

Expanding Support Groups at our Oncology Clinic

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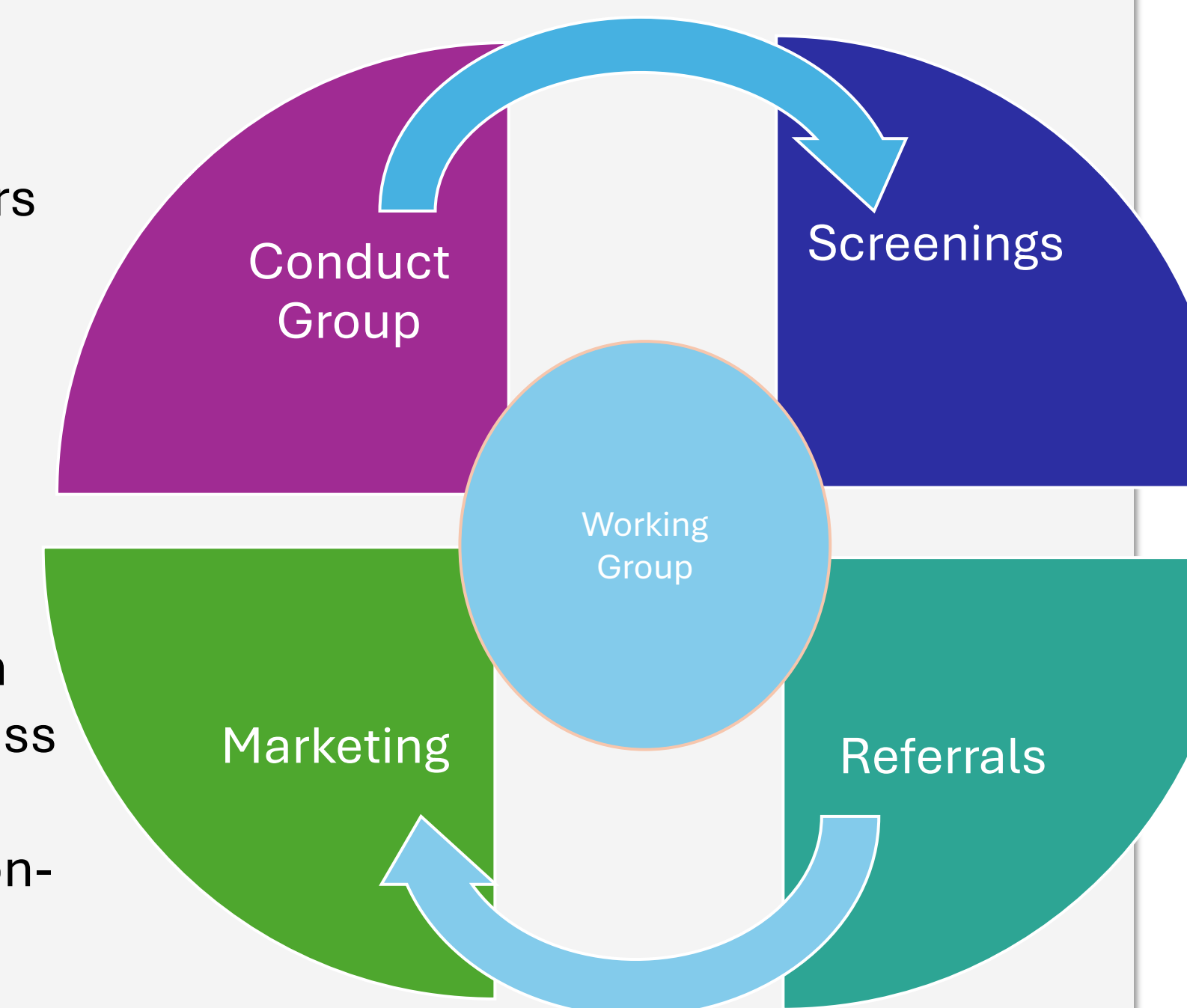
Background

