

Nurse Navigation: Mapping the Route

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"No person with cancer should have to spend more time fighting their way through the cancer care system than fighting their disease." Dr. Harold Freeman



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History of Nurse Navigation

- ▶ The concept of nurse navigation was first explored through a program led by Harold P. Freeman, MD in Harlem, New York in the 1990's.
- ▶ The goal of the program was to reduce the high death rate in poor African American women with breast cancer by eliminating barriers to timely care between the point of suspicious finding and the resolution of the findings by diagnosis and treatment.



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Definition of Nurse Navigator

- ▶ Lilly Shockney 2-time breast cancer survivor and Director of John Hopkins Cancer Survivorship Program prior to her retirement in November 2018, defines a Nurse navigator as:

"Someone who is the patient advocate. This includes being there for the patients to educate them about their disease and its treatment, empower them with information so that they can actively and confidently participate in the decision-making process of their care, identify barriers to care and treatment, provide resources to overcome those barriers, and facilitate coordination of care."



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Definition of Nurse Navigator

- ▶ **Genesis Health System** (Genesis Cancer Care Institute) definition: "A nurse navigator will guide your way through your cancer journey. They will be a one-on-one contact person, resource and guide; educate and communicate so that patients and families understand their treatment options or what their treatments, tests or procedures mean; and help throughout the entire course of treatment and even after treatment has ended."
- ▶ Nurse Navigators care for patients on a global level. They see the patient through the entire continuum of care. Starting with screenings and preventative care through diagnosis, treatment, and survivorship.



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Nurse Navigator Certification

- ▶ Covenant HealthCare has 2 breast nurse navigators, 1 thoracic nurse navigator and 1 GI nurse navigator with 90 years combined nursing experience.
- ▶ All of Covenant HealthCare's nurse navigators are agency certified:
 - ❖ Certified navigator-Breast Nurse (CN-BN) via The National Consortium of Breast Centers, Inc.
 - ❖ Oncology Certified Nurse (OCN) via the Oncology Nursing Certification Corporation
 - ❖ Oncology Nurse Navigator-Certified Generalist Thoracic (ONN-CG(T)) via the Academy of Oncology Nurse & Patient Navigators
 - ❖ Certified Breast Care Nurse (CBCN) via Oncology Nursing Certification Corporation



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- ▶ Lay navigators are present in some programs, but training varies greatly. Their scope of practice is limited.
- ▶ Training and certification ensure the education and instruction provided is accurate and in line with your facilities guidelines, regulations and national standards of care.



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Nurse Navigator Certification

- ▶ Navigator programs are now supported by the government and are even required by accrediting associations such as the American College of Surgeons Commission on Cancer (COC) and National Accreditation Programs for Breast Centers (NAPBC).
- ▶ Covenant HealthCare's Cancer Program has obtained and maintained accreditations with the COC since 2007 and NAPBC since 2011.
- ▶ Since the 1990's the role of the nurse navigator has expanded into all stages of cancer care from prevention through survivorship.



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Role Responsibilities of the Nurse Navigator

- ▶ Provide pre-operative instruction class and/or a resource visit to each breast cancer patient as well as their caregiver and family
 - ❖ Weekly classes held to education patients on surgical experience and post op care
- ▶ Education on disease process
 - ❖ Review pathology results
- ▶ Reinforce Treatment Plans
 - ❖ Discuss side effect management
- ▶ Increase patient, family and clinician satisfaction
 - ❖ Individualized care and support



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Role Responsibilities of the Nurse Navigator

- ▶ Facilitating appointments
 - ❖ Ensuring timely referrals such as:
 - ✓ abnormal mammogram (BIARDS4/5 to biopsy), surgical referral, medical and radiation oncology appointments, Medi-port insertion, etc.
- ▶ Distress Screening
 - ❖ Offer support regarding treatment barriers; transportation, financial concerns, physical and psychosocial complications.
 - ❖ Provide psychosocial support
 - ✓ facilitating support groups, 1:1 visits during treatment and phone calls



