

Evaluating an Online Training Course to Develop and Sustain Cancer Navigation and Survivorship Programs

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OBJECTIVES: To evaluate the impact of the Executive Training on Navigation and Survivorship (Executive Training) online training course, designed by the George Washington University Cancer Center, on nurses and other healthcare professionals.

SAMPLE & SETTING: A volunteer sample of 499 healthcare professionals, including nurses and patient navigators, were recruited through multiple Internet-based channels.

METHODS & VARIABLES: Participants completed questionnaires before and after each module and at the end of the training. Descriptive statistics were calculated, and paired *t* tests were used to assess pre- and post-test learning confidence gains for each module. Qualitative feedback from participants was also summarized.

RESULTS: From pre- to post-test, each group demonstrated statistically significant improvements in confidence ($p < 0.05$) for all seven training modules. Confidence gains were statistically significant for 19 of 20 learning objectives ($p < 0.05$). Overall rating scores and qualitative feedback were positive.

IMPLICATIONS FOR NURSING: The Executive Training course prepares healthcare professionals from diverse backgrounds to establish navigation and survivorship programs. In addition, the training content addresses gaps in nursing education on planning and budgeting that can improve success.

KEYWORDS nursing education; patient navigation; survivorship; cancer program planning

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More than 16.9 million people in the United States are living with a history of cancer (Miller et al., 2019). Because of a growing and aging population, as well as improvements in screening and treatment, this number continues to increase. According to Miller et al. (2019), the estimated number of survivors in the United States is predicted to rise to as many as 22.1 million people by 2030.

Background

Patient navigation and evidence-based survivorship guidelines aim to address health disparities in cancer care and to improve overall quality of life for cancer survivors. Patient navigators can provide culturally affirming communication, refer patients to additional resources, and troubleshoot barriers to timely, coordinated cancer care (Freeman, 2012). The Commission on Cancer standards require accredited cancer programs to include a patient navigation process and provision survivorship care plans (American College of Surgeons, 2012). In addition, survivorship care plans have been implemented as a strategy to improve care coordination and long-term follow-up care for survivors who have transitioned out of active cancer treatment (Salz & Baxi, 2016). According to a report from the Institute of Medicine (Hewitt, Greenfield, & Stovall, 2006), a variety of cancer survivorship care models have emerged that are coordinated by diverse clinicians, such as oncologists, advanced practice nurses, physician assistants, and primary care providers (Halpern et al., 2015; McCabe, 2012; Mead, Pratt-Chapman, Gianattasio, Cleary, & Gerstein, 2017; Rosenzweig, Kota, & van Londen, 2017; Spears, Craft, & White, 2017). Clinical guidelines for survivorship care have also been established for certain tumor types and treatment side effects (American Cancer Society, 2018; American Society for Clinical Oncology,