

# **Patient Navigation Toolkit Update Outline: Developing a Patient Navigation Program**

# Table of Contents

Introduction .....	3
Module 1 .....	4
Patient Navigation Definitions and Models	
Module 2 .....	7
Program Development	
Module 3 .....	12
Creating a Business Plan	
Module 4 .....	16
Evaluation & Ongoing Process Improvement	
Additional Resources .....	18
Appendix .....	19

## **Introduction:**

There are several toolkits and examples of patient navigation programs. This toolkit was created to connect regional models and expertise to the tools available for developing a patient navigation program. In addition to this toolkit, a comprehensive resource repository is available from George Washington University Cancer Center Cancer Control Technical Assistance Portal. <https://smhs.gwu.edu/cancercontroltap/resources>

This toolkit was developed with support from members of Kansas Cancer Partnership Survivorship, University of Kansas Medical Center's Area Health Education Center and Midwest Cancer Alliance.

This publication was supported by Cooperative Agreement numbers NU58DP006273 and NU58DP006113, funded by the Centers for Disease Control and Prevention (CDC) and the Kansas Department of Health and Environment. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the CDC or the Department of Health and Humans Services.

# Module 1

## Patient Navigation Definitions and Models

“Patient navigation” is a vague phrase. If you ask people if they know what the phrase patient navigation means, many would be unable to tell you. Others believe the term is synonymous with case management or patient advocacy. **Because it can be confusing, it is important to clearly define what patient navigation means in your organization.** The purpose of this section is to introduce various definitions and models to assist in identifying the most appropriate framework for your organization.

### Key Points to Consider During Module 1

- Which definition of patient navigation best fits your organization?
- Which model of patient navigation will be most effective in your organization?
- What are your organization’s goals for implementing a patient navigation program?
- Where does the navigation process begin and end in your organization (e.g., prevention, screening, diagnosis, treatment and survivorship)?
- Will your patient navigation focus on a specific cancer diagnosis?

### Definition of Patient Navigation

- National Cancer Institute (NCI) Definition  
Patient navigators are trained, culturally-sensitive health care workers who provide support and guidance to patients across the cancer care continuum. The most important role of patient navigators is to ensure that individuals with suspicious cancer findings receive timely diagnosis and treatment. (<https://www.cancer.gov/about-nci/organization/crchd/disparities-research/pnrp>)
- Kansas Cancer Partnership (KCP) Definition  
Patient navigators are health care professionals whose primary focus is to assist cancer patients, caregivers and families in ‘bridging the gaps’ within the health care system and decreasing barriers to care by utilizing resources. (<http://kscancerpartnership.org/>)
- Oncology Nursing Society (ONS) Definition  
**Oncology nurse navigator:** An oncology nurse navigator (ONN) is a professional RN with oncology-specific clinical knowledge who offers individualized assistance to patients, families and caregivers to help overcome health care system barriers. Using the nursing process, an ONN provides education and resources to facilitate informed decision-making and timely access to quality health and psychosocial care throughout all phases of the cancer continuum. (ONS Core Competencies) <https://www.ons.org/make-difference/advocacy-and-policy/position-statements/ONN>

### Effective Practice Models

The concept of patient navigation was founded by Harold P. Freeman in 1990 to eliminate barriers to timely cancer screening, diagnosis, treatment and supportive care. Freeman’s model is a community-based

model in which the critical window of opportunity to apply patient navigation is between the point of an abnormal finding and the point of resolution of the finding by diagnosis and treatment.

(<http://www.hpfreemanpni.org/our-model/>) (Harold P. Freeman Patient Navigation Institute)

More recently, the patient navigation model has been expanded to include the timely advancement of an individual into the health care system from prevention to detection, diagnosis and treatment. Navigators act as the support hub for all aspects of patients' progress and interaction with the health care system.

The navigator's role is to promote smooth and timely continuity of care to the point of resolution.

## Navigation Models

(Oncology roundtable 2009)

MODEL I Community Based Harold Freeman Model	MODEL II Tumor-Site Specific Model	MODEL III Generalist Model	MODEL IV Multidisciplinary Care Coordinator Model
<ul style="list-style-type: none"> <li>• Navigator assigned to address health care disparities</li> <li>• Addresses gaps in access to utilization of cancer services</li> <li>• Can be primarily staffed by Lay Navigators</li> </ul>	<ul style="list-style-type: none"> <li>• Navigator assigned to tumor site-specific clinic/group</li> <li>• Serves as main point of contact for patients, physicians</li> <li>• Provide patient education and ensure timely care</li> <li>• Coordinate referrals to specialists, support services</li> </ul>	<ul style="list-style-type: none"> <li>• Navigator assigned to provide coverage for all tumor sites</li> <li>• Provide support to patients with the greatest need</li> <li>• Clinical or lay navigator</li> </ul>	<ul style="list-style-type: none"> <li>• Navigator supports a multidisciplinary clinic and/or conference</li> <li>• Clinical navigators each assigned to one or more tumor conferences</li> <li>• Ensures timely case presentations, follow-up coordination</li> </ul>

