

PRELIMINARY RESULTS IMPLEMENTING A ROUTINE DISTRESS SCREENING ON INPATIENT ONCOLOGY UNIT

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BACKGROUND & SIGNIFICANCE

- Distress is multifactorial and encompasses a range of psychosocial, practical, and physical concerns (NCCN I Practice Guidelines, 2016).
- In current comprehensive cancer care, Distress has been positioned as the sixth vital sign in cancer care (Bultz & Carlson, 2006), indicating the obligation that providers do regular screening, assessment and treatment of distress.
- It is widely acknowledged that oncology patients experience significant psychosocial distress that often goes unrecognized by treatment providers. Studies indicated that 35%–47% of patients experience significant psychological distress that increases in patients with advanced, incurable disease. (Carlson et al., 2004, Zabora et al., 2001).
- Universal psychosocial distress screening has become a standard of care in the field, primarily utilized in outpatient settings.
- A recent study of inpatient cancer patients suggested that levels of psychosocial distress double those found in outpatient oncology settings. However, there is very little literature on implementation of distress screening on inpatient oncology units. (Clark et al., 2011)

PURPOSE OF THE STUDY

The aim of this study is to understand the levels and domains of distress identified by patients following implementation of routine distress screening on an acute care oncology inpatient unit.

METHODS

- On Lunder 9, a 32 bed oncology unit, the **Attending Registered Nurse (ARN)** administered the standardized screening tool, NCCN Distress Thermometer, (paper version) to all newly admitted patients capable of completing the self-report screening independently.
- Patients self-reported distress levels on a scale of 0-10. Patients who scored greater than 6 received an automatic referral to social work.
- Patients also indicated distress in 5 domains (emotional, practical problems, family, spiritual, physical).
- Completed screenings were provided to the unit's clinical social worker who documented screening scores and initiated referrals.
- Raw data from self-reported surveys were inputted into Excel for descriptive data analysis.



LUNDER 9

PRELIMINARY RESULTS

- Of the total 64 screened, 53.1% were male.
- 64.8% were between the ages of 55-74.
- Initial data indicates high levels of psychosocial distress. 58% of patients scored >6 on scale of 0-10.
- 79.7% of patients (a combination of automatic and voluntary requests) were referred to Social Work as a result of the screening process.

NCCN Distress Thermometer and Problem List for Patients

NCCN DISTRESS THERMOMETER

Instructions: Please circle the number (0-10) that best describes how much distress you have been experiencing in the past week including today.

