

Addressing the Needs of Cancer Survivors in Primary Care

*Presentation to Joint meeting of the NCI Board of
Scientific Advisors (BSA) and the
National Cancer Advisory Board (NCAB)*

December 6, 2022

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Proposed RFA

Goal: to stimulate the development and testing of **practice and health system interventions** that support and promote **high quality primary care** for cancer survivors during and/or after the treatment period

Exponential Growth in Number of Cancer Survivors

Cancer Survivor: An individual is considered a cancer survivor from the time of diagnosis, through the balance of life



68.3% of survivors receive care in primary care

Quality Care for Cancer Survivors

- National Academy of Medicine recommendations:
 - Prevention and surveillance for recurrence
 - Surveillance/ management of physical and psychosocial effects
 - Promoting healthy lifestyle behaviors
 - Identifying and managing comorbidities
 - Screening for subsequent cancers
 - Monitoring and improving mental well-being
 - Managing late- and long-term conditions
 - Coordinating care

The Problem:

Challenges Delivering Quality Care for Survivors in Primary Care (PC)

Identifying cancer history

Access to updated diagnosis, treatment history, recommendations

Unclear who is responsible for components of care

Lack of regular communication with oncology providers

Growth in number of survivors *living with* cancer

Many patients treated with newer therapies and unique symptoms

Current Efforts to Improve PC for Survivors are Limited

- Guidelines exist but not implemented in most PC practices
- Survivorship care plans have limited impact
- Previous educational initiatives and training programs for interested PCPs
- Lack of effective interventions, and most focus on survivors
- **Current studies target individual PCPs and not practices or systems**

Evidence Gap: Effective and sustainable strategies to transform primary care for cancer survivors

Proposed RFA (U01)

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Example Research Topics

- Developing and testing methods for:
 - PCP practices to engage survivors in healthy lifestyle behaviors
 - Enhanced coordination and management of comorbidities
- Testing the impact of innovative policy, incentive, and educational strategies on PCP delivery of survivorship care
- Evaluating communication or information technology approaches to facilitate care coordination between PCP practices and oncology providers
- Developing and testing strategies that seek to promote alignment of primary care practices with existing survivorship guidelines

Key Considerations

- Applications must:
 - Go beyond engaging or educating individual PCPs or integrating primary care into a cancer center
 - Focus on PCP practices or integrated health systems that include PC
 - Focus on PCPs providing care to adult cancer survivors
- Studies should include meaningful endpoints:
 - Healthcare utilization
 - Patient-reported outcomes
 - Measures of care quality (e.g., guideline-concordant care)
 - Clinical outcomes
- Strong interest in populations that experience health disparities

Justification for RFA

- Growth of cancer survivors living longer and seen in primary care
- New models of survivorship care needed to better support PCPs
- Challenges with delivery of PC for survivors necessitates practice- and system-level strategies
- Existing portfolio focused on survivors engaging personal PCPs
- Need to incentive simultaneous projects to share strategies across teams and transform care

Proposed Budget

- \$5M per year starting in FY 24 to fund up to 6 awards
- U01 application budgets must not exceed \$700K in direct costs per year
- Total set aside for 5 years of funding: \$25M

Responses to BSA Subcommittee Feedback

Defining what is meant by PCP and their role in proposed research

- We will include a broad definition of PCP (e.g., Advanced Practice Providers, Primary Care physicians, Internal Medicine)
- PCPs should have a leadership role in proposed study

Consider that PCPs are overburdened and overworked

- RFA goal is to support PCPs in doing work that is germane to primary care; we will encourage studies of efficient/effective care models that include other healthcare providers as appropriate

Role of primary care delivered in urgent care

- Applications may include urgent care as a location of care to be integrated into PC/oncology models of shared care

Clarify Deliverables

- Goal is to develop evidence-based, sustainable models of care that integrate primary care to support high quality survivorship care

Expected Impact

Effective and
sustainable
interventions

Innovative and
collaborative
models of care for
survivors

High quality care
delivered by PCPs

Improved
outcomes for
survivors



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