

Improving Care for Patients With Advanced Non-Small Cell Lung Cancer: Findings of Oncology Nurses and Navigators From a National Care Optimization Survey

Jennifer Aversano, MSN, RN, OCN, BMTCN¹; Leigh Boehmer, PharmD, BCOP²; Alexander Spira, MD, PhD³

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¹Advocate Lutheran General Hospital, Park Ridge, Illinois, USA; ²Association of Community Cancer Centers, Rockville, Maryland, USA;

³Virginia Cancer Specialists, US Oncology Research, Johns Hopkins Medicine, Fairfax, Virginia, USA

INTRODUCTION

- Oncology nursing and patient navigation are critical functions on multidisciplinary teams (MDTs) and help to improve patient outcomes¹⁻³
- In 2019, the Association of Community Cancer Centers (ACCC) and its partners implemented a multiphase initiative for non-small cell lung cancer (NSCLC)—*Fostering Excellence in Care and Outcomes in Patients with Stage III and IV NSCLC*
 - The ACCC National Quality Survey was designed to understand how patients with advanced NSCLC are diagnosed and managed by MDTs, to inform future process improvements that will support ideal NSCLC care delivery

OBJECTIVES

- To investigate coordination and communication within oncology MDTs for patients with stage III/IV NSCLC
- To evaluate baseline understanding of evolving standards for diagnosis and treatment
- To identify barriers to optimal care in community cancer programs/practices

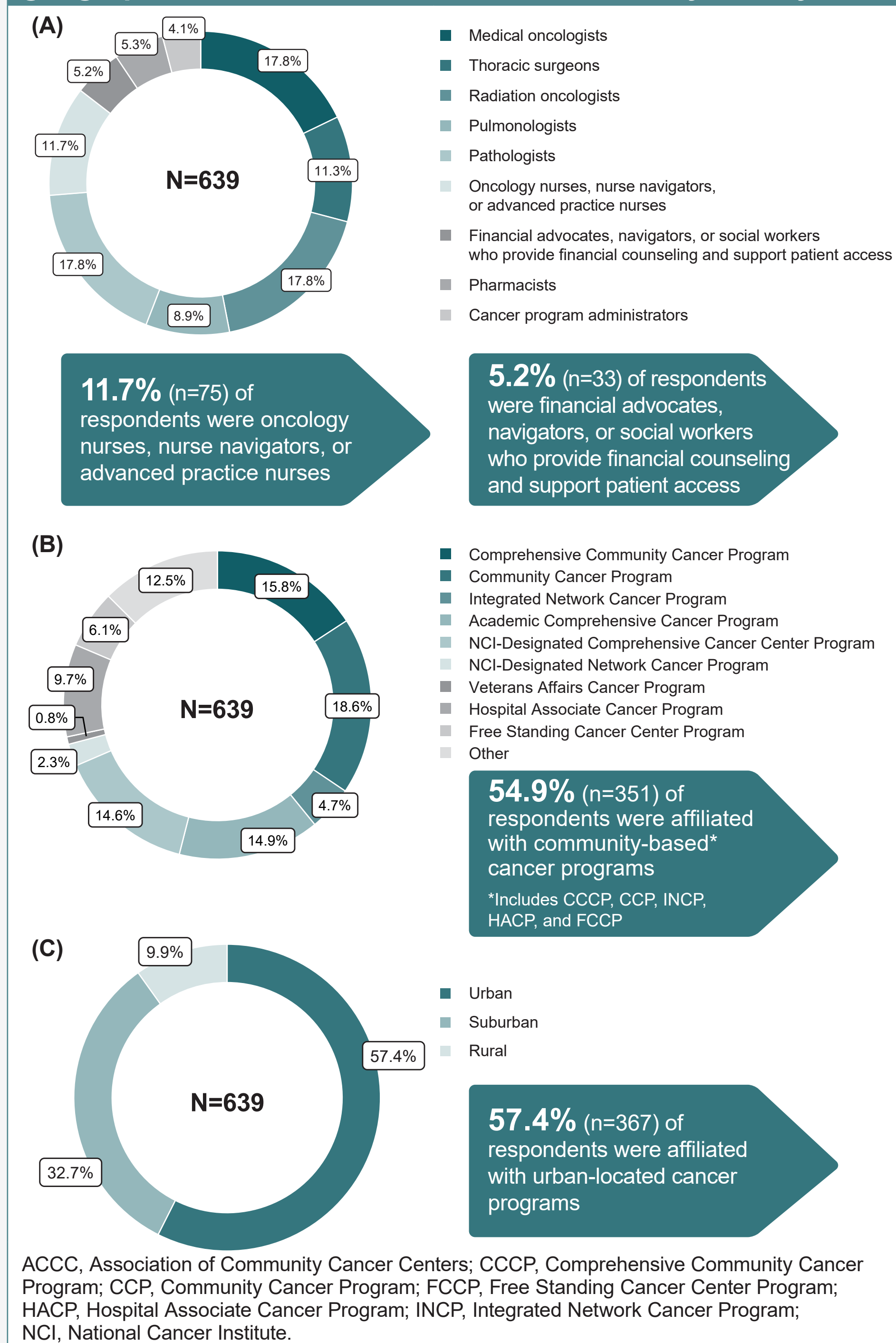
METHODS

- Oncology MDT members, including oncology nurses and patient navigators, at U.S. cancer programs participated in a national, double-blind, online survey between January and April 2019
- Subanalyses were performed to examine NSCLC care delivery practices relevant to oncology nurses and patient navigators
- Research Question 1:** To what extent does the presence of a patient navigator differ by geographical area and cancer program type?
- Research Question 2:** To what extent are formal health literacy assessments used by the presence or absence of patient navigators?
- Research Question 3:** To what extent are there differences in shared decision-making (SDM) by the presence or absence of oncology nurses or patient navigators?
- Research Question 4:** To what extent are there relationships between time to receipt of the first treatment modality and difficulty in obtaining prior authorization from health insurance companies for biomarker testing and treatment?