Extreme distress

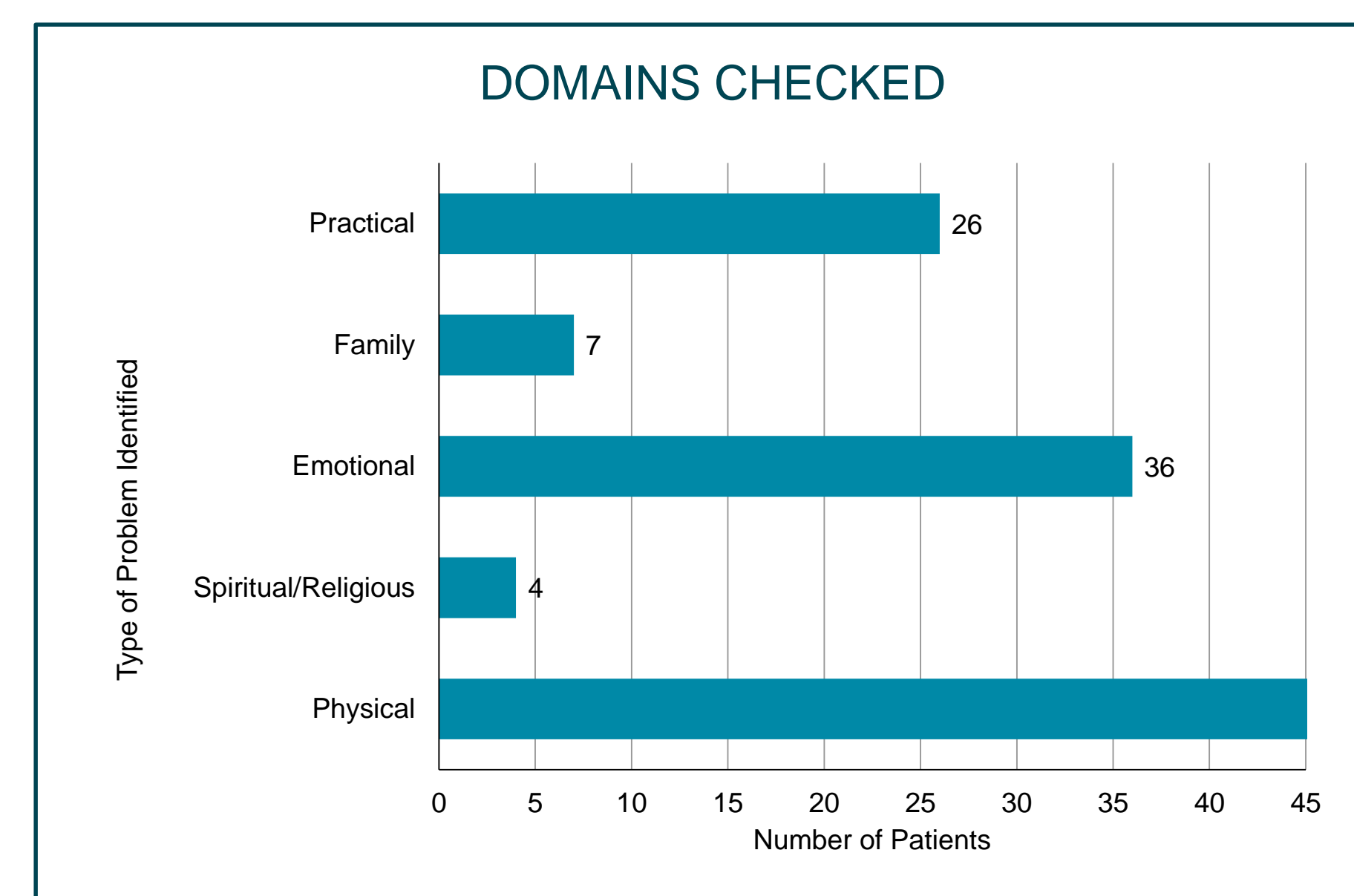
