

CHAPTER 1

Strengthening Our Capacity for the Future of Oncology Care

*Cynthia Cantril, MPH, RN, OCN®, CBCN®, and
Deborah M. Christensen, MSN, RN, AOCNS®, OCN®*

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Overview

Over the past decade, much work has been accomplished to articulate, validate, and promote professional oncology nurse navigation. There has never been a more exciting time for those who have chosen this extraordinary and exciting specialty. The work of oncology nurse navigators (ONNs) is more important than ever, given the prediction that the number of new cancer cases will rise from 1.735 million in 2018 to 2.387 million in 2035 (American Association for Cancer Research, 2018). As newer research discoveries continue to play a role in decreasing overall cancer death rates, advances against cancer have not benefited everyone equally, as certain portions of the population (African American women and those of lower socioeconomic status, for example) bear an unequal burden. Oncology nurses have a moral, ethical, and professional commitment and capacity to narrow this gap through advocacy and professional practice. To meet the challenges of the future, the focus now is to build and sustain high-performance oncology teams that are resilient, innovative, and patient-service focused. These efforts include using ONNs as an integral part of these teams. This chapter will discuss the current reality of oncology provider and patient challenges and describe how establishing high-performance teams can support a resilient oncology careforce.

Current Reality of Cancer Care

According to the American Society of Clinical Oncology, by 2020 a shortfall of oncologists (2,500–4,000) will occur because of an aging

workforce and limited training programs (Leon-Ferre & Stover, 2018). However, cancer incidence and survival rates will continue to climb, dictating the need for an acceleration in survivorship care (Leon-Ferre & Stover, 2018).

Oncology care providers are flooded with new technologies, drugs, and treatment protocols, with an emphasis on personalized genetic and molecular information. Other challenges and pressures affecting the workforce are regulatory, accreditation, and quality and safety performance guidelines and requirements. The abundance of literature and rapid new cancer treatment developments further complicate oncology care providers' ability to assimilate and apply emerging therapies and information. Essentially, amid the need to manage and integrate more information, technical advances, and patient care, all at a seemingly faster speed, the oncology careforce is at risk of not being able to sustain the level of practice and quality care that great providers strive to achieve.

Patients experience a similar “data overload” between the information made available on the Internet, posted on social media, and given to them by friends and families, while at the same time seeing anywhere from three to more than six oncology specialists. Patients report feelings of fear, anxiety, and stress affecting their ability to cope. Financial toxicity is an ever-increasing burden and challenge for patients and families. Patients fear getting lost in the system and having their needs go unmet. Practical and existential questions spanning from “Where do I park?” to “Am I going to die?” are heard daily (Cantril, 2019).

The overwhelming feelings experienced by clinical specialists and patients alike open the path for the unique and important role of ONNs, who often are the single most important contact for patients and families as they traverse the continuum of oncology care and life after cancer treatment. ONNs can fill the critically important role of assisting and guiding patients and families to resources, making sense of the maze of information, and assisting in decision making. Advanced care providers should not be required to focus on such a broad experience, nor do most have the time and practical resources to do so.

Exploration

Needs and Goals for the Future

The adage of “it takes a village” illustrates how high-performance teamwork is needed to accomplish optimal patient care. The patient

experience is affected by oncology teams' ability to work together effectively. Quality healthcare delivery relies on professional caregivers' effective collaboration and communication on behalf of and with patients. The complexity of cancer care often involves patients engaging with various team members across multiple institutions, often while remaining in cycling states of fear and uncertainty, experiencing physical discomfort, and managing the everyday practical issues that arise from the life disruption of a cancer treatment.

The need for a role to address the “high emotion” state (Berry, Davis, & Wilmet, 2015) of cancer was poignantly described by Burgess (2009), who wrote a compelling and emotional story of how difficult it was to feel “abandoned by the medical system, at the time in my life when I most needed a guide” (para. 18). As she alluded to, emotional triggers can be proactively recognized and addressed to better serve patients. Berry et al. (2015) described Bellin Health Cancer Services' success in improving patient satisfaction and confidence through optimizing program performance and team cohesion by:

- Identifying emotional triggers
- Responding early to intense emotions
- Enhancing customers' control
- Hiring the right people and preparing them for the role

Oncology navigation is well suited to help patients address their emotional state throughout the cancer trajectory. Navigation needs to be recognized as a critical aspect of sustainable, high-value, patient-centered cancer care and a critical foundation for support of patients and providers.

A comprehensive joint survey by the Association of Community Cancer Centers and the Oncology Roundtable highlighted questions in several areas of oncology care (Association of Community Cancer Centers, 2019). Of the 205 oncology provider responses related to supportive care, the roles of navigation and psychosocial counseling were clearly valued. In fact, nurse navigation was the most popular supportive care staff addition cited by survey respondents. Yet, consistent adoption, application, standardization, and understanding of the role vary (Cantril, Christensen, & Moore, 2019), creating differing levels of appreciation for the role throughout the healthcare system.

Navigators as Members of High-Performance Teams

Whereas a *group* consists of people sharing a common purpose, a *team* meets a common goal using a distinct set of rules, with team members having clearly defined roles. A *high-performance team*, the crème de la crème of teams, is a “cohesive team with a shared vision, commitment to shared processes and outcomes, interdependent, with comple-

mentary skills, strong lines of communication, mutual trust and respect, high emotional intelligence, and a shared leadership structure” (Carlson, 2019, “Definitions” slide). Defined roles and respect in a culture of flexibility are also important aspects of high-performance teams (Carlson, 2019).

