

# Tools for Communication

## Novel infrastructure to address patient-perceived gaps in oncology care

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**BACKGROUND:** Healthcare providers (HCPs) and patient communication are integral to high-quality oncology care. The patient and HCP perspectives are needed to identify gaps in care and develop communication tools.

**OBJECTIVES:** This study aimed to understand patient- and HCP-perceived elements of and gaps in high-quality care to develop novel communication tools to improve care.

**METHODS:** Qualitative interviews were conducted among 16 patients with cancer and 10 HCPs in the United States. Trained interviewers elicited patients' and HCPs' concerns, views, and perceived needs for communication tools. A thematic analysis was used to identify four quality of care domains, depicted in a conceptual model, and two draft communication tools were developed to address identified gaps.

**FINDINGS:** No patients reported previously using a communication tool, and gaps in communication regarding treatment aims and education were evident. Two tools were developed to assess patients' life and treatment goals and the importance of ongoing education.

### KEYWORDS

oncology; communication; education; tool; patient education; quality

### DIGITAL OBJECT IDENTIFIER

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**HIGH-QUALITY PATIENT-FOCUSED CARE IS A KEY PRIORITY** in oncology care. Improving quality of care can reduce suffering and improve quality of life (QOL) and survival (American Society of Clinical Oncology [ASCO], 2006). Traditionally, the evaluation of quality of care has been based on administrative data and has focused predominantly on clinical processes and outcomes as the primary quality metrics (Agency for Healthcare Research and Quality, 2016; ASCO Institute for Quality, 2017). Few quality indicators have assessed the patient's experience of care or have been developed with patient input. Meaningful quality indicators from patient perspectives should help guide care decisions, inform payment models, and act as incentives for providers in Accountable Care Organizations (ASCO, 2013; Spinks et al., 2011).

In 2013, the Institute of Medicine examined challenges and identified opportunities for improvement in the delivery of high-quality cancer care in the United States. Key recommendations focused on the need for healthcare providers (HCPs) to increase patient engagement, communicate personalized information to patients, and provide care in line with patient needs, values, and preferences (Institute of Medicine, 2013). The engagement of patients helps HCPs to identify the most important elements of high-quality care to patients, which may differ from those of HCPs. Previous studies have revealed that patients' concerns regarding quality care differ from HCPs' concerns and include communication at the time of diagnosis, patient involvement in treatment decisions throughout care (Teno, Lima, & Lyons, 2009), and QOL (Nguyen et al., 2011, 2014).

Effective communication between HCPs and their patients has been linked to improved patient satisfaction and perceptions of care quality, improved diagnostic accuracy, and increased treatment adherence (Institute for Healthcare Communication, 2011). This further supports the need for patient-focused quality initiatives that improve communication between HCPs and patients, which have proven useful in other healthcare disciplines. For example, in obstetrics, birthing plans have been proven to be valuable tools for education and communication by enabling patient preferences to be incorporated into treatment plans and by focusing care on issues identified as most important to patients (Aragon et al., 2013). Communication between patients and HCPs during the development of care plans helps ensure that