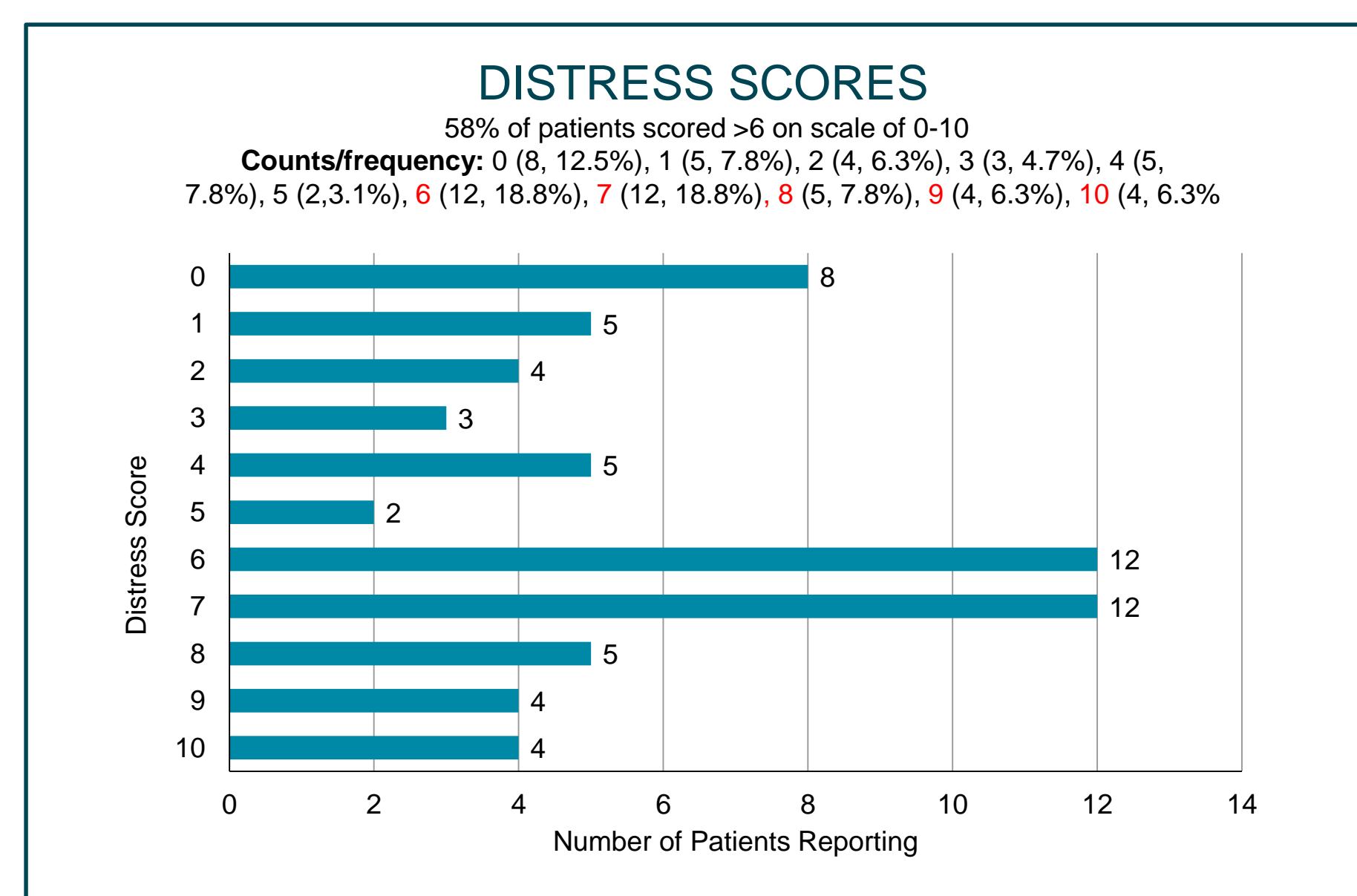