The strongest evidence to date for effective patient navigation is in improving cancer screening and outcomes related to cancer diagnostic services. Paskett, Harrop and Wells (2011) reviewed 33 articles to describe varying patient navigation programs and their efficacy. (<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3623288/>)

Backgrounds of patient navigators are diverse and driven by local needs. There is NOT one type of patient navigation model that fits the needs of all medical settings or systems. Multiple models have been effective in practices. Regionally, organizations have selected diverse models; for examples, The Richard & Annette Bloch Cancer Center at Truman Medical Centers integrates a Community Health Worker model with a nursing model; The University of Kansas Cancer Center focuses on a tumor or disease site-specific model combined with a Multi-disciplinary Care Coordinator (MDC) model (RN assigned to MDC clinic or conference); Heartland Cancer Center/St. Catherine Hospital and Olathe Health Cancer Center have selected a Generalist model (a lay or RN focusing on patients with greatest need); Via Christi Hospital St. Francis campus uses the Generalist model focusing on insurance navigation.

- Social Work Model

Task-centered practice is a social work practice tool that can empower clients to solve a wide variety of problems. It has been used for over 40 years as a social work practice model.

(<http://socialwork.oxfordre.com/view/10.1093/acrefore/9780199975839.001.0001/acrefore-9780199975839-e-388>)

- Community Health Workers (CHW) Model

Also called lay health advisors, promotors or health promoters CHWs, have a long history of providing culturally and linguistically appropriate care to a wide variety of communities and sub-populations. CHWs usually share similar characteristics and “life experiences” with members of a particular community, such as language, culture and/or socio-economic circumstances.

(<http://www.nwrpca.net/health-center-news/253-community-health-workers-as-patient-navigators.html>)

- This CDC document ([https://www.cdc.gov/dhdsp/docs/chw\\_brief.pdf](https://www.cdc.gov/dhdsp/docs/chw_brief.pdf)) provides guidance and resources to integrate CHWs into community-based efforts to prevent chronic disease.

- Tumor or Disease Site-Specific Model

Patient-oriented approach model focuses on a specific disease or cancer diagnosis that the organization has determined has high navigation needs. Although the disease has become the focus of the technologic and market-driven medical system, illness and the socio-cultural aspects of medicine have blurred into the background. Navigation helps connect the patient’s disease and treatment with his/her socio-cultural background, essential to understanding the patient’s illness.

(<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC1071693/>)

- The Joint Commission identified and confirmed the following areas to enhance their certification of disease-specific care:
  - Involvement of interdisciplinary team
  - Emphasis on transition of the patient to different settings
  - Prioritizing performance improvement to clinical practice guidelines
  - Creating connection between procedure/condition to patient's chronic illness(es)
  - Increased focus on self-management, such as patient engagement level, lifestyle choices and health and wellness.

([https://www.jointcommission.org/assets/1/6/JCP0113\\_Disease-Specific\\_Care\\_Std.pdf](https://www.jointcommission.org/assets/1/6/JCP0113_Disease-Specific_Care_Std.pdf))

**See the Appendix** for a video on how The University of Kansas Cancer Center chose a Disease Site-Specific Model for their navigation program.

## Scope of Practice

Depending on practice culture and capabilities of staff, each organization needs to decide on model and type of navigator needed to meet their program and patients’ needs. Will a peer or non-clinically based navigator, nurse navigator, social worker or other practice model work best for your organization?

(<https://smhs.gwu.edu/gwci/sites/gwci/files/PN%20Competencies%20Report.pdf>)

**See the Appendix** for short video clips of local providers/navigators sharing their organization’s choice of models, experiences and process of their navigation program.

Assessing your organization and the populations that you serve (see Module 2), will help you identify the model that best fits your organization.

# Module 2

## Program Development

Initial steps for any program development are to assess the need, identify goals of the program and leverage resources for implementing a new program. In this module, you will find several tools for assessing your program and links to toolkits that will help you develop your program. It is important to select the tool that will work best for your program.

### Key Points to Consider During Module 2

- An initial step is to assess needs of the populations served by your organization to guide your discussion as to the best model for your organization.
- How will you make the case for the navigation program's benefits, outcomes and return to your organization?

According to Sheryl Riley, RN, OCN, CMCN, and Cortney Riley, BS, DPT (2016), "Cancer patients face many challenges when trying to understand and navigate the health care system. These challenges begin when the need for screening is identified and can occur at any point along the continuum of care. Patient navigation programs were developed to **reduce gaps** in care by improving access to, and timeliness of, cancer services. Navigation adds a strong provision of support and guidance for timely access to the cancer care system, addressing barriers to and facilitating quality care. Adding care coordination to patient navigation has proven to have many benefits to physicians as well as to patients and their families." (<http://www.journalofclinicalpathways.com/article/role-patient-navigation-improving-value-oncology-care>)

Your patient navigation program will need to identify its goals. This should be done after you have assessed your program and gathered data to understand where gaps in care, barriers and patient needs exist.

