

# Geographic Health Disparities

## Satellite clinics for cancer care in rural communities

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**BACKGROUND:** Cancer treatment is time-consuming and challenging for most patients, but particularly for those who live in geographically isolated areas. Satellite chemotherapy infusion centers offer a possible solution to geographic disparities in health care.

**OBJECTIVES:** This article analyzes a satellite chemotherapy infusion center on the island of Martha's Vineyard in Massachusetts.

**METHODS:** Interviews were conducted with staff of the infusion department of Martha's Vineyard Hospital, which has partnered with the cancer center at Massachusetts General Hospital to offer a satellite chemotherapy infusion center for island residents.

**FINDINGS:** High-quality community hospitals are increasingly able to offer specialized oncology treatment and nursing care at greater convenience for patients through the use of satellite clinics.

### KEYWORDS

rural oncology; geographic disparities; critical access; satellite treatment

### DIGITAL OBJECT IDENTIFIER

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**THE ISLAND OF MARTHA'S VINEYARD, LOCATED SEVEN MILES** off the southern coast of Cape Cod, Massachusetts, illustrates the geographic challenges related to accessing oncology care and a possible satellite model solution to the provision of specialty services. As Johnson (2013) notes, geography is “the one thing that shapes every care decision, from the routine to the catastrophic” (para. 9). In particular, geographic isolation adds additional burdens to patients who require complex therapies.

Disparities in cancer care and patient outcomes are under a great deal of scrutiny as survival rates continue to improve for many cancers. Much attention has focused on cancer disparities related to race, ethnicity, and socioeconomic resources (National Cancer Institute, n.d.; Rivers, August, Sehovic, Green, & Quinn, 2013), but what has been overlooked is the significant role that geographic isolation plays in access to care and health outcomes for patients with cancer (Bolin et al., 2015; Burris & Andrykowski, 2010).

Geographic isolation is not limited to islands. Rural parts of the American Midwest, the Appalachian Mountains region, and the Alaskan frontier share similar burdens related to the provision of high-quality specialty care to residents. Multiple approaches exist related to easing the burden of obtaining quality cancer care while maximizing quality of life during treatment.

Satellite chemotherapy infusion centers are community-based outpatient treatment locations with shared resources that are housed at larger academic medical centers and are often located in more populous urban areas. Typically staffed by local and visiting clinicians, these are an increasingly popular solution to providing convenient cancer treatment to some patients. According to Drew, Cashman, Savageau, and Stenger (2006), visiting clinicians are non-primary care providers who have “a rural ancillary practice in addition to an urban/suburban primary base practice” (p. 294). The patients taking part in this arrangement benefit from being seen by a qualified provider who is familiar with the most up-to-date research and treatments, but patients do not have to travel for this care (Drew et al., 2006; Ward et al., 2014). Concurrently, the affiliated larger, urban academic medical center benefits from increased referrals for more invasive surgical procedures or higher-risk treatments that cannot be provided in the community setting.