

A Patient Orientation Program at a Comprehensive Cancer Center

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Purpose/Objectives: To determine which method of delivery of a cancer orientation program contributed to higher levels of satisfaction and lower levels of anxiety for newly diagnosed patients with cancer and each patient's support person.

Design: A randomized study of patients with cancer and caregivers into one of three delivery methods for an orientation program or a control arm.

Setting: A National Cancer Institute–designated comprehensive cancer center in the midwestern United States.

Sample: Newly registered patients with cancer diagnoses and their identified support people.

Methods: The intervention consisted of an orientation video and booklet delivered by three separate methods: class, drop-in sessions, or information mailed to homes. Participants completed questionnaires before the intervention and three weeks after the intervention.

Main Research Variables: State and trait anxiety, satisfaction, understanding of the organization, awareness and use of resources, and stress and coping.

Findings: The most successful accrual arms were the mailed intervention and control groups. The mailed intervention group compared to the control group reported higher levels of satisfaction with the cancer center, satisfaction with resources, understanding of the cancer center's structure, and satisfaction with healthcare professionals' communication with them. Fewer intervention group participants reported a lack of awareness of specific resources, and a larger percentage of the intervention group used available resources. Fewer benefits were noted with caregivers.

Conclusions: The mailed intervention was successful in improving several patient outcomes. It was shown to be especially helpful to those with high trait anxiety.

Implications for Nursing: A mailed orientation program can be a useful approach for increasing satisfaction with services.

Many patients newly diagnosed with cancer who receive treatment at a National Cancer Institute–designated comprehensive cancer center may be visiting the facility for the first time. Because of their unfamiliarity with the organization and the size of the institution, the experience can be overwhelming for patients and their support people. The authors wanted to explore the impact of providing a cancer orientation program for patients and caregivers to determine which method of delivery would contribute to higher levels of satisfaction and lower levels of anxiety.

Literature Review

Only one group of researchers has reported on the benefits of an orientation program (McQuellon et al., 1998; Wells,

Key Points . . .

- ▶ Participants who received a mailed orientation program prior to their medical oncology visits reported higher levels of satisfaction with the cancer center, satisfaction with resources, understanding of the cancer center's structure, and satisfaction with healthcare professionals' communication with them.
- ▶ The mailed orientation program was shown to be especially helpful for patients with high trait anxiety, a vulnerable group at high risk for poor psychosocial outcomes.
- ▶ Oncology nurses can play a key role in the development, implementation, and evaluation of successful orientation programs for patients with cancer and their support people.

McQuellon, Hinkle, & Cruz, 1995). Their orientation program was comprised of healthcare professionals meeting one-on-one with patients. Wells et al. reported that an orientation program was effective in reducing anxiety and distress associated with patients' (N = 33) initial outpatient clinic appointments. Patients in the intervention group demonstrated substantially more knowledge about clinic operations and higher satisfaction with care. McQuellon et al. reported on a larger study of 150 patients. The 90-minute individual orientation program decreased anxiety, distress, and depressive symptoms and enhanced knowledge and satisfaction with care. Because of a dearth of research in the area, the current researchers conducted an expanded review of the literature.

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