- It is important to assess needs of the populations served by your organization.
- The assessment will help you identify which patient populations may benefit from navigation.
- Assessment should be focused on the goal of patient navigation, which is focused on reducing barriers to health care.

#### Identify Navigation Program Goals

Virtua Health took several steps to establish their breast navigation program and based objectives on their assessment. ([https://www.accc-cancer.org/oncology\\_issues/articles/JF09/JF09-Designed-for-Success.pdf](https://www.accc-cancer.org/oncology_issues/articles/JF09/JF09-Designed-for-Success.pdf))

The authors provided an example of a pilot program with five global objectives:

1. Reduce delays and enhance patient access to specialists;
2. Provide personalized information about cancer diagnosis and support patients in treatment decisions;
3. Facilitate timely access to health care and supportive services;
4. Enhance communication between the various disciplines and referring physicians;
5. Create a personalized approach to breast care.

## Organizational Assessment

As you begin your organizational assessment, keep in mind your organization's current or future accreditation that requires navigation. From the assessment, you will also need to determine as an organization which model will work best and if licensure is needed.

- Program Pre-Assessment  
Review examples of navigation programs and hold discussions with your organization's leadership, cancer center team, patients and other navigation program stakeholders about the best fit for your organization. If you have current navigators, they can shed light on the type of work they do for patients. According to Chyongchiou (2008), the three most common barriers navigators spent time on were related to:
  - Insurance and out-of-pocket expenses
    - **See the Appendix** for a video on the development of the Insurance Navigation Program at Via Christi Hospital, Wichita, Kansas
  - Transportation issues
  - Managing the feelings and fears associated with cancer  
(<http://www.sciencedirect.com/science/article/pii/S0027968415315078?via%3Dihub>)
- A pre-assessment tool can help you assess your organization and consider all aspects of a patient navigation program. This tool can help you assess your readiness for implementation and identify areas to be addressed before rolling out a patient navigation program. The Association of Community Cancer Centers (ACCC) offers the following Patient Navigation Program Pre-Assessment Tool. (<https://www.accc-cancer.org/resources/pdf/PatientNavigation-Tools/Pre-Assessment-Tool.pdf>)
- Identify Targeted Needs or Specific Disease Sites  
Your organization may want to hold a roundtable discussion including questions such as, "How have things evolved, as you have seen it, in the treatment and the support of cancer patients and cancer programs?" (<https://www.bizjournals.com/wichita/news/2016/11/17/roundtable-updating-the-latest-in-cancer-care.html>)
- Consider Market-Driven Needs  
As you assess your program, it will be important to look at the return on investment. *Making the Case for Nurse Navigators*, by Esther Muscari Desimini, et al. addresses the benefits, outcomes and return on investment. Consider what specific areas may be costing your organization that the navigation program could address. ([http://www.accc-cancer.org/oncology\\_issues/articles/SO11/SO11-Making-the-Case-for-Nurse-Navigators.pdf](http://www.accc-cancer.org/oncology_issues/articles/SO11/SO11-Making-the-Case-for-Nurse-Navigators.pdf))

## Needs Assessment

Your needs assessment should help identify gaps and barriers while functioning as a guide in developing the appropriate methods and tools necessary for compliance to standards. The following is a list of sample needs assessments.

- ACCC has created tools for implementing a comprehensive patient navigation program for community cancer centers, including assessment tools, navigator job descriptions and standard operating procedures. This resource includes sample intake and referral forms, tracking forms, a

discharge tool and patient and provider satisfaction surveys.

(<https://www.accc-cancer.org/home/learn/Patient-Centered-Care/patient-navigation>)

(<https://www.accc-cancer.org/docs/docs-imported/resources/pdf/patient-navigation-guide>)

(<https://www.accc-cancer.org/resources/PatientNavigation-Tools.asp>)

- The George Washington University Cancer Center (GWCC) developed a “Cancer Patient Navigation Toolkit” that includes a program development and needs assessment resource: *Advancing the Field of Cancer Patient Navigation: A Toolkit for Comprehensive Cancer Control Professionals*, 2016.  
([https://smhs.gwu.edu/cancercontroltap/sites/cancercontroltap/files/PN%20Toolkit%20FINAL.pdf?utm\\_source=January+2016+caSNP+E-News&utm\\_campaign=January+2016+Patient+Navigation+%26+Survivorship+E-News&utm\\_medium=email](https://smhs.gwu.edu/cancercontroltap/sites/cancercontroltap/files/PN%20Toolkit%20FINAL.pdf?utm_source=January+2016+caSNP+E-News&utm_campaign=January+2016+Patient+Navigation+%26+Survivorship+E-News&utm_medium=email))
- The University of Kansas Health System’s needs assessment is documented in their electronic health record. (<http://www.kumc.edu/Documents/kuahec/Nav%20Intake%20Assessment%202.2016.pdf>)  
**See the Appendix** for a video on how The University of Kansas Cancer Center developed and used their needs assessment tool.
- Southern Rural Development Center offers an approach with stakeholder involvement to build capacity and promote sustainability of healthy communities; mapping the assets of a community described.  
([http://srdc.msstate.edu/trainings/educurricula/asset\\_mapping/](http://srdc.msstate.edu/trainings/educurricula/asset_mapping/))
- An example of a disease site-specific model is a successful prostate cancer program provided by ACCC’s Center for Provider Education. The program conducted a community assessment to identify the specific market needs in their community. This assessment allowed them to develop the program with an understanding of the current population and the growing needs for prostate cancer diagnosis and treatment.  
(<https://www.accc-cancer.org/docs/docs-imported/resources/pdf/prostate-cancer-program-guide>)