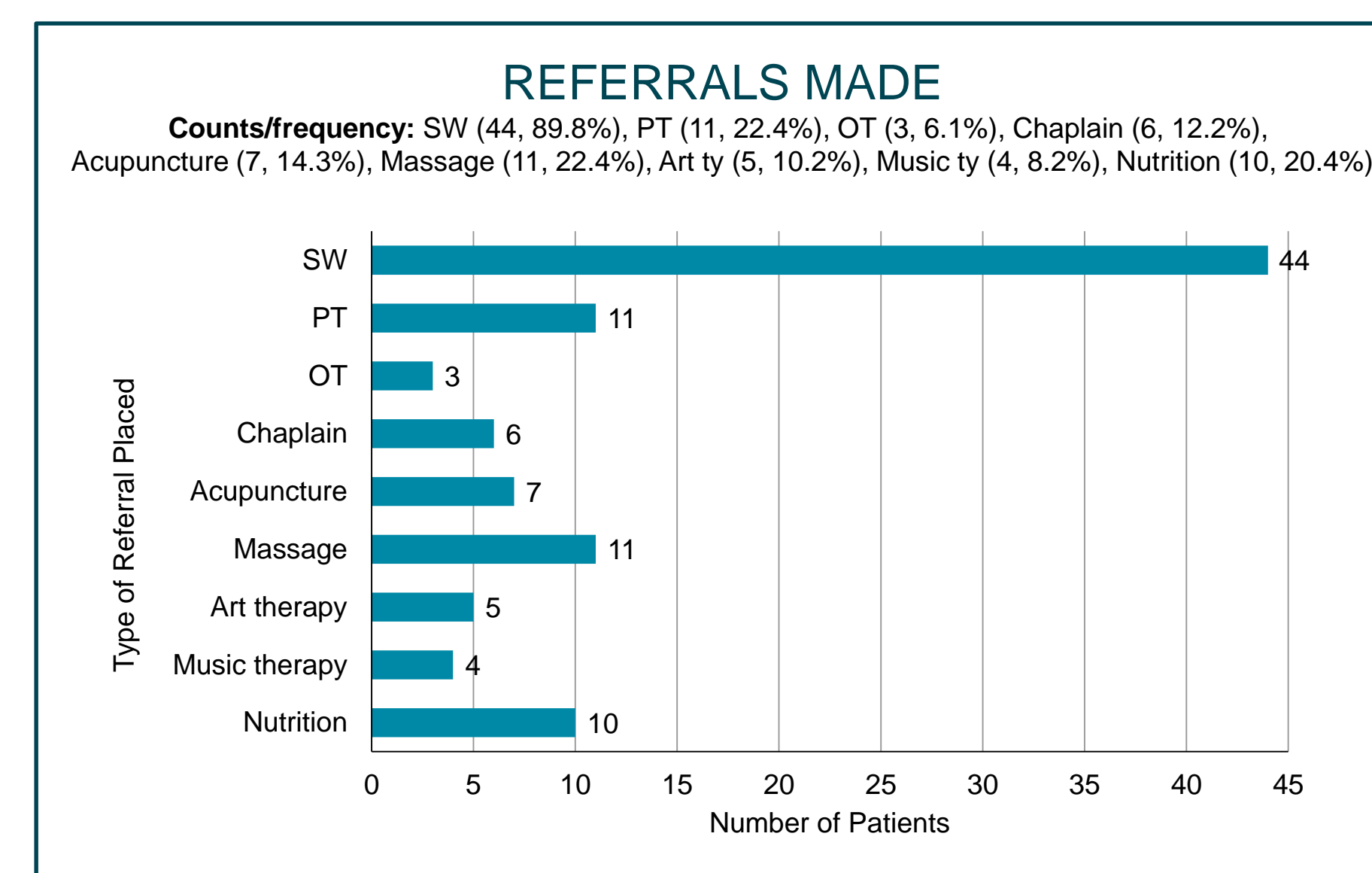
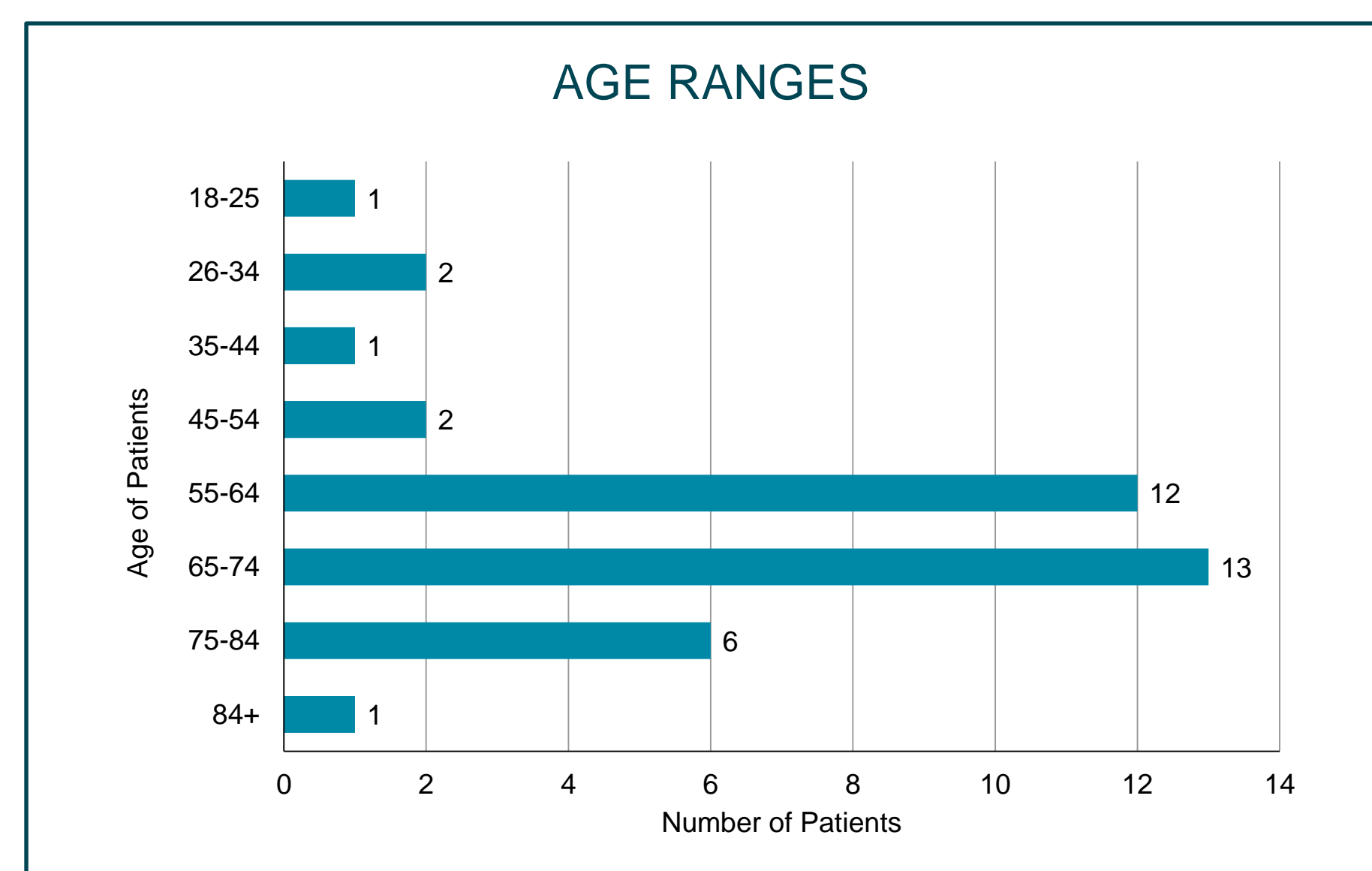
