

EMERGING MODELS OF CANCER CARE: IMPLICATIONS FOR FACILITY DESIGN

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BACKGROUND

The 2016 report on the State of Cancer Care in America highlights a number of key issues currently facing clinical oncology, including: increasing complexity of care delivery, remaining gaps in insurance coverage, rising costs of cancer care, issues with access to care, and inconsistent adoption for best practices.

The increased prevalence, longer continuum and rapidly changing policy environment, of cancer, has resulted in new care models which could have significant implications for facility design. Translation of new emerging cancer care models to space and design requirements has not been yet accomplished.

PROJECT GOAL

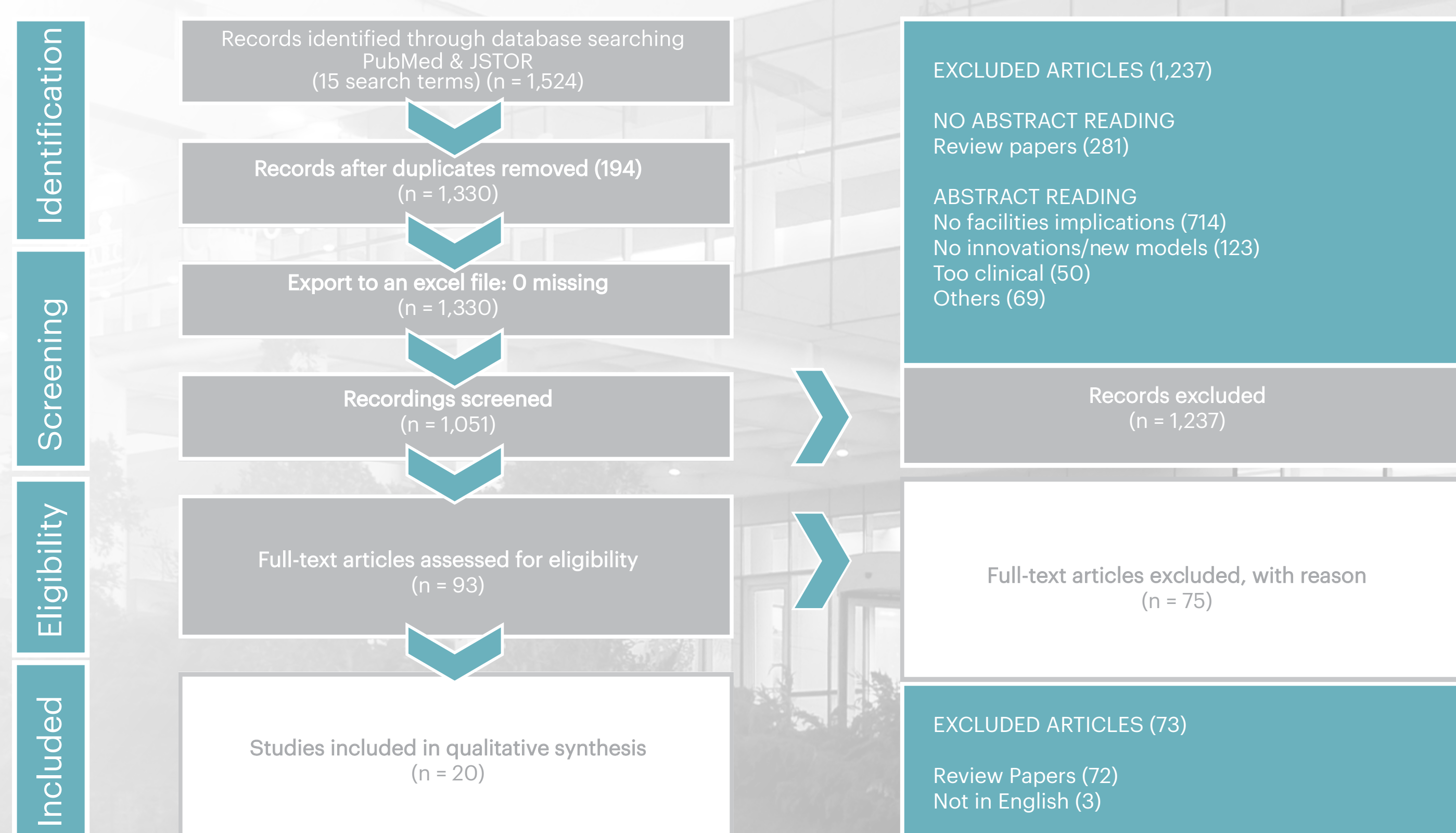
To understand emerging innovative care models and the shift towards precise and personalized medicine.

To examine recent developments in these areas of research and translate them into space requirements, characteristics, and research-informed design options for the future cancer center.

