



CHI HEALTH GOOD SAMARITAN CANCER CENTER FLOWCHART

Distress Screening Process 2015

- 500 new patients per year
- Infusion: 15-18 patients per day
- Radiation: 25-35 patients per day



Step 1

Distress screening initiated in 2009.
1 counselor and 3 RN navigators on site.
Behavior Services available off campus.



DEFINING PIVOTAL POINTS:

Patients screened at first visit to radiation oncology and first visit to infusion center; patients then screened (at minimum) at first visit of each subsequent month.

Medical oncology services provided by private practice located outside of the hospital. Currently not screening patients for distress.

Step 11

Nurse navigator documents patient response and STAR referral in EHR.



Step 10

Nurse navigator contacts physician for STAR Program referral.

Step 9a

Nurse navigator contacts STAR Program coordinator.



~ or ~

Step 9b

Nurse navigator documents patient response in EHR.

Step 8a

Patient is interested in STAR Program.



~ or ~

Step 8b

Patient is NOT interested in STAR Program.



Step 3

Navigator receives distress screening forms, checks scores, and enters problem list responses into EHR; navigator visits new patients in radiation oncology and infusion center.

Step 2

Patient signs in at front desk and receives intake packet, including distress screening form. Patient fills out and returns to radiation nurse or nurse navigator.

LOW DISTRESS - (SCORE OF 0-3)

Step 4a

- Navigator reviews distress screening with patients
- Education and referrals if appropriate

~ or ~

MODERATE DISTRESS - (SCORE OF 4-6)

Step 4b

- Navigator reviews distress screening with patients
- A referral is made to the LMHP (licensed mental health practitioner)
- Additional medical staff notified, as indicated by assessment
- Education and referrals to address needs and barriers

~ or ~

HIGH DISTRESS - (SCORE OF 7-10)

Step 4c

- Nurse verbally notifies nurse navigators of high distress
- Navigator reviews distress screening with patients
- A referral is made to the LMHP and/or MD or APRN to see patient at that visit
- Advanced assessment, if indicated
- Education and referrals to address needs and barriers

Step 5

Navigator's resource center has educational handouts that align with every problem in the NCCN problem list.



Step 6

Front desk staff scans distress screening form into patient's EHR.

Step 7

Navigator forwards problem list to STAR coordinator for review and STAR screening referral. If patient checks any of the 14 rehab "triggers" on the Distress Screening Tool, nurse navigator educates patient about the STAR Program.