What Matters to the Patient Is What Really Matters: Quality in Oncology Nursing

Anne H. Gross, PhD, RN, FAAN

On the occasion of the Oncology Nursing Society’s 40th anniversary, it is fitting to look back and appreciate how far we have come in the area of quality cancer care. So much has changed, fueled in part by advances in healthcare quality improvement across the United States.

At a Glance
- The past 40 years have brought many improvements in the quality and safety of oncology nursing practice.
- Beyond the technical aspects of care, advances in patient-centered care have improved patient experiences and outcomes.
- Consistent, personalized, human caring may be the focus of change in the next 40 years.

Reflecting on the 40th anniversary of the Oncology Nursing Society led me to recall my own 30-plus years in nursing and how, as a new graduate nurse, almost all oncology care was delivered in the inpatient setting. In my first few years of practice, I mixed my patients’ medications without personal protective equipment or the independent RN double checks that have become standard to safe practice today. Through advances in science, tools are now in place to test those medications with greater accuracy and safety.

In the early 1970s, the husband of a man diagnosed with breast cancer in early 1970s was cured at the same cancer center. The man compared and contrasted the experiences of being the husband of a patient with breast cancer in the early 1970s and then again in 2002. The journey with his first wife was one that he characterized as “in the dark.” Neither he nor his wife were brought into the conversation about the gravity of her disease, and they were not included in decision making about what the best approach to treatment would be. They received what they thought was excellent care, but they were passive recipients instead of active partners, and they felt vulnerable and afraid. No end-of-life planning or discussion took place, and the husband felt unprepared for the loss that he eventually sustained. His second experience was quite different. He characterized it as much more enlightened. He felt as vulnerable and scared as he had the first time, but he and his wife were taught about her diagnosis; more than one treatment option was available to choose; and each option was presented, compared, and contrasted with the others. They felt involved and part of the team and were guided in decision making about all aspects of care. She had surgery and chemotherapy and was still disease-free five years later.

Patient-Centered Care

In addition to the advances in cancer research, the advent of new technologies, and more effective drugs and clinical