Developing a New Specialty Multi-disciplinary Clinic while Orienting as a Novice Nurse Navigator

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Developing a New Specialty Multi-disciplinary Clinic while Orienting as a Novice Nurse Navigator

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BACKGROUND

As our Cancer Program evolves with multidisciplinary care, leadership approved adding two specialty multidisciplinary clinics (MDCs), Hepatology (Gi) and Skin and Soft Tissue (SST) to existing Breast, Thoracic, and Prostate MDCs. Physicians were invested in developing these MDCs. Our model of MDC coordination by nurse navigators required hiring two navigators facing the challenges of learning the role as well as developing the clinics.

OBJECTIVES:

• Identify “must haves” needed to develop an MDC
• Demonstrate high patient satisfaction.
• Improve novice navigators’ competency through structured orientation.

METHODS

Guided by NCCCP MDC Assessment Tool and Oncology Roundtable “Maximizing the Value of Patient Navigation”, navigator interviews involved physicians, key to assuring the right fit. MDC “must haves” were identified by physicians completing an LHN MDC application form. “Must haves” in place included physician team, support staff & clinic space. Metrics chosen were patient satisfaction (homegrown tool) and volumes. Patient satisfaction should match existing MDCs. Navigators completed an 8 week orientation with a competency checklist and preceptor that included: shadowing Navigators, attending specialty MDCs, and meeting with Cancer Support staff to understand their roles. Shadowing physicians and observing surgeries was crucial in establishing collegial relations. Navigators self-educated and researched their specialty through NCCN guidelines, LHN’s standard. Navigators attended MDC team meetings to plan the startup of their MDC.

RESULTS

• An 8 week orientation competency checklist was completed.
• Overall patient satisfaction score for SST = 4.7/5, for Gi = 4.9/5. Existing goal is 4.7/5.
• Anticipated MDC volumes for SST = 50/yr; Gi = 144/yr, actual to date for SST 8 months = 42, Gi 11 months = 57.

This homegrown tool is sent to all patients that attend the MDC. The results are benchmarked against a successful established MDC.

CONCLUSIONS

The Navigator as coordinator of the MDC has proven successful and yielded high patient satisfaction. Administrative and physician support for both the MDC and the investment in a structured, comprehensive navigator orientation was critical to the success of a new MDC. As the Navigator assumes the role of coordinator, development of collegial relationships among all team members is also critical. MDCs are a mark of quality and can differentiate your program from the competition.

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MDC Results Table

<table>
<thead>
<tr>
<th>MDC</th>
<th>Start Up Volumes</th>
<th>BetaMaxer Satisfaction Score</th>
<th>Patient Satisfaction Score</th>
<th>Anticipated Volumes</th>
<th>Actual Volumes</th>
<th>Date / MDC</th>
</tr>
</thead>
<tbody>
<tr>
<td>SST MDC</td>
<td>42 (11 months)</td>
<td>4.7/5</td>
<td>4.83/5</td>
<td>50/yr</td>
<td>42 (8 months)</td>
<td></td>
</tr>
<tr>
<td>Gi MDC</td>
<td></td>
<td></td>
<td>4.9/5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Skin &amp; Soft Tissue MDC</td>
<td></td>
<td></td>
<td>4.83/5</td>
<td>144/yr</td>
<td>57 (11 months)</td>
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</tr>
<tr>
<td>Skin &amp; Soft Tissue MDC</td>
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Both forms are completed by the Physician Team and reviewed by the Cancer Center Leadership prior to implementation of the MDC. These provide our baseline “must-haves” and benchmark for volumes