Assessment of Patient and Family Needs During an Inpatient Oncology Experience

Mary Dougherty, MSN, RN, AOCNS®

Little research has been conducted to discern the specific needs of patients with cancer and their family members, despite the number of oncology-related hospital admissions each year. The purpose of this descriptive study was to determine the specific needs of patients and family members during an inpatient oncology admission. A convenience sample of 54 participants (27 patients and 27 family members) was obtained. The most important needs identified by patients related to information and communication about their medical care, the competence of their caregivers, cleanliness of the care environment, and adequacy of pain management. Family members’ most important needs were similar, with the addition of needs related to visitation and specific discharge information. The least important needs identified by both groups related to information about the hospital setting, having the same nurse provide care, support from nonfamily members, and speaking with the physician daily. Patients and family members look to establish a level of trust in their care providers. The trust does not seem to depend on consistency of practitioners, but rather on communication among caregivers, which enables patients and their families to feel better prepared for an unknown future. In addition, a need exists to improve communication among patients, families, and nursing staff through intentioned conversations.

At a Glance

- Open and honest communication, including use of understandable terms, truthful answers, and clear discussion related to probable outcome or prognosis, is important to patients and their families in the inpatient setting.
- Because physicians rely on nurse practitioners, physician assistants, and hospitalists to handle the acute daily management of patients in the inpatient setting, patients and families would benefit from an explanation of the healthcare team.
- Clear opportunities exist to better meet the needs of patients and their families through focused communication with healthcare providers in areas such as prognosis, pain control, side-effect management, and discharge planning.

Hospitalization for any reason is highly stressful for patients and their family members. When admission is for diagnosis or treatment of cancer, additional stresses are likely to occur related to prognostic uncertainties and fears, creating a heavy burden for patients and their families. Therefore, having specific knowledge of the needs of patients with cancer and their family members would better prepare nursing staff to address those special needs. However, despite the frequency of hospital admissions for patients with cancer each year, little research has been conducted to discern the specific needs of these groups.

Most research studies on patient and family needs have been conducted on family members of critically ill patients (Bouman, 1984; Browning & Warren, 2006; Fischer, 1994; Leske, 1992; Molter, 1979; Warren, 1993). In those studies, family members have been found to have a well-defined, predictable set of needs that includes receiving assurance of hope for the patient’s outcome, being near the patient, receiving information about the patient’s condition in a timely and understandable manner, and having support systems available (e.g., counseling, religious support) (Leske, 1997).

A few studies have focused on identifying the needs of patients with cancer and their family members (Andressen, Randers, Nashlund, Stockeld, & Mattiasson, 2005; Fitch & McGrath, 2003; Gozum & Akcay, 2005; Griffiths, 2005); however, only Griffiths’s (2005) was conducted with American participants. The study consisted of qualitative, semistructured interviews of 11 patients with a variety of cancer diagnoses, 5 family members, and 8 nursing staff. Themes of needs identified in the small sample were emotional or spiritual support, education and information, continuity of care, communication between care providers, and knowledgeable, skilled nurses (Griffiths, 2005). Although helpful