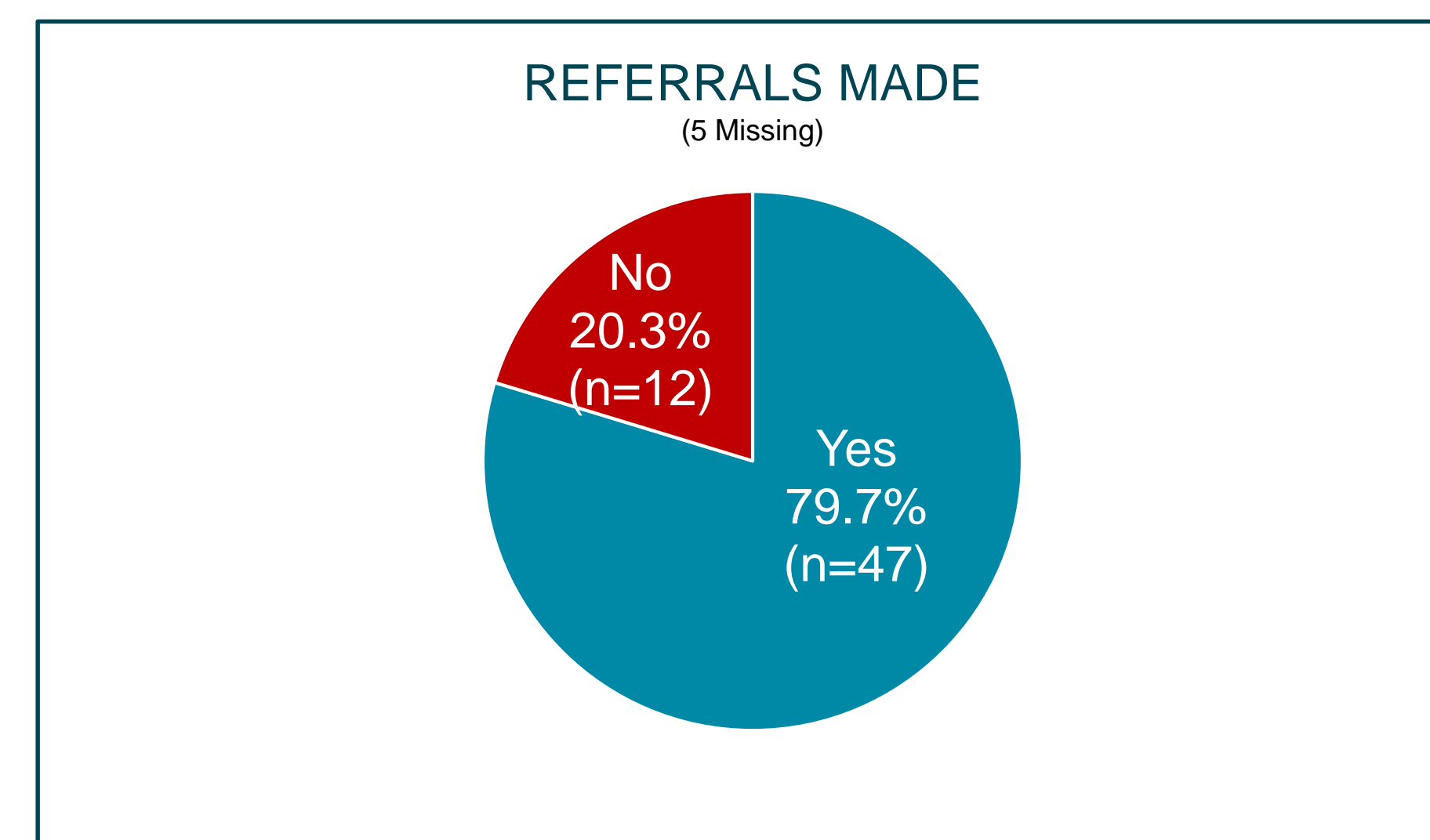