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Role responsibilities of the Nurse Navigator

- ▶ Measuring patient outcomes
 - ❖ Implementing and monitoring NAPBC guidelines for care
- ▶ Quality improvement
 - ❖ Tracking timeliness of care
 - ❖ Conduct studies for the COC and NAPBC accreditation
- ▶ Weekly Tumor conference
 - ❖ Facilitate and transcribe weekly breast tumor board
 - ❖ Collaborate with Tumor Registry to report institutional data



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Role Responsibilities of the Nurse Navigator

- ▶ Education on preventative care
 - ❖ Reinforce screening guidelines
 - ❖ Promote and encourage yearly mammograms for women over age 40 of average risk
 - ❖ Maintain awareness of most recent changes to guidelines
- ▶ Collaborate with government agencies such as Breast & Cervical Cancer Control Program (BCCCP) for funding and Medicaid, for those in need, to pursue diagnostic workup and treatment
- ▶ Collaborate with community groups to provide funding for services that are not covered



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Community Outreach

- ▶ Survivor educational events
- ▶ Advanced/Metastatic Cancer Renewal Retreat
- ▶ Fundraising for the American Cancer Society (ACS)-Relay for Life and Making Strides Against Breast Cancer, Covenant CARE fund and Red Carpet which then benefit our local breast care patients
- ▶ Attending Health Fairs throughout the tri-cities and thumb areas
- ▶ Public speaking engagements as requested for groups and events, including YMCA, Credit Union staff meetings, schools, businesses and symposiums
- ▶ Promoting the Covenant HealthCare's Cancer Program



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Community Resources

- ▶ Refer to local agencies and businesses for:
 - ❖ Rides (ACS)
 - ❖ Financial support (BCCCP, Pardee)
 - ❖ Wigs (ACS)
 - ❖ Prostheses/bras
 - ❖ Lymphedema products
 - ❖ Physical therapy and occupational therapy (Covenant CORE)
 - ❖ Exercise and yoga
 - ❖ Dietician services
 - ❖ Counseling –both psychosocial and financial
 - ❖ Grief Counseling
 - ❖ Side effects management (for specialty products for sexual dysfunction)
 - ❖ Smoking Cessation
 - ❖ Advanced Care Planning



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Nurse Navigation = A Better Patient Experience/Outcome

- ▶ Based on a study in 2014 by Advisory Board-Oncology Rounds
- ▶ Challenges of newly diagnosed cancer patients include:
 - ❖ Difficulties in care coordination
 - ❖ Inability to access medical information
 - ❖ Lack of psychosocial and emotional support
 - ❖ Barriers to care: financial, cultural, transportation, etc.



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Nurse Navigation = A Better Patient Experience/Outcome

- ▶ Overall cost of care did not rise for patients enrolled in nurse navigation.
- ▶ In fact the cost of care for patients paired with a nurse navigator decreased

Kemeny, Hanna. "Navigating the Way to a Better Patient Experience." The Advisory Board Company. 13 Jan. 2014. www.advisory.com/research/oncology-roundtable/oncology-rounds/2014/01/navigating-the-way-to-better-patient-experience.

- ▶ A 6-month Accenture-MetroHealth Study showed that navigation helped reduce no-show and cancellations rates by 3%, and each full-time navigator added \$150,000 in additional hospital revenue each year.
- ▶ The impact of navigation clearly demonstrates a connection between financial benefit and the role of the navigator.

Burns, Megan, and Donna Rankin. "Financial Considerations of a Patient Navigation Program." Journal of Oncology Navigation & Survivorship, 5 Dec. 2018. www.jons-online.com/issues/2018/december-2018-vol-9-no-12/2156-financial-considerations-of-a-patient-navigation-program.