## Map Out Patient Navigation Role

Begin by mapping patient navigation to the accreditation that your organization maintains or plans to obtain. Think broadly about how a navigator could address pain, emotional well-being and performance status.

Several national organizations have recognized the importance of navigation to improve patient experiences and outcomes. The organizations below have taken the next step of creating standards and expectations included in their accreditation process.

**See the Appendix** for a video on the accreditation process of the navigator program at St. Catherine Hospital in Garden City, Kansas.

**The American College of Surgeons (ACS)** recognizes patient navigation programs as an essential component of comprehensive cancer care delivery. To encourage development and implementation of patient navigation, ACS included standards within their program accreditations.

- 2008: ACS National Accreditation Program for Breast Centers (NAPBC) includes Patient Navigation as an accreditation standard – 2.2. The NABPC 2.2 Standard from the 2018 edition states that to

meet accreditation, a program is to assure that a patient navigation process is in place to guide the patient with a breast abnormality through provided and referred services. (<https://accreditation.facs.org/accreditationdocuments/NAPBC/Portal%20Resources/2018NAPBCStandardsManual.pdf> )

- 2012: ACS Commission on Cancer (CoC) added Patient Navigation as an accreditation standard – 3.1. Per the CoC 3.1 standard 2016 edition, a patient navigation process, driven by a triennial Community Needs Assessment, is established to address health care disparities and barriers to cancer care. Resources to address identified barriers may be provided either on-site or by referral. ([https://www.facs.org/~media/files/quality%20programs/cancer/coc/2016%20coc%20standards%20manual\\_interactive%20pdf.ashx](https://www.facs.org/~media/files/quality%20programs/cancer/coc/2016%20coc%20standards%20manual_interactive%20pdf.ashx))
- 2016: ACS Cancer Program Standards: Ensuring Patient-Centered Care, “Understanding the Recommendations and the Implications for Navigation Programs” (<http://www.kumc.edu/Documents/kuahec/ACos%20Guidelines%20for%20Nav.pdf>)

The GWCC has developed a tool for assessing patient navigation programs linked to CoC Accreditation Standard 3.1: Road Map for implementing CoC Standard 3.1: Patient Navigation Process, an Overview: ([https://cancercenter.gwu.edu/sites/default/files/coc\\_navigation\\_standard\\_road\\_map.pdf](https://cancercenter.gwu.edu/sites/default/files/coc_navigation_standard_road_map.pdf))

**Standard 3.1 Patient Navigation Process:** (<https://www.youtube.com/watch?v=8VcxseNmSfU>)

#### **NAPBC 6.1 Addresses Navigation:**

1. Explain the primary care provider's (PCP) role in providing survivorship care focused on prevention, wellness and evidence-based guidelines for screening.
2. Provide guideline-supported recommendations for secondary prevention to cancer survivors regarding sunscreen, diet, obesity, exercise, alcohol and tobacco.

#### **Patient Intake Process:**

1. Distress Screening may map to several accreditation standards: 3.2 CoC, Core 6, 24, 38, 84 QOPI
2. Does your organization screen for distress in patients? You could use this information for part of your assessment. You may want to review the GWCC Guide for Patient Navigators Training - A Supplement to the Oncology Patient Navigator Training: The Fundamentals: ([https://smhs.gwu.edu/gwci/sites/gwci/files/Guide%20for%20Patient%20Navigators%20Final%](https://smhs.gwu.edu/gwci/sites/gwci/files/Guide%20for%20Patient%20Navigators%20Final%202018.pdf)

#### **Competencies**

Once you have assessed your community and identified your program goals, you need to determine what navigator model will be most effective in your program. This will help you determine the competencies needed for the navigator you will hire.