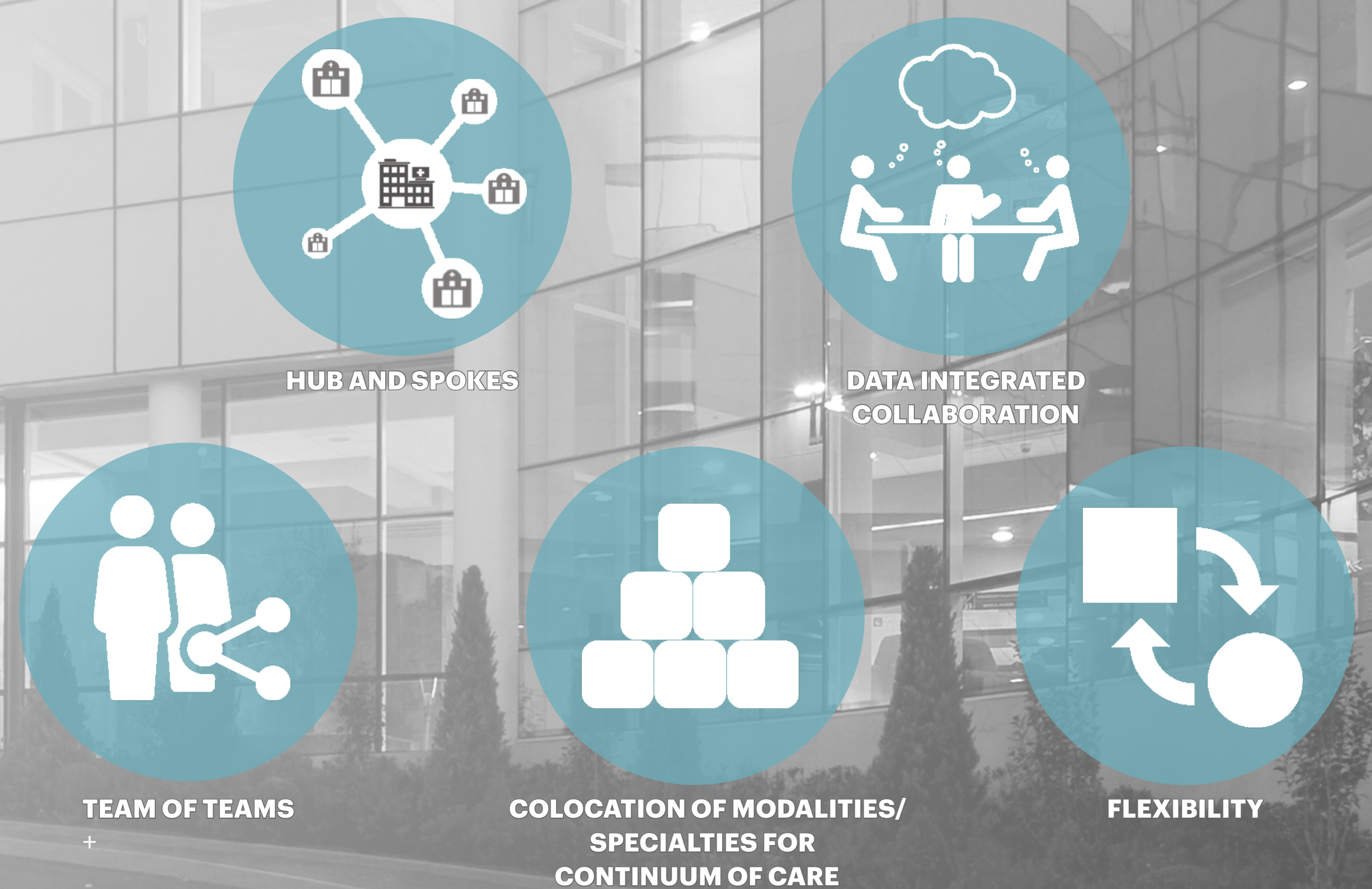
INSIGHTS

- Move from fragmented and sequential care to fully coordinated care
- Value based payment models
- Preventive, predictive, precise and personalized care
- Emerging Care Models
 - / Hub and spoke model
 - / Team of Teams
 - / Rapid learning and use of tumor boards
 - / Integrated practice model
 - / Tiered model of psycho-social care

METHODOLOGY



CONCEPTS



IMPLICATIONS

- 1. Spaces for multidisciplinary tumor boards**
/ Requires spaces that provide both privacy as well as are easily accessed by the tumor board participants (virtual and in-person).
- 2. Hub and spoke plan linking community sites to research bases**
/ Design community cancer centers as regional hubs for cancer diagnosis and treatment that are relatively small and provide a comfortable home and family environment while allowing for state of the art telehealth and conferencing technologies
- 3. Ubiquitous and transparent access to data enabled by the facility**
/ Data collection, processing, data entry, and storage are key activities of cancer care in both community centers and hubs.
- 4. Workplaces with range of collaborative spaces and access to information and data as needed**
/ "Team of teams" approach
- 5. Co-location of different modalities/specialties**
/ Keeping with the continuum of care rather than episodic care with the greater emphasis on integrated practice
- 6. Support preventive/survivorship needs**
/ Spaces for social support, respite and lifestyle
- 7. Flexibility**
/ Ability to flex and change over time