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Nurse Navigation = A Better Patient Experience/Outcome

- ▶ Following intervention by nurse navigators, cancer patients reported:
 - ❖ Improved care experience
 - ❖ Increased perception that their health care team had gone out of their way to make them feel better emotionally
 - ❖ Decreased perceived problems with health information, care coordination, psychological, and social care
 - ❖ Patients felt they were educated and better able to make treatment decisions, more involved in their care, better supported emotionally, and more prepared for the future



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Nurse Navigation = A Better Patient Experience/Outcome

- ▶ Navigation is a foundational component in developing world class cancer centers of excellence.
- ▶ Navigators ensure patients are compliant with treatment plans by removing barriers, educating them, providing care coordination, and becoming a constant point of contact.
- ▶ Navigators improve timeliness of care, improve patient experience, and improve patient outcomes.

Dugger, Crystal. "The Importance of Leadership in a Navigation Program." Journal of Oncology Navigation & Survivorship, 11 Oct. 2018. www.jons-online.com/issues/2018/october-2018-vol-9-no-10/1994-the-importance-of-leadership-in-a-navigation-program.



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Survivorship

- ▶ Cancer Care does not always end when active treatment finishes, the patient participating in follow up care and keeping a medical support system in place is essential.



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Survivorship

- ▶ Every breast cancer patient stage 0-Stage III is offered a Survivorship Treatment Summary and Care Plan (SCP)
- ▶ Stage IV patients are given a SCP on a case by case basis
- ▶ The SCP is initiated, maintained and completed by the nurse navigators
- ▶ The document is in EPIC and sent to the PCP in basket upon completion



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Survivorship

Survivorship includes:

- ▶ Surveillance
 - ❖ Monitoring for recurrence/imaging/follow up appointments
- ▶ Maintaining late and long-term side effects
- ▶ Keeping a personal health record
- ▶ Returning to work or previous life situation
- ▶ As patients finish cancer treatment, they might be wondering what's next
 - ❖ The answer is different for everyone

The American Society of Clinical Oncology, ASCO. ASCO Answers: Cancer Survivorship. Cancer.net, 2019.



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Survivorship

- ▶ According to the COC guidelines the patient must be provided a SCP within 12-18 months of diagnosis depending on the treatment regimen.
- ▶ The navigators complete the document and meet with the patient in person to review the summary and recommendations of follow up.



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Survivorship

- The nurse navigator will review:
 - ❖ The importance of follow up care and keeping appointments.
 - ❖ Continued preventative screenings and health maintenance.
 - ❖ Healthy lifestyle through diet, exercise, mental well being, smoking cessation and limited alcohol intake.
 - ❖ Long term side effect management.
 - ❖ Psychosocial support.



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Breast Cancer Treatment Summary

General Information	
Patient Name	
Phone	
Date of Birth	55 y
Support Contact	
Care Team	
Medical Oncologist	Dr. Tolan
Radiation	Dr. Collins
Plastic Surgeon	N/A
Reconstruction	Dr. Fugazzi
Primary Care Physician	Dr. Lawrence
Background Information	
Diagnosis	Breast cancer
Diagnosis Date	55 y
Age at diagnosis	55 y
Stage at diagnosis	Stage II
Family history of breast cancer	Breast Cancer related family history includes Cancer in her father and paternal uncle.
History of Breast Cancer	Right Breast
History of Breast Cancer	Left Breast
Genetic Testing	Negative
Tumor Type	Infiltrating Ductal
Tumor Grade	Grade II
Staging Information	Stage II
ER, PR	ER+, PR+
HER2 status	HER2-
Surgery	
Breast surgery date and type	Lumpectomy, RT breast
axillary nodes removed, #	Dr. R. Bays Medport insertion
Axillary dissection	Removed 3 Positive 3