- The American Society of Clinical Oncology (ASCO) has issued recommendations for the management of anxiety and depression in adult survivors of cancer, which includes group therapy approaches for patients with moderate depression or moderate anxiety, led by licensed mental health professionals.
- Expanding support groups and psychotherapy groups can broaden the range of psychosocial support available to patients receiving treatment at an outpatient cancer center, may reduce the amount of time patients wait to be seen by psycho-oncology providers, can reduce patient billing costs for psychotherapy group participants and can lower barriers to psychosocial support options for patients. The role of oncology social workers in providing psychosocial support is integral to improving the well-being of cancer patients.
- At Fred Hutchinson Cancer Center (FHCC), a significant shift occurred over the past few years in response to the increasing need for tailored support and psychotherapy groups. Initially, only one support group was offered to patients. Now, we offer six varied group options, each designed to address specific needs based on cancer type or stage, patient demographic or psychotherapeutic approach to cancer-related distress. This poster will explore our processes and reflections on the expansion of our groups.

Working Group: Integral to Quality and Conduct

A Working Group creates hub for iterative quality improvement:

- Collaborates with multidisciplinary stakeholders
- Includes institutional leadership for mission alignment
- Creates institutional and departmental momentum
- Provides opportunities for supervision and consultation
- Engages in continuous process improvement
- Supports operational decision-making (admin time, scheduling, days/times)
- Decides on Outcome Measures and pre/post surveys
- Determine eligibility criteria and screening process



In person vs Online

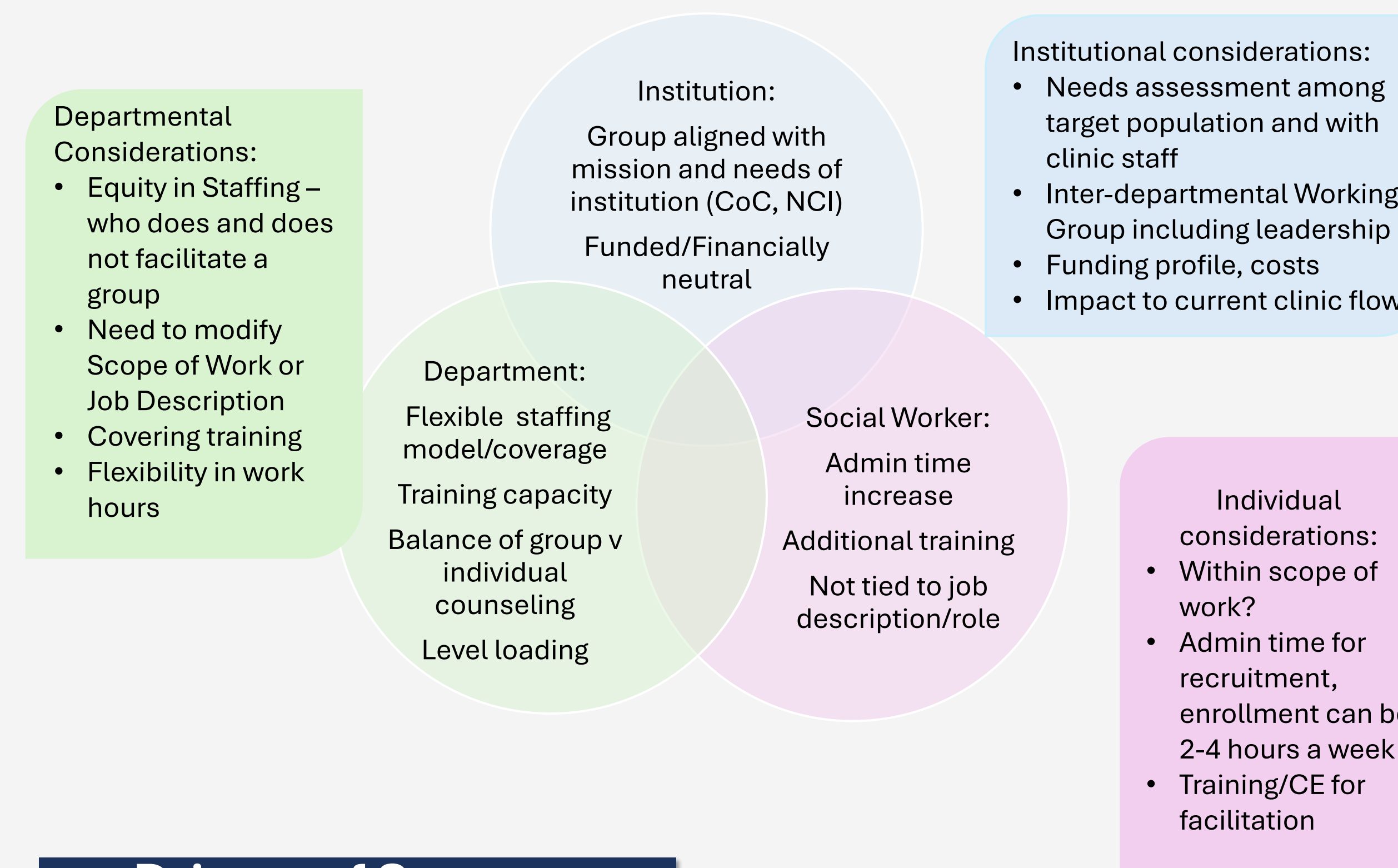
In-person support groups offer the advantage of face-to-face interaction, which can foster emotional connection, trust, and a sense of community. Being physically present can reduce feelings of isolation and provide a structured routine. However, there are drawbacks, including transportation barriers, scheduling conflicts, and limited access for people with mobility issues or those living in rural areas.

