Oncology Nurses: Leveraging an Underutilized Communication Resource in Cancer Treatment Planning

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Surgery → Inpatient Care → Chemotherapy → Radiation Therapy → Home Care
Objectives

1. **Describe oncology nurses’ role in cancer treatment planning communication.**

2. **Provide evidence for positive outcomes of oncology nurse communication during cancer treatment planning.**

3. **Propose opportunities to leverage oncology nurse-patient-family caregiver communication to enhance cancer treatment planning.**
Oncology nurses play a key role in effective, patient-centered cancer treatment planning communication

• **TRUSTED** - American citizens judge (oncology) nurses as the most trusted, honest, and ethical profession. *(2010 Gallup poll)*

• **PROVIDE Accessible, Expert Care** – Certified oncology nurses spend more time with patients and families than any other discipline.

• **DEMONSTRATE Positive Patient & Family Outcomes** – Systematic reviews document positive short and long-term benefits of oncology nurse communication.

• **UNDERUTILIZED in Cancer Treatment Planning** – Studies to date focus on ‘breaking bad news’ & prognosis. *(IOM Report: The Future of Nursing: Leading Change, Advancing Health 2010)*
Accessible / Expert Care:
Board-certified oncology nurses have more contact with cancer patients and their family than any other discipline.

Most of the 37,000 ONS members are Oncology Certified Nurses

Data Courtesy of the Oncology Nursing Society and the Oncology Nursing Certification Corporation
Accessible / Expert Care: Nurses spend 1-2 hours in patient communication during each cancer treatment.
A systematic review of 46 studies concluded:

1. Nurses' role as information providers for cancer patients is prominent, especially after the initiation of treatment,
2. Nurses are very effective in providing information,
3. No clear evidence exists on how nurses compare with other health-care professionals as information providers,
4. Some evidence exists that patients may prefer nurses as information providers at specific times in their treatment and especially in regards to symptom management.

Oncology Nurse Communication: Preparing for Cancer Treatment

- Patient and family information needs at beginning of cancer treatment:
  - Information about treatment process
  - Specific side effects
  - Impact of treatment on their lives

- Amount of information desired to feel prepared varies.
  - Prepare for “everything”---“avoid information about side effects”

- Obstacles to information:
  - Provider access and communication difficulties
  - Informational overload
  - Information retention

Oncology inpatients’ and family members’ most important needs during admission:

- Patients’ most important needs:
  - Information and communication about their medical care

- Family members’ most important needs:
  - Information and communication about medical care
  - Visitation
  - Specific discharge information

- Communication among caregivers was the pathway to trust and preparation for unknown future.

- Communication among patients, families, and nursing staff could be improved through intentioned conversations.

Oncology Nurses Communication:
Post-Surgical / Home Care

- 375 newly diagnosed patients with solid cancers (age 60 to 92) discharged after surgery

- Intervention:
  - Standardized nursing protocol including comprehensive clinical assessments, monitoring, and teaching, including skills training

- Results:
  - 2-year survival among late stage intervention group cases was 67% compared with 40% among control cases
  - relative hazard of death in the usual care group was 2.04 (CI: 1.33 to 3.12; P = .001) after adjusting for stage of disease and surgical hospitalization length of stay

• Family Caregivers: Roles & Challenges (PDQ®)
  ○ How to care for patient during cancer treatment
  ○ Planning for practical and financial concerns
  ○ How to talk to children about a parent with cancer
  ○ Self-care and avoiding ‘care giving fatigue’

http://www.cancer.gov/cancertopics/pdq/supportivecare/caregivers/healthprofessional

• (Nurse) Communication Interventions-Meta-analysis
  (29 RCTs from 1983- March 2009)
  ○ significantly reduced caregiver burden, improved caregivers' ability to cope, increased self-efficacy, and quality of life.

Oncology Nurse Communication: Treatment Planning for Patients Newly-diagnosed with Advanced Cancer

B. Oncology Care

C. Palliative Care

D. Other Specialists: Pain Service, GI, Rad. Onc, Surgery

E. Hospice & Bereavement Care

A. Primary Care

Diagnosis

Cancer Treatment Planning

Patient Activation

Delivery System / Decision Support

Problem-solving/Contextual Counseling

Follow-up/Coordination

Goal Setting

Goals of phone-based nurse Coaching / communication

Community Resources and Policies

Self-Management Support
*Pt Education*

Health System Organization of Health Care

Delivery System Design
*Pt centered care*

Decision Support

Clinical Information Systems
*Electronic Comm, EMR*

**ENABLE INV**

ADV CA
*Pts/Caregiver*

Informed, Activated Patient & Family

Productive Interactions

NCCC Clinicians
*Prepared, proactive Practice Team*

Improved outcomes for patients and families

QOL, SX, Depression, Cost

Chronic Care Model Adapted for ENABLE 3  Wagner, E. (1998)
Communication at initiation of cancer treatment can influence quality of life and mood through the end-of-life.

\[(mean \ [SE] \ 4.6 \ [2]; \ P=\ .02)\]

Effects of a Palliative Care Intervention on Clinical Outcomes in Patients With Advanced Cancer
The Project ENABLE II Randomized Controlled Trial

Communication at initiation of cancer treatment may influence survival outcomes.

Median survival 8.5 vs. 14 mo. >5.5 mo survival

Effects of a Palliative Care Intervention on Clinical Outcomes in Patients With Advanced Cancer
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Bakitas, et. al. JAMA 2009;302:741-749
Oncology Nurse Communication: Use of Technology in Cancer Treatment Planning

- **Telephone Counseling and F/U**
  - Convenient for patients, provided continuity of care, more 'normal' than attending hospital outpatient clinics.

- **Interactive Voice Response - Automated Telephone Symptom Management (ATSM) intervention**
  - Faster response to symptoms and referral than phone-based.

- **Computer-based Pt-reported symptoms / quality-of-life issues (SQLIs)**
  - Increased discussion of symptoms during appointments.
Oncology Nurse Communication: Patient & Family Outcomes

- May prevent devastating outcomes of treatment side effects (possibly patient survival).

- Improves quality of life, mood, coping.

- Provides continuity of care across settings.

- Communication at initiation of treatment can influence the remainder of the treatment trajectory.
Strategies to Leverage Oncology Nurse Communication in Cancer Treatment Planning

- Develop cancer treatment planning guidelines that make oncology nurse pre-treatment ‘information prescriptions’ explicit & mandatory.

- Prepare nurses for ‘intentioned’ conversations (e.g. ELNEC).

- Expand the use of interactive, phone, and web-based strategies for oncology nurse communication, especially in the established areas of treatment preparation & symptom management.