Chemotherapy Treatment Plan	
Name of regimen	Anastrozole, AC 1
Chemotherapy cycles	Anastrozole and Cyclophosphamide 4 cycles followed by Paclitaxel
Start date	
Completed on	Completed
Side effects	None
Notes	peripheral neuropathy
Anti-HER2 Therapy	None
Anti-HER2 Therapy	None
Anti-HER2 Therapy	None
Anti-HER2 Therapy	None
Anti-HER2 Therapy	None
Radiation Therapy	
Anticancer Agent	Right breast
Start date	Post-operative radiation therapy
End date	
Preventive side effects	None, changes in skin texture of affected area and observation of skin
Endocrine Therapy	
Name	None
Preventive side effects	N/A
Contacts	
Oncology team member contacts	1. Dr. Tolan Phone: 989-583-5060 2. Dr. Collins Phone: 989-583-5195 3. Dr. Fugazzi Phone: 989-583-5550
Survivorship care provider contacts	1. Nurse Navigator Phone: 989-583-5263 2. Nurse Navigator Phone: 989-583-5154
Treatment comments	None

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Survivorship

- An attempt is made to make this visit with an existing appointment. Many patients will review/receive this document at the time of their 6 month or 12 month follow up mammogram. Others collect it at the same time as a follow up with the surgeon, medical oncologist or radiation oncologist.
- If the patient lives out of town and a visit is not possible. The document is reviewed over the phone and mailed.



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Survivorship Care Plan

General Information	
Patient Name	
Patient ID	
Living a healthy lifestyle	Healthy behaviors can help you regain or build strength, reduce the severity of side effects, lessen the risk for second cancers or other problems, and enjoy your life more. These behaviors include smoking cessation, good nutrition, physical activity and stress reduction.
Follow Up Care	If another follow up interval has been recommended by your doctor, follow your doctor's advice.
Follow Up Care	Recommendation
Medical history and physical (MHP)	Visit your doctor every three to six months for the first three years after the first treatment, every six to 12 months for years four and five, and every year thereafter.
Post-treatment mammography (see below)	Schedule a mammogram one year after your first mammogram that led to diagnosis, but no later than six months after radiation therapy. Breast is mammogram every six to 12 months thereafter. Perform a breast self-examination every month. This procedure is not a substitute for a mammogram.
Breast self-examination	Continue to visit a gynecologist regularly. If you use tampons, you have a greater risk for developing endometrial cancer. Report any change in the color, amount, or timing of your period to your doctor.
Genetic counseling	Approximately one year after diagnosis, you may continue to visit your oncologist or transfer your care to a primary care doctor. Women receiving hormone therapy should talk with their oncologist about how often to schedule follow-up visits for re-evaluation of their treatment.
Genetic counseling	Tell your doctor if there is a history of cancer in your family. The following risk factors may indicate that breast cancer could run in the family: <ul style="list-style-type: none"> • Ashkenazi Jewish heritage • Personal or family history of ovarian cancer • Any first-degree relative (mother, sister, daughter) diagnosed with breast cancer before age 50 • Two or more first-degree or second-degree relatives (grandparents, aunt, uncle) diagnosed with breast cancer • Personal or family history of breast cancer in both breasts • History of breast cancer in a male relative
Follow Up Care	Visit Frequency for MHP
Years 1-3	6 months
Visit Frequency for MHP	12 months
Years 4-5	12 months
Visit Frequency for Mammography	12 months
Dr. Tolan	3/18/2019 8:30 A.



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Survivorship

- ▶ In addition to a copy of their SCP the patients receive a packet of information on the Covenant HealthCare Cancer Programs that are available to survivors including:
 - ❖ Regional Support Groups Flyer
 - ❖ Yoga for Cancer Patients and Survivors Flyer
 - ❖ Cancer Exercise Class Flyer
 - ❖ Healthy Eating Classes to Improve Survivorship and Promote Prevention
 - ❖ CORE Program
 - ❖ Bone Density
 - ❖ ASCO answers Cancer Survivorship booklet



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Thank You!

- ▶ Covenant HealthCare Breast Nurse Navigator Offices are located at 5400 Mackinaw on the First Floor in the Breast Health Center.
- ▶ Questions?



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