- **Oncology Nursing Society (ONS) Oncology Nurse Navigator Competencies**  
ONS identified the need to clearly define the role of the Oncology Nurse Navigator (ONN). ONS also encouraged the growth and standardization of the role by developing core competencies. ONN competencies include the fundamental knowledge, skills and expertise required for proficiency:

## Patient Navigation Toolkit Update Outline: Developing a patient navigation program

- participate in the care of patients with a past, current or potential diagnosis of cancer
- assist patients with cancer, their families and caregivers to overcome health care system barriers
- provide education and resources to facilitate informed decision making and timely access to quality health and psychosocial care throughout all phases of the cancer continuum  
(<http://www.kumc.edu/Documents/kuahec/2017ONNcompetencies.pdf>)
- **Academy of Oncology Nurse and Patient Navigators (AONN+)**  
AONN+ has recently developed certifications for both nurse and patient navigation. They established baseline competencies for oncology navigators centered on their roles, responsibilities, level of knowledge and evidence-based best practices that will help ensure consistent delivery of optimized patient care across the care continuum.  
(<https://www.aonnonline.org/certification>)
- **GWCC** created core competencies for non-clinically licensed patient navigators to build competence within the patient navigation workforce.  
([https://smhs.gwu.edu/gwci/sites/gwci/files/PN%20Competencies%20Report\\_0.pdf](https://smhs.gwu.edu/gwci/sites/gwci/files/PN%20Competencies%20Report_0.pdf))
- **ONS** article: **Lay Patient Navigators Can Help Oncology Nurses Guide Patients Through Cancer Care**, Chris Pirschel, March 27, 2018  
([https://voice.ons.org/news-and-views/lay-patient-navigators-can-help-oncology-nurses-guide-patients-through-cancer-care?utm\\_source=twitter](https://voice.ons.org/news-and-views/lay-patient-navigators-can-help-oncology-nurses-guide-patients-through-cancer-care?utm_source=twitter))

**Many programs will decide to certify their navigators. Patient Navigation Certification Programs currently available are listed below:**

The Harold P. Freeman Patient Navigation Institute (HPFPNI): The HPFPNI Patient Navigation Program is an intensive two-day, in-person training program that includes 10 modules, practicum (patient interaction) and case studies. (<http://www.hpfreemanpni.org/the-program/>)

AONN+ has established its Oncology Nurse Navigator-Certified Generalist (ONN-CG), Oncology Patient Navigator-Certified Generalist (OPN-CG) and Oncology Nurse Navigator-Certified Generalist Thoracic (ONN-CG(T)) certifications.  
(<https://aonnonline.org/certification>)

GWCC has developed a free online training that covers the fundamentals of oncology patient navigation.  
(<https://smhs.gwu.edu/gwci/news/gw-cancer-institute-develops-first-free-online-comprehensive-training-patient-navigators>)

**See the Appendix** for a video on how The University of Kansas Cancer Center documents the interaction between the patient and the patient navigator.

# Module 3

## Creating a Business Plan

Cancer center administrators often ask whether the navigation program works and what it costs. Wells et. al (2008) reviewed cost-effectiveness and efficacy of patient navigation. (<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC2679696/>). You will note that there is still need for additional research. The review may help you consider areas to evaluate your patient navigation program. Oncology patient navigation programs need to be business savvy and understand value-based cancer care metrics. In value-based models, doctors and hospitals are paid based on the evidence-based and cost-effective ways in which they keep people healthy and improve the health of those who have chronic conditions.

### Key Points to Consider During Module 3

- Describe one practical strategy that could be implemented in your clinical practice setting related to the standards of your organization's accreditation or payment models.
- Consider how to demonstrate investment outcomes in multiple areas, such as scheduling time, no-show rates for appointments or decreased time interval between date of referral and first appointment.
- Determine how private physician office practices could collaborate with hospitals or health systems to achieve successful patient-centered care.

### Key Navigation/Entry Points

As the move to value-based care and Alternative Payment Models (APMs) continues, oncology patient navigators need to understand value-based cancer care metrics. Value-based care is emerging as a solution to rising health care costs, clinical inefficiency and duplication of services. Navigators move patients through the health care system, helping with financial and medical system barriers, increasing retention of patients and assisting with diagnostic and treatment resolution rates while showing improved organizational efficiencies, preventing lost revenue and ultimately providing revenue to the organization.

Medicare's Oncology Care Model pilot is the first oncology-specific APM developed by the Center for Medicare and Medicaid Innovation. Data collection and reporting metrics are vital elements of this five-year pilot program, which seeks to achieve higher quality, more highly coordinated care and smarter spending.

Navigation programs often lack strong evidence-based metrics to demonstrate the impact of navigation on key areas of quality, coordination and cost effectiveness. AONN+ released evidence-based metrics in key categories of patient experience, clinical outcomes and return on investment. Metrics were developed so that any cancer program or practice can utilize them regardless of the navigation model in place, using them "as a baseline to prove the efficacy and sustainability of their navigation programs."

(<http://acc-cancer.org/ACCCbuzz/navigation-metrics-value-based-care-measuring-up/>)

### Oncology Financial Navigators: Integral members of the multidisciplinary cancer care team

Today's cancer programs must accept that their ole, band-aid approaches to discussing financial issues

with patients are inadequate for solving a complex, systemic problem. For social workers, financial advocates, patient navigators and others who wish to offer a similar level of service at their cancer programs, here is why we need to step up for change.