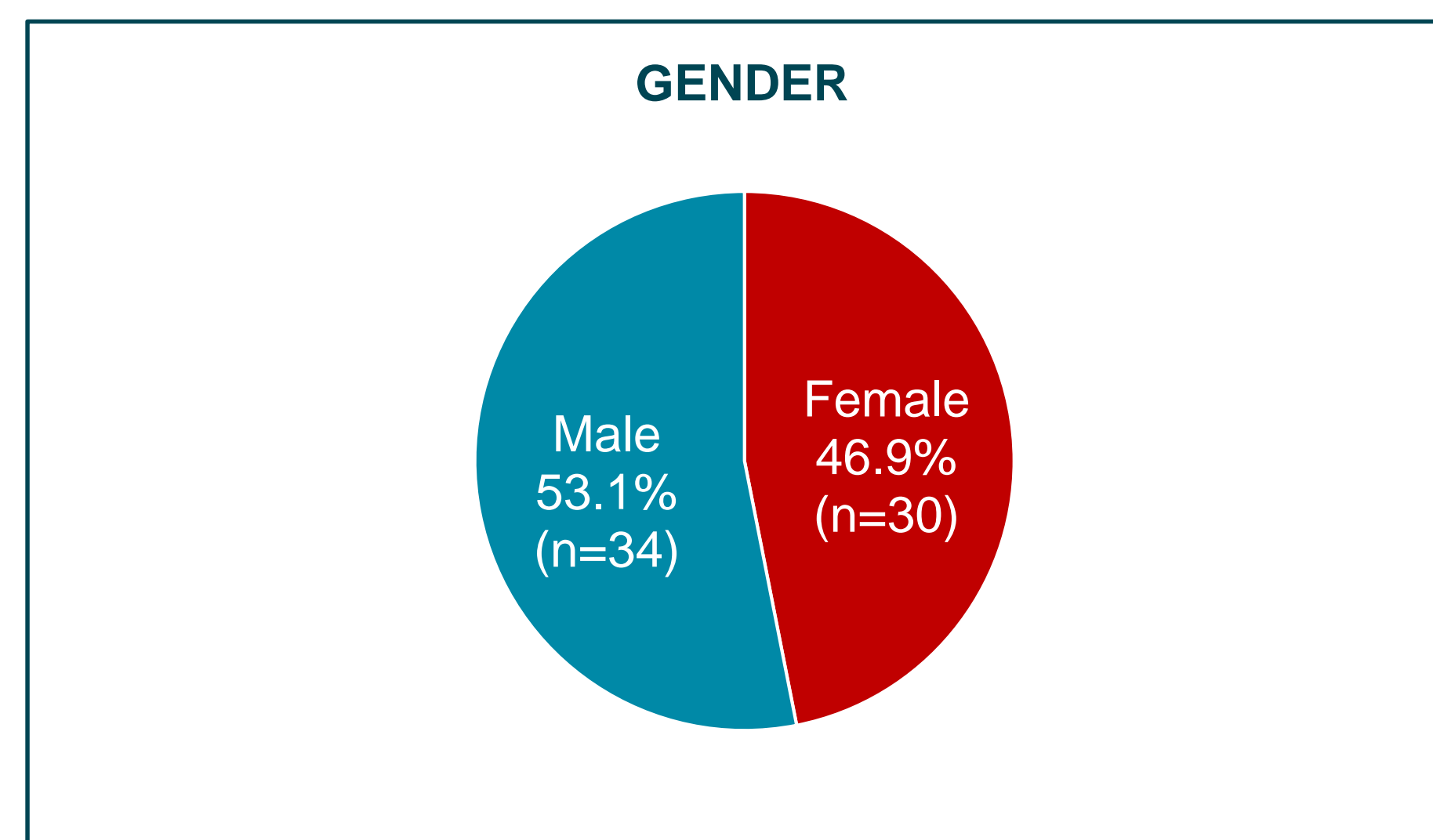
No distress

