Submission ID 3416: Navigation Acuity Predictors And Clinical Care Barriers In Cancer: Retrospective Study

Wael Lasheen, Daniell Boselli, Kris Blackley, Declan Walsh, Kunal Kadakia

Contact: wael.lasheen@advocatehealth.org

Background and Objectives

The Patient Navigation (PN) service at Levine Cancer is:

- I. A dedicated nurse led program.
- II. Help patients navigate the health care system.
- III. Facilitate timely and quality care

We developed an **Acuity Grading Scale (AGS)** to capture clinical complexity and justify resource allocation. AGS is **scored 1-4**:

Level 1→ No needs or care barriers

Level 2→ Basic needs

Level 3→ Moderate needs

Level 4→ High intensity needs

Objectives:

- I. Identify common care barriers/needs
- II. Predictors of higher AGS
- III. Independent association between AGS and survival

Methods

Patients (2017- 2022) identified from a PN Database and matched with the Cancer Registry.

Exclusions: age <18, prior PN, past cancer, or records unmatched with the cancer registry

AGS collapsed into levels 1-2 versus 3-4 (high support). **Multivariable logistic regression** models estimated odds of higher support needs. **Overall survival** was defined time from diagnosis to last death or last-follow

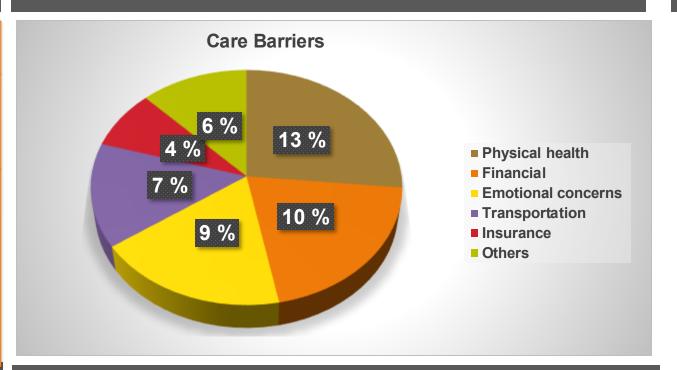
Needs Intensity Education / Genetic Referrals / Basic needs (including but not limited to) Survivorship Fertility / Nutrition / Supplies/ **Moderate intensity needs** Support / Psychosocial needs (including but not limited to) / Transportation Child or Elder Care / Health Literacy / Immigration status / Insurance / High intensity needs **Intense Care Coordination /** (including but not limited to) Language / Transportation /

Baseline Variables (N=1836)

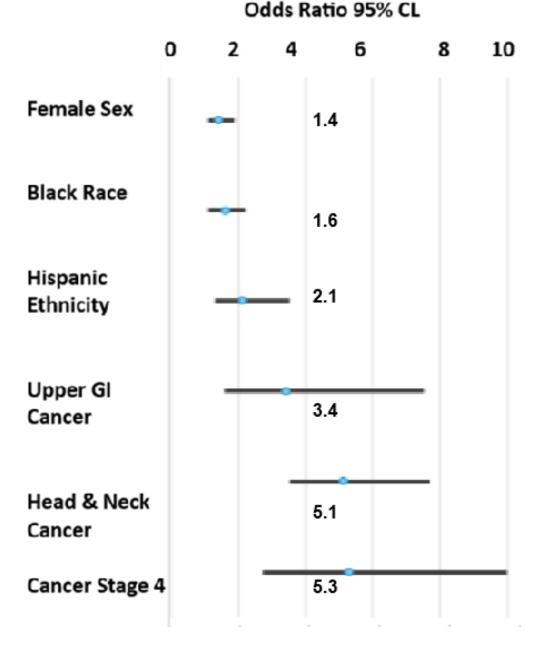
Unresolved Symptoms

Median Age	63 (18-99)
Female Sex	66%
Black Race	21%
Hispanic Ethnicity	3%
Top Cancers	
Breast	37%
Hematologic	11%
Upper GI	7%
Stage	
II-IV	61%
% Federal Poverty Line (FPL)	
< 300%	61%
Rural / Urban (RUCA) Metropolitan area	Q00/
ivieti opolitari area	89%

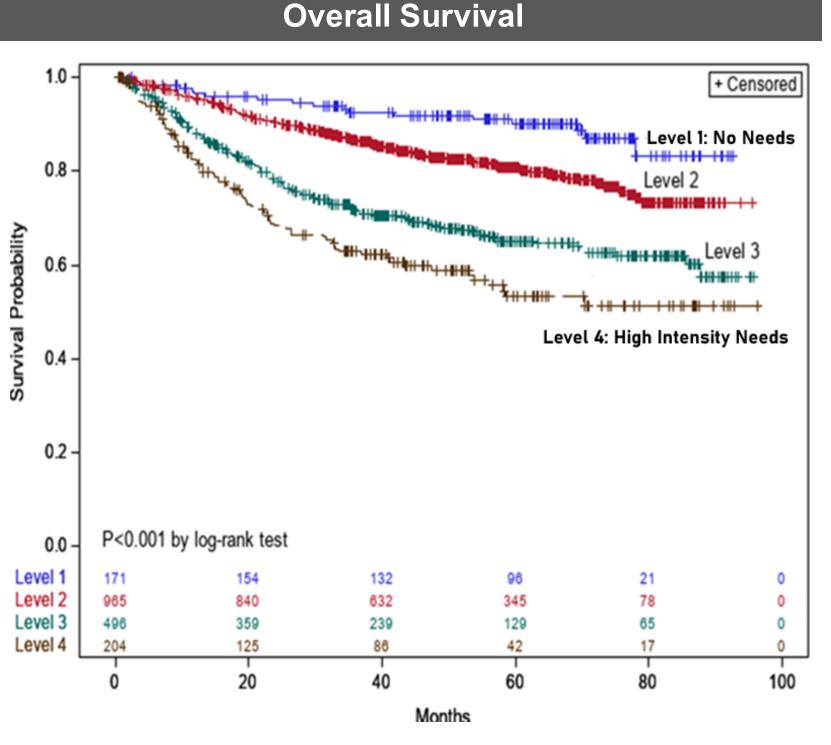
Identified Care Barriers/Needs



High Acuity Grading Score Predictors



References: Sex: Male; Race: White; Ethnicity: Non-Hispanic;
Cancer Site: Lower GI; Cancer Stage: I



Conclusions

- I. The most common care barriers were impaired physical health, financial, and psychosocial factors
- Higher needs were predicted by female sex, black race,
 Hispanic ethnicity, cancer type, and advanced disease
- III. Navigation Acuity was independently associated with cancer outcomes
- IV. More Research is needed using more variables to identify those with intense needs