Access to Care

Using eHealth to limit location-based barriers for patients with cancer

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BACKGROUND: Rural and urban communities may encounter barriers to care, which can lead to delays in timely screening, diagnosis, and treatment. eHealth interventions, such as televisits and remote patient monitoring, are being used increasingly to improve patient access to quality clinical cancer care and to support patient–provider communication.

OBJECTIVES: This article describes how eHealth can bridge gaps in patient access to cancer care and provides insight into successful eHealth program implementation.

METHODS: Articles that evaluate access to care and eHealth program implementation were summarized. Two case studies illustrate eHealth as a strategy to improve care delivery and access.

FINDINGS: Integrating eHealth into clinical practice can help to transform care delivery and improve patient access to quality cancer care by limiting barriers.

THE BROAD USE OF TECHNOLOGIES THAT COMPRISE eHEALTH is described using interchangeable terms, such as digital health, teleoncology, telehealth, telenursing, and televisits. eHealth has been defined as "a commitment for networked, global thinking to improve health care locally, regionally, and worldwide by using information and communication technology" (Shaw et al., 2017, p. e325). eHealth technology is becoming more accessible and sophisticated, which requires healthcare leaders to build a culture that supports its adoption and safe use. In addition to empowering patients to play an active role in their cancer trajectory, eHealth can provide improved access to care for patients and caregivers.

eHealth technologies, tools, and interventions can support the need for strong patient–provider communication throughout the cancer journey. The addition of real-time video (Shaw et al., 2017), remote patient monitoring (Castaneda & Ellimoottil, 2019), or electronic patient-reported outcome (PRO) surveys that can be completed outside the hospital setting (Daly et al., 2019) also create opportunities for patients to have their care monitored and delivered at home. eHealth can expand access to care beyond standard clinic or hospital face-to-face delivery models and allow for individualized, patient-centered care that addresses the needs of patients who are unable to travel to a cancer center or clinic because of time or limited resources. Providing expanded access to care during all stages of the cancer continuum can ensure that patients receive care that has the potential to optimize outcomes.

Barriers to Quality Cancer Care

Patients may require multiple and frequent interactions or visits with their healthcare team during the cancer trajectory, including diagnosis, care planning, treatment, symptom management, and palliative and end-of-life care. Experiencing travel burdens, having a lower socioeconomic status, and residing in either rural or urban areas can all negatively affect the ability of patients to access quality cancer care throughout the cancer continuum.

Travel Burden

Travel burden, or the burden of travel from a patient's residence to the work setting of his or her healthcare providers, is associated with a decreased likelihood of attaining appropriate cancer screenings, follow-up evaluations, and treatment adherence (Ambroggi et al., 2015; Lin et al., 2015; Massarweh et al., 2014; Schroen et al., 2005). Previous studies have demonstrated that travel burden can result in delays in diagnosis and influence patients' treatment options, which may also cause the healthcare team to be unable to provide