PROBLEM LIST

Please indicate if any of the following has been a problem for you in the past week including today.

Be sure to check YES or NO for each.

YES	NO	Practical Problems	YES	NO	Physical Problems
<input type="checkbox"/>	<input type="checkbox"/>	Child care	<input type="checkbox"/>	<input type="checkbox"/>	Appearance
<input type="checkbox"/>	<input type="checkbox"/>	Housing	<input type="checkbox"/>	<input type="checkbox"/>	Bathing/dressing
<input type="checkbox"/>	<input type="checkbox"/>	Insurance/financial	<input type="checkbox"/>	<input type="checkbox"/>	Breathing
<input type="checkbox"/>	<input type="checkbox"/>	Transportation	<input type="checkbox"/>	<input type="checkbox"/>	Changes in urination
<input type="checkbox"/>	<input type="checkbox"/>	Work/school	<input type="checkbox"/>	<input type="checkbox"/>	Constipation
<input type="checkbox"/>	<input type="checkbox"/>	Treatment decisions	<input type="checkbox"/>	<input type="checkbox"/>	Dizziness
<input type="checkbox"/>	<input type="checkbox"/>	Family Problems	<input type="checkbox"/>	<input type="checkbox"/>	Eating
<input type="checkbox"/>	<input type="checkbox"/>	Dealing with children	<input type="checkbox"/>	<input type="checkbox"/>	Fatigue
<input type="checkbox"/>	<input type="checkbox"/>	Dealing with partner	<input type="checkbox"/>	<input type="checkbox"/>	Feeling swollen
<input type="checkbox"/>	<input type="checkbox"/>	Ability to have children	<input type="checkbox"/>	<input type="checkbox"/>	Fever
<input type="checkbox"/>	<input type="checkbox"/>	Family health issues	<input type="checkbox"/>	<input type="checkbox"/>	Getting around
<input type="checkbox"/>	<input type="checkbox"/>	Emotional Problems	<input type="checkbox"/>	<input type="checkbox"/>	Indigestion
<input type="checkbox"/>	<input type="checkbox"/>	Depression	<input type="checkbox"/>	<input type="checkbox"/>	Memory/concentration
<input type="checkbox"/>	<input type="checkbox"/>	Fears	<input type="checkbox"/>	<input type="checkbox"/>	Mouth sores
<input type="checkbox"/>	<input type="checkbox"/>	Nervousness	<input type="checkbox"/>	<input type="checkbox"/>	Nausea
<input type="checkbox"/>	<input type="checkbox"/>	Sadness	<input type="checkbox"/>	<input type="checkbox"/>	Nose dry/congested
<input type="checkbox"/>	<input type="checkbox"/>	Worry	<input type="checkbox"/>	<input type="checkbox"/>	Pain
<input type="checkbox"/>	<input type="checkbox"/>	Loss of interest in usual activities	<input type="checkbox"/>	<input type="checkbox"/>	Sexual
<input type="checkbox"/>	<input type="checkbox"/>	Spiritual/religious concerns	<input type="checkbox"/>	<input type="checkbox"/>	Skin dry/itchy
<input type="checkbox"/>	<input type="checkbox"/>	Other Problems:	<input type="checkbox"/>	<input type="checkbox"/>	Sleep
			<input type="checkbox"/>	<input type="checkbox"/>	Substance abuse
			<input type="checkbox"/>	<input type="checkbox"/>	Tingling in hands/feet

