

Chemotherapy Education

An interprofessional approach to standardizing processes and improving nurse and patient satisfaction

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BACKGROUND: A lack of standardization in chemotherapy patient education practices can lead to decreased efficiency and satisfaction for nurse educators and uncertainty and anxiety for patients.

OBJECTIVES: The goal was to determine whether standardizing chemotherapy education practices improved nurse and patient satisfaction.

METHODS: An interprofessional team was formed to standardize the chemotherapy education process and reduce variation in teaching. Anonymous, self-administered questionnaires assessed satisfaction in chemotherapy education among nurses and patients pre- and postimplementation.

FINDINGS: Significant improvement in nursing staff satisfaction postimplementation was observed across all individual construct measures, with the average overall score increasing from 3.4 to 4.3. Patient satisfaction scores were high in the pre- and postimplementation phases (average overall score of 4.3 and 4.1, respectively).

KEYWORDS

standardization; chemotherapy; education; nurse; quality improvement

DIGITAL OBJECT IDENTIFIER

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THE LACK OF STANDARDIZATION IN CHEMOTHERAPY EDUCATIONAL practices can lead to inefficient and ineffective education for individuals preparing for chemotherapy and may contribute to dissatisfaction among patients and nursing staff. Chemotherapy education is typically provided to patients prior to the first infusion or oral treatment during an individual session with a primary clinic nurse. Each nurse has a unique approach to chemotherapy education, and multiple tools and resources are available to educate patients. Therefore, marked variation exists in the chemotherapy educational process, and there is broad recognition that patients may not be consistently prepared to initiate chemotherapy. In addition, nurses have described inefficient chemotherapy education processes, with an unsustainable amount of time spent preparing patients for chemotherapy.

Eliminating variation in processes can reduce waste and improve system efficiency and overall quality (Langley et al., 2009). For example, standardizing chemotherapy education practices through detailed planning of educational content and training for oncology clinic nurses has been linked to improved patient satisfaction, increased knowledge of side effects related to chemotherapy, and increased efficacy of nursing staff regarding time and quality of care provided to patients (Dalby et al., 2013; Thompson, Silliman, & Clifford, 2013). Standardizing chemotherapy education can also better prepare patients to manage their side effects and develop coping skills, compared to informal education (Portz & Johnston, 2014; Thompson et al., 2013), and may result in decreased patient anxiety. In addition, developing standardized pathways in cancer care can not only improve satisfaction but also may reduce cancer care costs and improve quality (Scott, White, & Roydhouse, 2013).

For this project, an interprofessional clinical team developed a standardized approach to chemotherapy educational processes with the goal of improving the effectiveness and efficiency of chemotherapy education and patient and nurse satisfaction. Using checklists, video tools, simplified educational materials, and a group chemotherapy education class, the standardized process improves easy access to information and implementation of different communication modalities (Lock & Willson, 2002; Mueller &