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CNE Article/CJON Writing Mentorship Article

An Innovative Off-Campus Infusion Suite Designed to Improve Experiences of Patients With Cancer

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The Brooklyn Infusion Center of Memorial Sloan-Kettering Cancer Center was established in 2010 to better meet the needs of patients with cancer living in the Brooklyn neighborhood and surrounding areas. A multidisciplinary team comprising clinical, administrative, planning, and other representatives were charged to identify and develop a location that would provide oncology care for patients closer to home and improve the patients' experience. The primary objectives were to provide patient-centered care that accommodates the patients' preference to receive treatment closer to home and to take advantage of technology to establish processes that will provide safe, efficient, convenient, and high-quality care in a cost-effective manner. To achieve these objectives, no laboratory processing or pharmacy services were included in the plan for the Brooklyn location.

This allowed the elimination of most of the challenges involved with same-day blood draws and chemotherapy orders. In addition, computer technology is used for teledermatology and other medical visits to maintain the continuity of the patients' care with their multidisciplinary teams at the Manhattan, NY, location. The data presented will illustrate how these processes have improved patients' experiences by reducing wait times for treatment, providing treatment closer to home, and implementing a truly patient-centered nursing care model.

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Digital Object Identifier:10.1188/12.CJON.354-359

emand for oncology services is expected to rise rapidly, driven by the aging and growing population in the United States and improvements in cancer survival rates (Erikson, Salsberg, Forte, Bruinooge, & Goldstein, 2007). In 2010, 96,941 patients were treated with outpatient chemotherapy at Memorial Sloan-Kettering Cancer Center (MSKCC), compared with 93,184 patients in 2009. The increasing number of patients receiving chemotherapy challenged the capacity of the existing physical space and created long wait times for patients. The typical MSKCC patient receiving chemotherapy in an outpatient setting waited an average of 72 minutes to receive treatment in 2009 and 71 minutes in 2010. In addition to the wait times, some patients had to travel long distances to receive treatment and incur the exorbitant costs associated with commuting to, and parking in, New York City. The wait time and expense to commute added to the physical and emotional strain of their disease and created additional stress for the patients and their caregivers.

The primary objectives of a new location were twofold: to provide patient-centered care that accommodates the patients' preference to receive treatment closer to home and to take advantage of the latest technology to establish processes that will provide safe, efficient, convenient, high-quality patient care in a cost-effective manner. The 7,745 square foot MSKCC Brooklyn Infusion Center (BIC) (see Figure 1) was established in September 2010 and is located six miles from the MSKCC Manhattan location. The center operates six days per week, Monday through Saturday, from 8 am-6 pm. (Although few places offer chemotherapy on Saturday, BIC had to offer this to be consistent with the next-day treatment process.) BIC has 12 private treatment suites, an indoor garden, and an art gallery. Because the location has no laboratory processing or pharmacy services, dedicated drivers transport specimens and prepared medications between BIC and the Manhattan campus several times daily. Nursing staff collaborated with the Department of Medicine to determine clinical eligibility criteria, and