Online support groups provide greater convenience and accessibility, allowing individuals to join from home regardless of location or physical limitations. It lowers barriers for group leaders as well. However, virtual formats may limit connection due to reduced nonverbal communication and potential technological issues like poor internet connectivity or lack of familiarity with digital tools.

Current Support Groups

| Group | Inclusion Criteria | Modality | Meeting Frequency and Format |
|--|--|---|--|
| Young Adult | Patients 18-40 with an active diagnosis or history of cancer with active follow up | Peer Support | Twice per month online |
| Meaning Centered Psychotherapy | Advanced Cancers (Stage IV) Existential Distress Anxiety | Meaning Centered Psychotherapy | -8 weekly sessions -4 to 5 cohorts per year -Stratified by age (<50 y/o, older adults) |
| Living with Cancer Skills | Moderate to Severe Distress | Dialectical Behavior Therapy | -Weekly for 10 weeks -2 – 3 cohorts per year |
| Bone Marrow Transplant and Immunotherapy Caregiver | Caregiver of a patient in active BMT or immunotherapy treatment | Short Presentation followed by Peer Support | Twice per month: One in person, one online |
| Metastatic Breast Cancer | Patients with metastatic breast cancer | Peer Support | Once per month, online |
| Men's Group | Male identifying patients in active treatment or survivorship | Peer Support | Once a month, in person |
| Expressive Art Therapy | Low PHQ and GAD scores, decreased coping | Peer support with art-based interventions | Weekly for eight weeks, online |

