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

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Abstract # 7765

INTRODUCTION

Oncology nursing and patient navigation are critical functions on multidisciplinary teams (MDTs) and help to improve patient outcomes.1 In 2015, 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 individual 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 cancer community 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 research questions 1 and 4.
Steering Committee: David Spigel, Jennifer Aversano, David Feller-Kopman, Percy Acheson, Andrea Ferris (LUNGevity) and Nikki Martin (LUNGevity).
Data analysis services: Elite Research, LLC.

RESULTS

Among 1,211 survey respondents, 639 complete responders from 160 unique cancer programs across 44 U.S. states were available for analysis (Figure 1A–C). Table 1 shows the percentage of respondents who provided financial counseling and support patient access.

<table>
<thead>
<tr>
<th>Category</th>
<th>Percentage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Oncology nurses</td>
<td>77.2%</td>
</tr>
<tr>
<td>Nurse navigators</td>
<td>94.9%</td>
</tr>
<tr>
<td>Advanced practice nurses</td>
<td>91.1%</td>
</tr>
<tr>
<td>Financial advocates, navigators, or social workers</td>
<td>70.9%</td>
</tr>
<tr>
<td>Pharmacists</td>
<td>6.7%</td>
</tr>
</tbody>
</table>

Table 1. Percentage of respondents who provided financial counseling and support patient access.

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

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

<table>
<thead>
<tr>
<th>Element</th>
<th>Mean score (SD)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Explaining what SDM to patients</td>
<td>3.95 (0.82)</td>
</tr>
<tr>
<td>Asking patients if they want to engage in SDM</td>
<td>3.34 (0.92)</td>
</tr>
<tr>
<td>Asking patients about their treatment-related values, goals, preferences*</td>
<td>3.92 (0.87)</td>
</tr>
<tr>
<td>Talking care plans based on values, goals, and preferences expressed by patients</td>
<td>3.75 (1.12)</td>
</tr>
<tr>
<td>Explaining potential implications of different treatment options</td>
<td>3.54 (0.96)</td>
</tr>
</tbody>
</table>

Table 2. Mean scores of elements of shared decision-making (SDM).

Key Findings

22.3% (n=101) of respondents had neither nurse navigators nor financial advocates involved in their cancer programs to inform patients with NSCLC.

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

Table 3. 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 and patient navigators compared with programs without oncology nurses or patient navigators (Figure 2).

Table 4. Research Question 4: No significant relationships were observed.

CONCLUSIONS

Nurse navigators and patient navigators should be strategically integrated within lung cancer MDTs.
Nursing services and patient navigators should be strategically integrated within lung cancer MDTs.
Nursing activities and patient navigators should be strategically integrated within lung cancer MDTs.

REFERENCES

1. Oncology Nursing Society (ONS) 45th Annual Congress; April 29–May 3, 2020, San Antonio, Texas

FUNDING

This project was funded by AstraZeneca.

CONFLICT OF INTEREST

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

ACKNOWLEDGMENTS

This initiative is a partnership with the American College of Chest Physicians (CHEST), the International Association for the Study of Lung Cancer (IASLC), and LUNGevity.

The authors are grateful for the contributions of:

Steering Committee: David Spigel, Jennifer Aversano, David Feller-Kopman, Percy Acheson, Nicholas Robert, Ravi Salgia, Michelle Shiller, Mark Socinski, Alex Spira, Brenda Stiles, Karen Van De Streek, and Howard (Jack) West

Patient advocacy partners: Andrea Ferris (LUNGevity) and Nikki Martin (LUNGevity)

Survey methodology experts: Matthew Smelzer (The University of Memphis) and Anne E. Mahar (Davis Research Corporation)

Data analysis services: Elite Research, LLC.

This initiative is a partnership with ACCC National Quality Survey respondents for their valuable insights on care delivery for patients with stage IV NSCLC.

Identical writing and graphic design services for this poster were provided by Melissa Furudio and Priyanka Gokaldes of Cedarc Life Sciences (part of Cedarc Communications) and contracted and compensated by AstraZeneca.