced practice providers, and 32 nurses.

The LHMC cancer center utilizes a site-specific focus, which brings providers together by disease site to address patient needs quickly, efficiently, and with a high

level of expertise. This approach helped LHMC become accredited by the Commission on Cancer, the American College of Radiology, the National Accreditation Program for Breast Centers, and the Foundation for the Accreditation of Cellular Therapy for its autologous stem cell transplantation program.

Attracting Patients in a Competitive Marketplace

Massachusetts is a relatively homogeneous state with the highest rate of health insurance coverage in the country. As such, there are no immediate population-specific challenges to cancer care, but there is a great deal of competition among providers to deliver that care—there are more physicians per capita in Massachusetts than in any other state. To attract patients, LHMC has placed a premium on patient access, smoothing out insurance processes for patients, and easing patient intake, according to Andrea McKee, MD, chair of radiation oncology at LHMC. One example of this patient-focused approach is participation in the Centers for Medicare & Medicaid Services Oncology Care Model, which seeks to improve care coordination, quality, and access and reduce unplanned hospitalization for patients undergoing chemotherapy.

The LHMC cancer center has a dedicated oncology pharmacy and a robust clinical trials program, with 40 trials currently open for enrollment. Recently, the National Cancer Institute designated LHMC a recipient of the 2018 High Performing Site Initiative Award for excellence in patient accrual and quality of clinical trial data.

The program's intraoperative radiation therapy for breast cancers is another distinctive feature, as is its stereotactic radiotherapy program with a focus on liver cancers; the hospital's live liver donor team fields referrals for both transplants and hepatobiliary and pancreatic cancers.

Social work and psycho-oncology services are available for patients. Additionally, the LHMC cancer center offers complementary therapies such as Reiki, acupuncture, massage, and music and pet therapies. Look Good, Feel Better groups and support groups for lymphoma, leukemia, breast, and prostate cancers bolster these supportive services. Patients see rehab services during survivorship visits and have the option for these services at the time of their clinic visits.

On an operational level, through its multidisciplinary model of care teams, the LHMC cancer center undergoes continuous improvement for breast, lung, gastrointestinal, and gynecologic cancer services to ensure quality, patient-centric care. These teams are composed of clinicians, nurses, and nurse navigators across the health system, not just in locations that offer cancer services. The teams meet quarterly to discuss what improvements could be made across sites, develop standards and quality measures, and research new protocols.

A Screening Pioneer

LHMC was one of the first institutions in the country to implement a low-dose computed tomography program for lung cancer screening in 2011 following publication of the National Cancer Institute's National Lung



Screening Trial. Although there was not yet a code for reimbursement, LHMC's Rescue Lung, Rescue Life program recognized the immediate needs of its patient population and began providing lung screening as a community benefit until the Centers for Medicare & Medicaid Services established an insurance code in 2015. To date, LHMC has screened more than 5,000 patients—estimated to be 65 to 70 percent of their high-risk population—and detected more than 200 lung cancers, 85 percent of which were stage I or II. Thanks to the success of this program, LHMC now diagnoses more stage I lung cancers than stage IV lung cancers. Read more about this innovative program in the March/April 2014 *Oncology Issues* in the feature article "Rescue Lung, Rescue Life."

Lahey Health System also boasts a systemwide breast cancer screening program based on the Hughes risk assessment model. All patients undergoing mammograms receive a test on a tablet that determines a patient's risk profile. If patients are at 20 percent or greater risk of breast cancer, they meet with a nurse practitioner and discuss further screening options. The screening app also calculates a patient's risk of inherited genetic biomarkers such as BRCA 1 and 2 and refers patients to genetic counselors if suitable. "It's a nice way of helping women understand their risk and providing them with extra evaluation if needed," says McKee. 