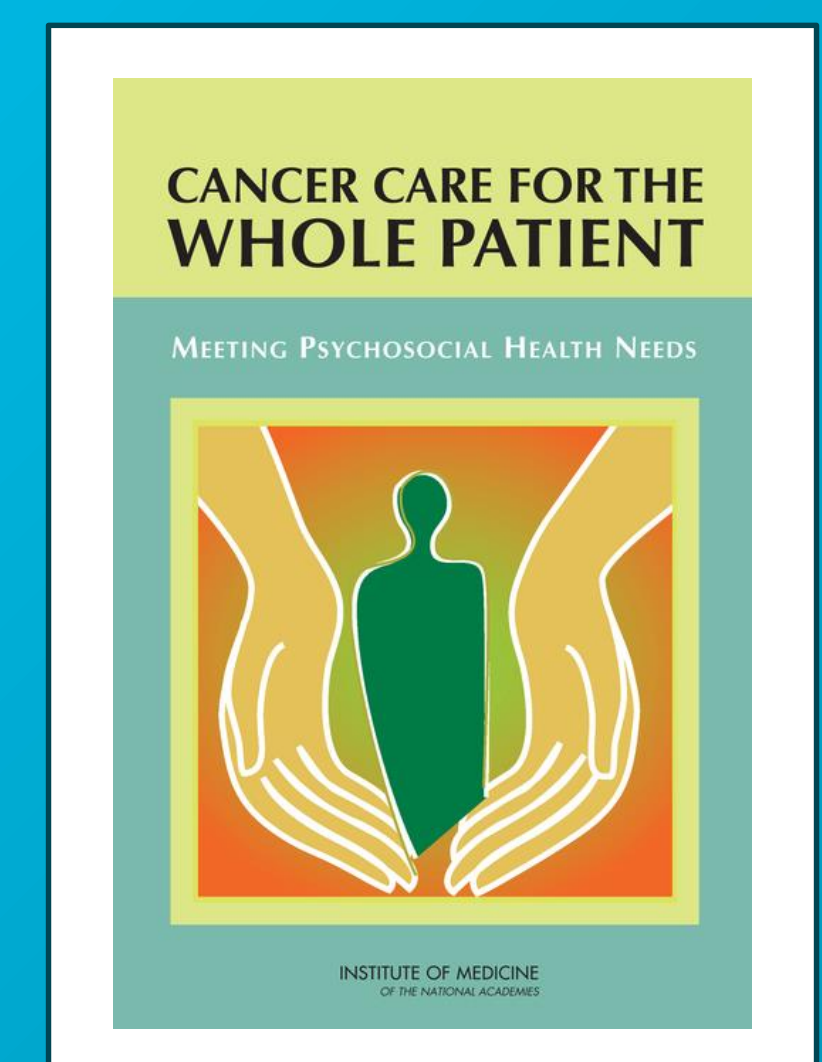


DISCUSSION

- Results indicate that patients on an acute inpatient oncology unit report high levels of psychosocial distress when asked by providers.
- Cancer patients report distress across a variety of domains with physical and emotional domains most frequently cited.

IMPLICATIONS

- This study supports the feasibility of effective screening on an inpatient oncology unit.
- Collaboration between the Attending Registered Nurse and Social Work roles indicates successful interdisciplinary teaming
- Distress Screening offers an effective utilization of hospital and community supportive resources to assist patient and families coping with multiple stressors.
- Screening Cancer patients' psychosocial distress can assist patient's adjustment and coping, provide essential information and assist more effective coordination of care.



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