(<https://navectis.com/oncology-financial-navigators-intefral-members-multidisciplinary-cancer-care-team>)

#### American Cancer Society- Patient Navigators Help Cancer Patients Manage Care

Patient navigators work with patients and families to help with many different needs associated with the health care system. This may include helping with insurance problems, finding doctors, explaining treatment and care options, going with patients to visits, communicating with their health care team, assisting caregivers and managing medical paperwork.

(<https://www.cancer.org/latest-news/navigators-help-cancer-patients-manage-their-care.html> )

## **Identify Metrics/Outcomes: Program & Navigator Productivity**

Metrics regarding care coordination efforts should be recorded and may serve as indicators of high quality care. Specifically, records should be kept regarding whether primary care providers were identified, notified and provided with a record of cancer treatment, including treatment summaries and care plans. Another potential metric that may indicate well-integrated care would be whether patients' management was discussed at a multidisciplinary conference.

([http://www.kumc.edu/Documents/kuahec/Maximizing-the-Value-of-Patient-Navigation%20\(3\).pdf](http://www.kumc.edu/Documents/kuahec/Maximizing-the-Value-of-Patient-Navigation%20(3).pdf))

Other metrics of interest that are reflective of the patient-centered medical home model of care include monitoring the receipt of ancillary care services (e.g., nutrition, social work, physical therapy, psychology), medications and devices.

(<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4818009/>)

The GWCC for the Advancement of Cancer Survivorship, Navigation, and Policy, Guide for Patient Navigators, Module 7, Lesson 3, Program Evaluation and QI (<https://smhs.gwu.edu/gwci/sites/gwci/files/Guide%20for%20Patient%20Navigators%20Final%20May%202015-1.pdf> )

**See the Appendix** for a video on the patient and provider satisfaction seen by St. Catherine Hospital in Garden City, Kansas.

## **Financial Toxicity**

Financial navigation is an ever-growing need at many cancer centers; however, few centers are able to employ a dedicated financial navigator to assist patients with financial barriers they may face during treatment. Financial toxicity, or financial distress from diagnosis or treatment decisions, can affect all patients, regardless of insurance status or income. In clinics where a dedicated financial navigator is not available, it is important for patient navigators to understand their role in addressing financial concerns. In the outpatient oncology clinics at the GWCC, non-clinical patient navigators assess financial stress

levels and assist patients in overcoming financial barriers. These barriers can include affording insurance co-payments, paying their deductible or deciding to skip appointments to avoid medical costs. Below you will find useful resources to address financial toxicity:

- National Cancer Institute's *Financial Toxicity (Financial Distress) and Cancer Treatment (PDQ®)-Patient Version* describes how out-of-pocket costs can cause financial problems for patients. These costs are what one pays for medical care that is not covered by health insurance (e.g. co-pays, deductibles, coinsurance).  
(<https://www.cancer.gov/about-cancer/managing-care/track-care-costs/financial-toxicity-pdq>)
- Advisory Board, Research Report, October 21, 2014: Cancer Patient Financial Navigation, Helping Patients Manage their Costs while Protecting Program Margins  
(<https://www.advisory.com/research/oncology-roundtable/studies/2014/cancer-patient-financial-navigation>)
- *Journal of Oncology Navigation & Survivorship*, August 2017, AONN+ West Coast Regional Meeting, Financial Toxicity: Growing Burden of Financial Toxicity in Oncology  
(<http://www.jons-online.com/issue-archive/2017-issues/august-2017-vol-8-no-8/the-growing-burden-of-financial-toxicity-in-oncology/>)
- *Clinical Social Work Journal*, October 2017: The Hidden Cost of Cancer: Helping Clients Cope with Financial Toxicity  
(<https://link.springer.com/article/10.1007/s10615-017-0640-7>)
- Michigan Cancer Consortium: Financial Navigation for People Undergoing Cancer Treatment  
([http://michigancancer.org/PDFs/Publications\\_Products/MCCExclusiveProd/FinancialNavigationReport\\_FinalAccessible2018.pdf](http://michigancancer.org/PDFs/Publications_Products/MCCExclusiveProd/FinancialNavigationReport_FinalAccessible2018.pdf))

See the **Appendix** for a video on financial and emotional impact of a patient navigation program.

## **Complete: Process Map, Program Tools, Job Description, Community Resource List, Data Capture Tools & Resources**

Implementing the Commission on Cancer Standard 3.1 Patient Navigation Process: [A Road Map for Comprehensive Cancer Control Professionals and Cancer Program Administrators](https://cancercenter.gwu.edu/sites/default/files/coc_navigation_standard_road_map.pdf), GWCC.

