

Patient Preferences Concerning Treatment Plans, Survivorship Care Plans, Education, and Support Services

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More than 1.5 million people in the United States were estimated to be diagnosed with some form of cancer in 2010, and about 11.4 million Americans are considered cancer survivors as a result of advanced clinical research and new technologies (American Cancer Society [ACS], 2010). The five-year survival rate (1999–2005) of 68% shows a significant upward trend as compared to 50% from 1975–1977 (ACS, 2010). More than 25 needs experienced by survivors, such as fatigue, fear of recurrence, and sleep disturbances, have been identified (Schlairet, Heddon, & Griffis, 2010). That the issues and concerns of survivors are addressed systematically and empathetically is critical to improving quality of life and delivery of cancer care for the growing number of cancer survivors.

The impact of the cancer diagnosis and subsequent treatment needs on each patient's quality of life is extremely complicated (Hewitt, Greenfield, & Stovall, 2006). Patients undergoing diagnosis and treatment for cancer are immersed in a complex medical world of sophisticated treatments. The diagnostic and treatment phases provide unique opportunities for providers to positively impact the patient experience. Providing individualized care to patients and caregivers, communicating clear expectations of treatment plans, and providing support and education are goals of the multidisciplinary and interdisciplinary team members caring for patients with cancer. As more people are surviving, educational tools focusing on survivorship must be developed and tested. Development of new educational information should be sensitive to the preferences and perceived needs of survivors. Creating the tools and delivering the information at the most appropriate times have been understudied from a patient point of view.

Issues of education during treatment, including treatment modality and post-treatment survivorship plans for patients with cancer, have been an area of focus. Organizations such as the National Comprehensive Cancer

Purpose/Objectives: To examine patient preferences for content and methods of delivering treatment plans, educational information, and survivorship care plans.

Research Approach: Thematic analysis of four tape-recorded focus groups of cancer survivors.

Setting: An outpatient clinical cancer center in an academic medical center in the midwestern United States.

Participants: 40 cancer survivors who had completed initial treatment. Participants were grouped by disease site: (a) prostate, genitourinary, and skin; (b) breast and gynecologic; (c) gastrointestinal, sarcoma, and head and neck; and (d) brain, pancreas, and lung.

Methodologic Approach: An exploratory, descriptive approach with in-depth focus group thematic and comparative analysis methodology. The data are grouped into four major, interconnected themes.

Main Research Variables: Survivors' personal experiences with receiving cancer treatment.

Findings: Four categories were agreed on using thematic analysis: educational information, treatment plan, survivorship care plan, and patient support. Themes were identified within each category.

Conclusions: The number of cancer survivors continues to grow each year. Approaching each survivor with individualized educational information, an initial treatment plan, a survivorship care plan, and emotional support is imperative. Oncology nurses must assess cancer survivors for their unique needs and intervene accordingly.

Interpretation: Because oncology nurses assess and recognize the learning needs of each patient, they are best positioned to develop teaching content, strategies, and timing of interventions. The importance of written educational materials cannot be negated. Oncology nurses also are well positioned to provide a proactive role in the development and delivery of treatment and survivorship plans of care.

Network (NCCN), the American Society of Clinical Oncology (ASCO), and the Institute of Medicine (IOM) have developed recommendations related to treatment and survivorship education. Each organization stresses