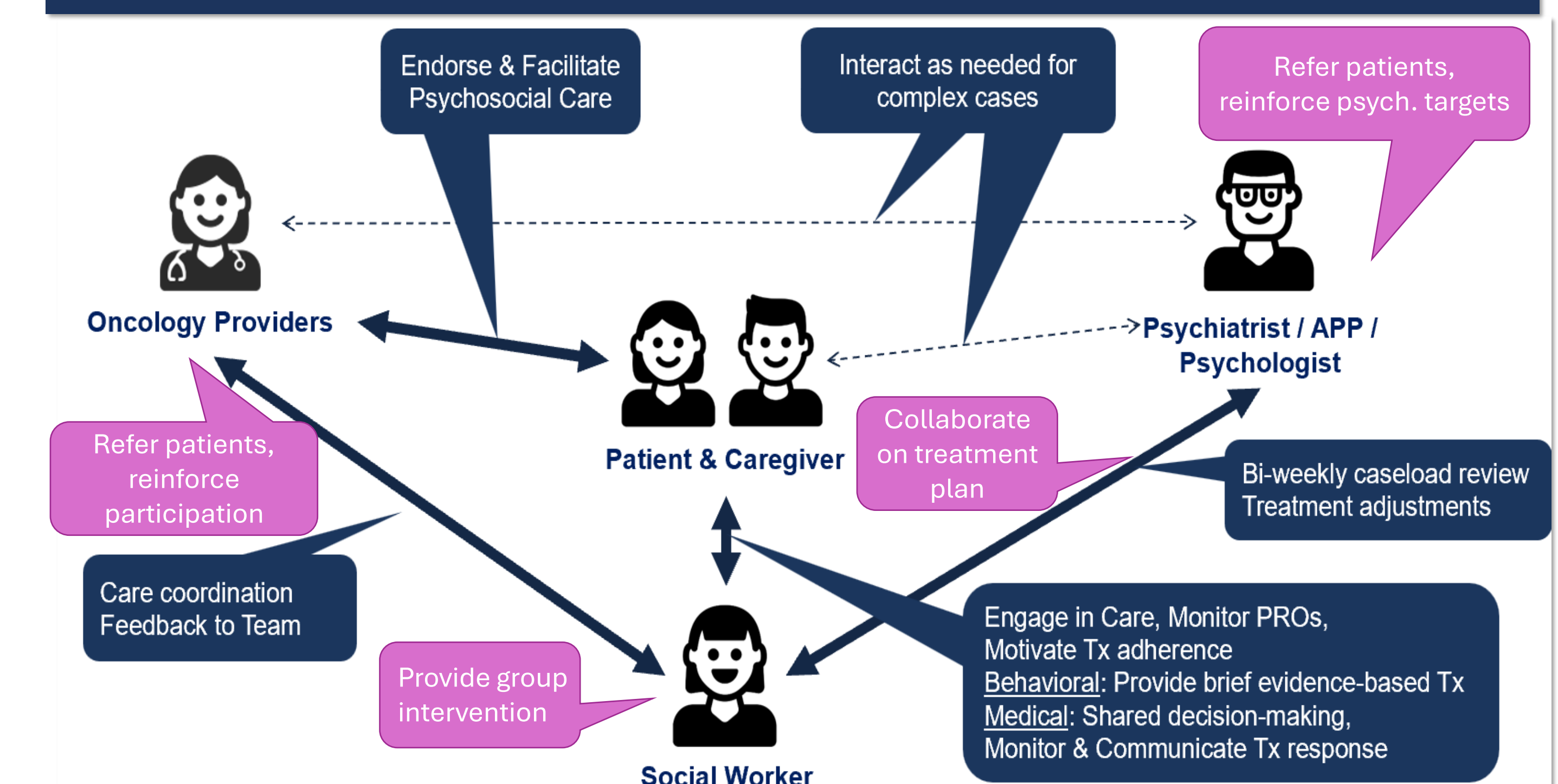
Elements of Creating a Group



Drivers of Success

- Collaborative Care Model allows for consistent referral base
- Trained Leaders and Co-leaders support longevity of group and deter burnout and stress
- Seek ongoing supervision
- Screening patients via phone or telehealth visit (vs MyChart) leads to increased attendance
- Use thorough screening protocols to ensure patients are receiving the appropriate level of care

Collaborative Care Model and Group Support: Referrals and Continuity of Care



CoCM Model allows for psychosocial treatment pathways that combine individual counseling, support groups and psychotherapy groups while creating opportunities for continuity and escalation of care, if needed.

Lessons Learned

- Continual marketing of groups is necessary- talk with staff and patients routinely about your group; work with marketing for clinic and website visibility.
- Understand your institution's stance on billable versus nonbillable services
- Don't forget to enroll your own patients!
- Track, track, track: Provide updates to your referral base and track attendance so you can evaluate your program
- Chart every group for every attendee to ensure visibility within the institution and for continuity of care.
- Don't do this alone! Develop co-leaders, and collaborate with other disciplines
- You will love running support groups- have fun!