GWCC developed this road map to support comprehensive cancer control professionals and cancer program administrators from hospitals, treatment centers and other facilities who are responsible for conducting the triennial Community Needs Assessment (CNA) focusing on cancer disparities and barriers to care. The purpose of this road map is to guide the CNA team in designing a process that navigates cancer patients through their care and addresses barriers facing patients, caregivers and communities in the cancer program's catchment area.

[https://cancercenter.gwu.edu/sites/default/files/coc\\_navigation\\_standard\\_road\\_map.pdf](https://cancercenter.gwu.edu/sites/default/files/coc_navigation_standard_road_map.pdf)

## Navigation Resources and Tools

Below are some additional resources that may be helpful as you develop a patient navigation program:

- CA Cancer J Clin, Electra D. Paskett, PhD, J. Phil Harrop, MHA, MBA, and Kristen J. Wells, PhD, MPH (2011). Patient Navigation: An Update on the State of the Science: Although patient navigation was introduced two decades ago, there remains a lack of consensus regarding its definition, qualifications of patient navigators and impact on the continuum of cancer care. This review provides an update to Wells et al.'s (2008) review on patient navigation. (<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC3623288/>)
- ACCC Patient Navigation Guide: Practical guide for community cancer centers. Over the past decade, patient navigation services have been emerging as an important strategy for enhancing patient access to the full continuum of cancer care from screening to detection, diagnosis, treatment and beyond. This guide is intended to help community cancer programs establish or expand patient navigation services. (<https://www.accc-cancer.org/projects/patient-navigation-project/practical-guide>)
- Practical Strategies for Meeting the Patient Centered Standards of the Commission on Cancer: The ACCC Cancer Program Guidelines have been established to assist cancer programs that want to develop and/or maintain a comprehensive interdisciplinary program that meets the needs of cancer patients and their families. These guidelines were developed to reflect the best components for a cancer program. The guidelines are not intended to act as an accrediting or credentialing tool and are not a list of standards, such as those published by the American College of Surgeons Commission on Cancer.
- (<https://www.accc-cancer.org/docs/docs-imported/publications/pdf/cancer-program-guidelines-2012>)

**See the Appendix** for a video on how professional and community resources impacted the development of the patient navigation program at St. Catherine Hospital in Garden City, Kansas.

# Module 4

## Evaluation & Ongoing Process Improvement

This section connects to compliance and continued evaluation of your navigation program. Your organization should determine how you would measure the success of your program, prior to implementation. If you have not determined what outcomes you want to improve from your assessment, then it is time to review the assessment again and determine how you will know that your program is successfully meeting your goals. Once you identify those areas, it is time to determine how to measure those goals and objectives.

**Remember, quality is NEVER an accident; quality is ALWAYS the result of intelligent planning.**

### Key Points to Consider During Module 4

- How will you assess quality, efficiency, outcomes of care and level of patient satisfaction?

### Tools to Measure your Program

Satisfaction with health care received and with patient-provider interactions are important general measures of cancer care. These patient-reported measures are often best assessed through validated instruments specific to conceptual domains of care quality assessment. Other specific patient-reported measures include pain management, symptom inventories, trust, anxiety and depression scales. Examples of assessment tools include:

- Survivorship Care in a Community Cancer Center - A comprehensive multidisciplinary approach.  
*Oncology Issues*, Jeff Kendall, PsyD; Cynthia Waddington, RN, MSN, AOCN; Michelle Bailiff, LCSW; and Patrick Grusenmeyer, ScD, FACHE; July 2007 -  
([https://acc-cancer.org/oncology\\_issues/articles/JA07/JA07-Survivorship-Care-in-a-Community-Cancer.pdf](https://acc-cancer.org/oncology_issues/articles/JA07/JA07-Survivorship-Care-in-a-Community-Cancer.pdf))
- National Community Cancer Centers Program (NCCCP) Assessment Tool  
*Oncology Issues*, Jay R. Swanson, RN, BSN, OCN; Patricia Strusowski, RN, MS; Nadesa Mack, RN, BSN, MBA, OCN; and Judith Degroot, RN, MSN, AOCN; July 2012 – Growing a Navigation Program: Using the NCCCP Navigation Assessment Tool. Your program can use this tool to evaluate itself against 16 core measures that are present in some part for all navigation programs. By having a tool to monitor program growth (and prospects for growth), a navigator is able to demonstrate growth opportunities and quality improvement of a program by establishing realistic goals.  
([http://www.acc-cancer.org/oncology\\_issues/articles/JA12/JA12-Growing-a-Navigation-Program.pdf](http://www.acc-cancer.org/oncology_issues/articles/JA12/JA12-Growing-a-Navigation-Program.pdf))
- NCCCP Navigation Matrix, approved by the NCCCP Executive Subcommittee, 7/14/2011  
As all navigation programs are unique, rate your program as you feel appropriate. The purpose of this form is **not** to compare one program to another but to assist you in building a stronger navigation program for your organization.

