

# Trialing an Evidence-based Role for Nursing: Oral Oncolytic Nurse Navigator

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## Background

In a growing number of health care systems, the nurse navigator role is becoming an integral part of the interprofessional team that oversees care for patients with complex medical conditions. Patients receiving high-risk intravenous chemotherapy for cancer treatment may have an advanced practice nurse navigator, but few health care systems have a registered nurse (RN) navigator for patients receiving oral oncolytic therapy.

## Purpose

Design, implement and evaluate a nurse navigator role for patients receiving oral oncolytics (OONN) in one large teaching hospital that was part of a state-wide health care system. No such role existed in the state-wide system prior to the initiation of this project.

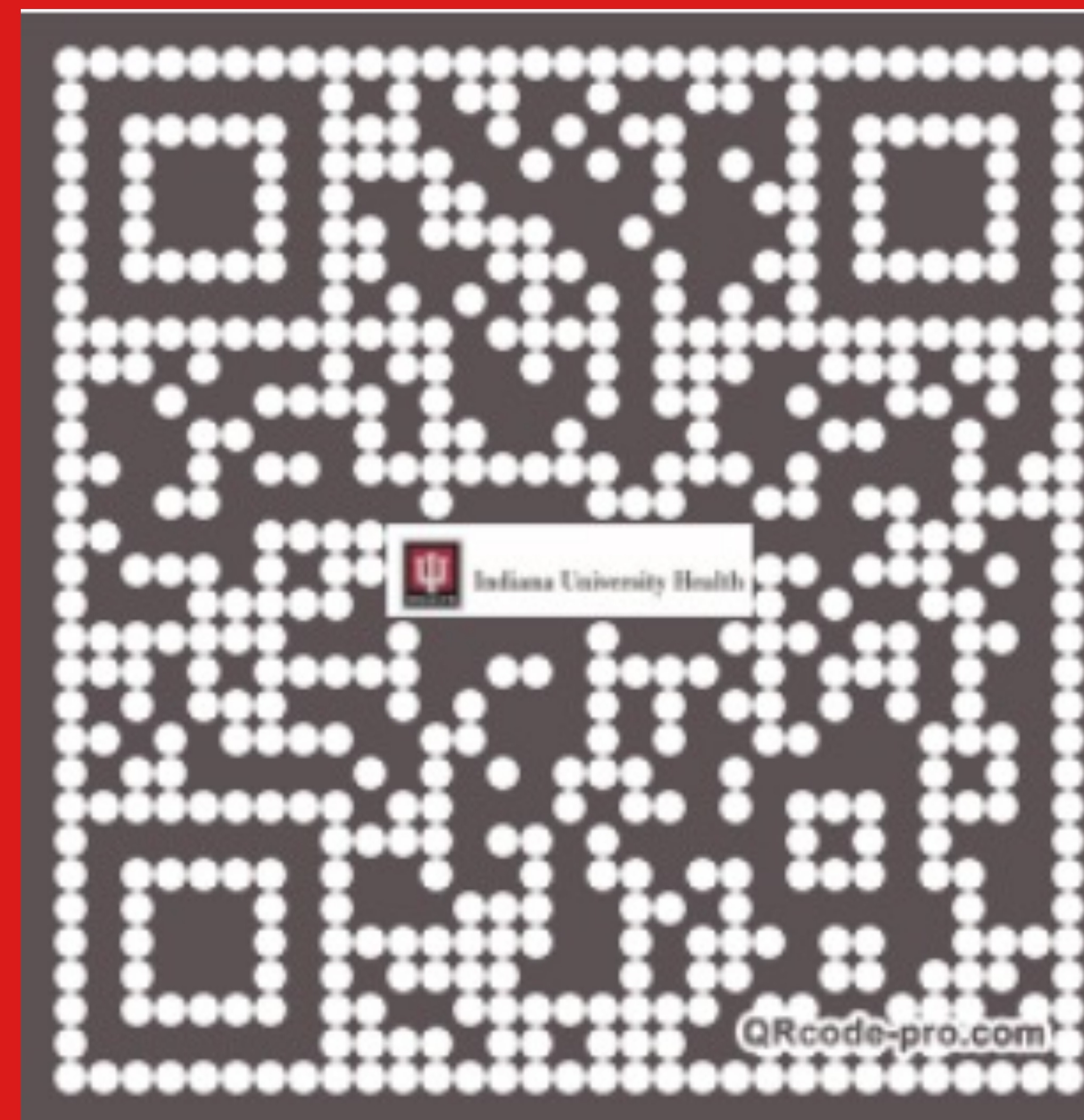
## Method

Published evidence and competencies from professional oncology organizations shaped the specific nursing activities within the role.

- Standardized assessment intake and schedule for follow up phone calls created
- Pharmacological science provided monitoring guidelines for chemotherapeutic toxicity
- OONN assessed for toxicities with routine follow up with patients.
- Barriers to receiving initial doses of therapy, such as insurance problems and delivery delays, were quickly remedied by the OONN.
- The OONN role drew on many autonomous nursing skills, including wholistic assessment skills, formation of therapeutic relationships, skilled communication, ability to personalize education, problem-solving barriers to care, and coordination of care with interprofessional teams.



**Evidence-based Oral Oncolytic Nurse Navigator role successfully designed and implemented, with early indications of effectiveness in preventing patient harm and enabling patients to complete cancer treatment.**



## Results

Case load for the OONN quickly climbed to over 200 patients, with approximately 25 new patients admitted to the caseload each month.

- By the end of second quarter 2021, a major metric was achieved when no oral oncolytics were discontinued because of toxicity, due to early detection and management of adverse events by the OONN.
- Over 90% of patients received education from the interprofessional team, with reinforcement from the OONN.
- Over 95% of patients received initial doses of medication in a timely manner
- Informal feedback from patients and families reflected high satisfaction with the support received from the OONN.

## Conclusion and Implications for Practice:

The evidence-based OONN role was successfully designed and implemented, with early indications of effectiveness in preventing patient harm and enabling patients to complete chemotherapy. Future outcome measures will include patient and family surveys to document satisfaction with the OONN support and suggestions for additional development of the role.

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