Navigating patients with cancer requires a multiple-team approach in which the ONN role serves as the hub that connects and coordinates activities on patients’ behalf. For example, at each phase of care, the ONN may perform the following:

- Partner with patients and families to keep them informed, facilitate shared decision making, effectively address any barriers to care, provide pertinent education, and manage patient expectations
- Collaborate with physicians and healthcare providers to assist in implementing the care plan
- Coordinate with other departments to ensure timely access and care
- Team with local and national organizations to provide patient and family resources

Teaming refers to the interactive behaviors, communication, and actions of people working together. When performed effectively, the interactions of the ONN and interprofessional teams fit within the definition of *mindful teaming*: mindful teaming “involves paying attention to how, when, and why we share information, cooperate, and coordinate our work as well as to when and how we might offer backup, reflect on and learn from our performance, build a climate of mutual respect and trust, and develop a common understanding of key interdependencies” (Weaver, 2016, p. 977).

High-performance teams rely on clear channels of communication among their members. When the role of the ONN is fully understood and effectively implemented, the ONN acts as a specialized communication channel among patients, families, and the entire oncology team. Furthermore, building high-performance teams requires all levels of management and administrative support. ONNs can support the development of high-performance teams and realize the benefits of mindful teaming by the following:

- Modeling the individual characteristics of a high-performance team member
- Encouraging other team members to perform at a high level
- Promoting oncology certification and professional development
- Instigating team-building activities
- Advocating for team trainings

Weaver (2016) noted that members of high-performance teams demonstrate increased productivity and personal satisfaction and, importantly, have less burnout and greater resilience.

Creating a Resilient Careforce

The ongoing and personalized relationships that develop between oncology team members and the people they serve can lead to compassion fatigue, burnout, and stress. Therefore, the need to build high-performance teams and create resiliency in the oncology careforce has never been more needed than now.

The stress and burnout associated with nurses in general are compounded by the lived experience of being a witness to another's suffering. Resiliency, the ability to “bounce back” from hardship, is often manifest in patients with cancer and helps them continue to face the mental, physical, and practical challenges of dealing with cancer. The more resilient team members are, the easier it will be to foster mindful team characteristics.

Working within the culture of a stress-resistant and resilient oncology careforce yields increased flexibility and potential to implement change with minimal resistance. Innovative solutions, new technology, and ever-changing treatment paradigms require the oncology careforce to develop skills in adaptation and resiliency. Action planning is one such skill that can be used organizationally and personally to foster resiliency.

Developing a resiliency action plan can help institutions and teams prepare for current and future healthcare innovations. Action plans address questions such as where are we now, where do we want to be, how will we get there, and how will we recognize and measure success. The following sections review these questions as they relate to the information presented in this chapter, including both organizational and personal examples.

Developing an Organizational Resiliency Action Plan

Where are we now? Cancer care is becoming even more complex as new technologies and innovative solutions flood the market. Patients, caregivers, and providers are facing data overload and the financial implications of new treatment paradigms. The ONN role is not being fully utilized nationally even though the role can significantly help patients and families navigate the information maze and overcome financial and other barriers to care.

Where do we want to be? Patients and providers will have support in facing the tidal wave of issues brought on by cancer and its treatment. ONNs will be fully recognized as an innovative solution and integral member of high-performance teams addressing the current state of cancer care delivery. The team will consistently exhibit clear and effective communication, conflict resolution, personal accountability, and mutual trust.

How will we get there? Roles of the ONN and other team members will be clearly identified, considering the highest capability and licensure of each member while instilling flexibility and team support. The value

of the ONN will be supported by capturing data showing improvements that coincide with navigator involvement.

How will we recognize and measure success? Success can be measured by surveying internal careforce members (physicians, nurses, internal staff) and patients and analyzing established metrics for success at set intervals.

Developing a Personal Resiliency Action Plan

Where am I now? I tend to immediately react and try to solve problems and conflict before learning all the details.

Where do I want to be? I want to take the time to understand the situation and partner with my team members to resolve the issue.

How will I get there? I will enroll in and complete a communication course offered by my institution and discuss my action plan with my manager. I will inform my team that my intention is to be a part of a mindful team and that I will be communicating with them about my efforts.

How will I recognize and measure success? I will journal my interactions with team members and recognize an increase in my ability to effectively address perceived conflict. I will ask for planned intervals of feedback from my manager and coworkers about our progress toward meeting our agreed-upon goals.

The Relationship Between Self-Care and Resiliency

Being resilient at work and in daily life requires a certain degree of self-care: the practice of participating in actions that attend to one's personal health and well-being. Standard self-care practices include eating healthy, participating in exercise, and getting adequate rest. Massage, meditation, yoga, and journaling are additional activities people use to decrease stress and build resiliency. Finding ways to decompress during the workday is also important. Self-care can include participating in employee assistance programs and wellness courses offered by employers or available in the community or online.

Given the constantly changing and complex state of cancer care, members of the careforce—including ONNs—need to adopt resiliency practices, fortifying their ability to better care for patients and families and function as a high-performance team.

Summary

The oncology care landscape—including providers, patients, families, and healthcare organizations and systems—faces the almost daily chal-

lence of being inundated with new information, therapeutics, and innovations. However, these are exciting times as well. As more research validates the critical role of ONNs in patient-centered care, more emphasis can be placed on assurance of the ONN role within high-performance teams. To create these teams, ONNs and other members of the clinical care team need to find ways to maintain resilience and sustainability as they care for an ever-growing population of newly diagnosed patients and survivors. The best is yet to come for the oncology nurse navigation community and the patients they are honored to serve.

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