([http://www.accc-cancer.org/oncology\\_issues/supplements/NCCCP-Navigation-Matrix-Tool.pdf](http://www.accc-cancer.org/oncology_issues/supplements/NCCCP-Navigation-Matrix-Tool.pdf))

- AONN+ Pre-Conference: Navigation Matrix, 2011  
While patient navigators are increasingly common, hospitals have yet to gain consensus on the roles and responsibilities for the position. Your organization may want to regularly define roles, standardized responsibilities, infrastructure and the best way to assess the outcomes of your program. Navigation programs vary widely across the country and must be shaped to meet the individual needs of a cancer program and the patient population they serve.  
(<http://www.slideshare.net/AONN/preconference-the-navigator-matrix>)
- AONN+ Evidence-Based Oncology Navigation Metrics Crosswalk with National Oncology Standards and Indicators  
*Journal of Oncology Navigation & Survivorship*. 2018; 9:221-241  
The creation of standardized national metrics to measure programmatic success is vital to coordinating high-quality, team-based care and demonstrating the sustainability of navigation programs.  
(<http://jons-online.com/web-exclusives?view=article&artid=1852:aonn-evidence-based-oncology-navigation-metrics-crosswalk-with-national-jons-oncology-standards-and-indicators>)

**See the Appendix** for a video on how The University of Kansas Cancer Center tracks the outcomes of its navigation program.

## Additional Resources

Your greatest resource is your network of colleagues across the region. We encourage you to participate in navigation phone calls hosted by Midwest Cancer Alliance, consider joining your local AONN+ chapter, partner with the Kansas Cancer Partnership and reach out to the great navigators highlighted in this resource toolkit.

- Kansas Cancer Partnership - <http://kscancerpartnership.org/>
- National Cancer Institute - [www.cancer.gov](http://www.cancer.gov)
- American Cancer Society - [www.cancer.org](http://www.cancer.org)
- Association of Community Cancer Centers - <https://www.accc-cancer.org/>
- Harold P. Freeman Patient Navigation Institute - <http://www.hpfreemanpni.org/>
- George Washington University School of Medicine & Health Sciences - <https://smhs.gwu.edu/gwci/patient-care/patient-navigation>
- Academy of Oncology Nurse and Patient Navigators Articles and Whitepapers - <https://aonnonline.org/education/articles>
- AONN+ Metrics White Paper - Tricia Strusowski, RN, MS - Academy of Oncology Nurse & Patient Navigators Announces Standardized Navigation Metrics

# Appendix

**Module 1—Patient Navigation Model, Role of the Navigator, Struggles/Challenges:** Video on program development and the navigator’s role by Teri Banman, RN, BSN, OCN, The University of Kansas Cancer Center

<https://youtu.be/LnB-gjdMPnw>

**Module 2—Program Development and Program Accreditation:** Video on development and accreditation of the patient navigation program by Heather Wright-Renick, BSN, RN, CN-BN, The Breast Center at St. Catherine Hospital, Garden City, Kansas

<https://youtu.be/-6EpeHwErOc>

**Module 2—Insurance Navigation:** Video on creating an insurance navigation program and how patients are referred by Lyndsey Korkki and Judy Murray, Oncology Insurance Navigators, Via Christi Hospital Wichita, Kansas

<https://youtu.be/mWT7p9pkvIc>

**Module 2—Needs Assessment:** Video on establishing the purpose of the navigator and how many navigators are needed by Teri Banman, RN, BSN, OCN, The University of Kansas Cancer Center

<https://youtu.be/sE9mimMt4jM>

**Module 2—Documentation of Navigator/Patient Interaction:** Video on the documentation of the interaction between the patient navigator and the patient by Teri Banman, RN, BSN, OCN, The University of Kansas Cancer Center

<https://youtu.be/YDkXtl0r8iM>

**Module 3—Patient and Provider Satisfaction:** Video on creating a business plan/patient and provider satisfaction/impact of patient navigator program by Heather Wright-Renick, BSN, RN, CN-BN, The Breast Center at St. Catherine Hospital, Garden City, Kansas

[https://youtu.be/6CidZ0\\_cg9Q](https://youtu.be/6CidZ0_cg9Q)

**Module 3—Financial and Emotional Impact of Insurance Navigation:** Video on the impact of an insurance navigation program by Lyndsey Korkki and Judy Murray, Oncology Insurance Navigators, Via Christi Hospital Wichita, Kansas

<https://youtu.be/aE79ieCZKpQ>

**Module 3—Professional and Community Resources:** Video on Midwest Cancer Alliance membership/community resources by Heather Wright-Renick, BSN, RN, CN-BN, The Breast Center at St. Catherine Hospital, Garden City, Kansas

<https://youtu.be/9ijjSkW1b4c>

**Module 4—Tracking Program Outcomes:** Video on keeping track of the outcomes of a navigation program by Teri Banman, RN, BSN, OCN, The University of Kansas Cancer Center

[https://youtu.be/\\_apArzdby3s](https://youtu.be/_apArzdby3s)