RESULTS

- Among 1,211 survey respondents, 639 complete responders from 160 unique cancer programs across 44 U.S. states were valid for analysis (**Figure 1A–C**)

Figure 1. (A) Profession, (B) cancer program type, and (C) geographical area in the ACCC National Quality Survey



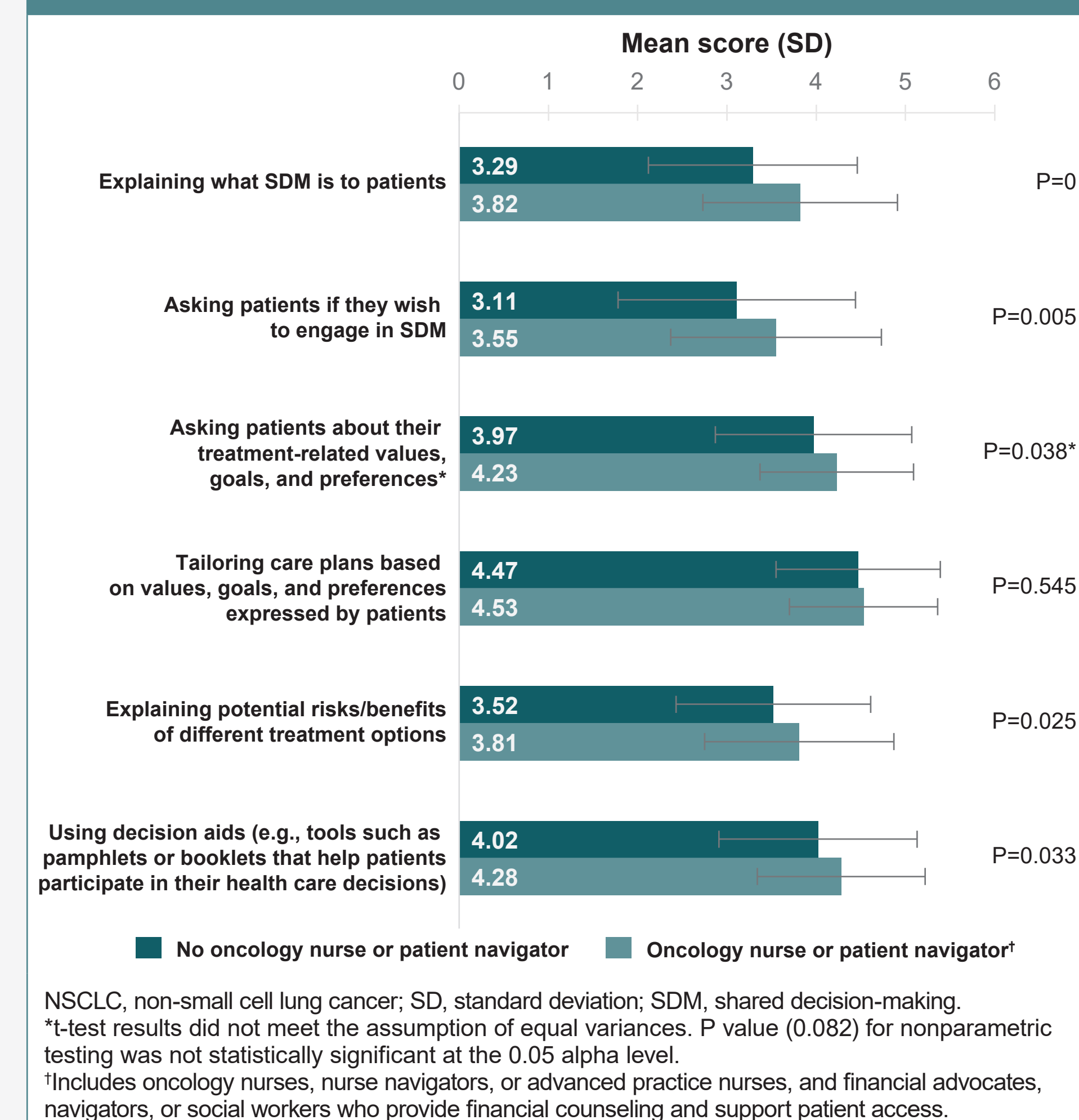
Key Findings

22.3% (n=101) of respondents had neither nurse navigators nor lay navigators in their cancer programs to assist patients with NSCLC

90.1% (n=100) of respondents worked in cancer programs with no formal health literacy assessments for patients with NSCLC

- Research Questions 1 and 2:** No significant associations were observed
- Research Question 3:** Significantly higher mean scores (P<0.05) for most elements of SDM were observed in cancer programs with oncology nurses or patient navigators compared with programs without oncology nurses or patient navigators (**Figure 2**)

Figure 2. Association between presence of oncology nurses or patient navigators in cancer programs and elements of SDM



- Research Question 4:** No significant relationships were observed

CONCLUSIONS

- Navigation services need to be expanded so that all patients may benefit from individualized assistance along the NSCLC care continuum
- The overwhelming lack of formal health literacy assessment use, which can restrict the ability of patients to participate in their care and treatment decisions, can be addressed through the increased involvement of patient navigators
- Oncology nurses and patient navigators should be strategically integrated within lung cancer MDTs
- Navigators can significantly help decrease the provider burden of SDM by assisting with education, assessment of patients' understanding and true informed consent, etc.
- These findings can inform future process improvements for ideal NSCLC care delivery

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CONFLICT OF INTEREST

- The authors do not have any conflict of interest to disclose

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