Title:

Effectiveness of Nurse Case Management Compared with Usual Care in Cancer Patients at a Single Medical Center in Taiwan: A Quasi-Experimental Study

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Session Title:

Impacting the Patient Care Experience

Slot:

LA 02: Friday, September 26, 2014: 10:30 AM-11:45 AM

Scheduled Time:

10:50 AM

Keywords:

Nurse Case Management, cancer and quality of life

References:

1. Department of health, Executive Yuan, Taiwan: 2011 statistics of causes of death. [http://www.doh.gov.tw/CHT2006/DM/DM2 2.aspx?now fod list no=12336&class no=440&level no=4] 2. Taiwan cancer registry: Cancer incidence and mortality rates in Taiwan. [http://cph.ntu.edu.tw/uploadimages /Year_ Top10.xls] 3. Taiwan cancer registry: Cancer survival rates in Taiwan. [http://cph.ntu.edu.tw/uploadimages /Sur_ Total.pdf] 4. Bureau of National Health Insurance of Department of Health, Executive Yuan, Taiwan: The national health insurance statistics, 2010. [http://www.nhi.gov.tw/English/webdata/webdata.aspx?menu=11&menu_id=296&WD_ID=296&webdata_i d=4010] 5. Campbell C, Craig J, Eggert J, Bailey-Dorton C: Implementing and measuring the impact of patient navigation at a comprehensive community cancer center. Oncol Nurs Forum 2010, 37(1):61-68. 6. Fillion L, de Serres M, Cook S, Goupil RL, Bairati I, Doll R: Professional patient navigation in head and neck cancer. Semin Oncol Nurs 2009, 25(3):212-221. 7. Seek A, Hogle WP: Modeling a better way: Navigating the healthcare system for patients with lung cancer. Clin J Oncol Nurs 2007, 11(1):81-85. 8. Ouwens M, Hulscher M, Hermens R, Faber M, Marres H, Wollersheim H, Grol R: Implementation of integrated care for patients with cancer: A systematic review of interventions and effects. Int J Qual Health Care 2009, 21(2):137-144. 9. Wulff CN, Thygesen M, Søndergaard J, Vedsted P: Case management used to optimize cancer care pathways: A systematic review. BMC Health Serv Res 2008, 8:227. 10. Aubin M, Giguère A, Martin M, Verreault R, Fitch MI, Kazanjian A, Carmichael PH: Interventions to improve continuity of care in the follow-up of patients with cancer. Cochrane Database Syst Rev 2012, 7:CD007672. 11. Pedersen A, Hack TF: Pilots of oncology health care: A concept analysis of the patient navigator role. Oncol Nurs Forum 2010, 37(1):55-60. 12. Chen CF, Chen CM, Chiu WT: Quality assurance and case management: Diabetic foot care. Formosan Journal of Medicine 2008, 12(2):210-215. In Chinese, 13. Wilcox B, Bruce SD: Patient navigation: A "win-win" for all involved. Oncol Nurs Forum 2010, 37(1):21-25. 14. Freund KM, Battaglia TA, Calhoun E, Dudley DJ, Fiscella K, Paskett E, Raich PC, Roetzheim RG, Patient Navigation Research Program Group: National cancer institute patient navigation research program: Methods, protocol, and measures. Cancer 2008, 113(12):3391-3399. 15. Robinson-White S, Conroy B, Slavish KH, Rosenzweig M: Patient navigation in breast cancer: A systematic review. Cancer Nurs 2010, 33(2):127-140. 16. Jennings-Sanders A, Kuo YF, Anderson ET, Freeman JL, Goodwin JS: How do nurse case managers care for older women with breast cancer? Oncol Nurs Forum 2005, 32(3):625-632. 17. Goodwin JS, Satish S, Anderson ET, Nattinger AB, Freeman JL: Effect of nurse case management on the treatment of older women with breast cancer. J Am Geriatr Soc 2003, 51(9):1252-1259. 18. Hsu SC, Wang HH, Chu SY, Yen HF: Effectiveness of informational and emotional consultation on the psychological impact on women with breast cancer who underwent

modified radical mastectomy. J Nurs Res 2010, 18(3):215-226. 19. Chen CC, Wu YL, Chen YY, Hung TT, Lin CL, Huang MC: Expansion and creativity in nursing: The oncology case management model used at the NCKU hospital. The Journal of Nursing 2009, 56(2):11-16. In Chinese. 20. van der Plas AG, Onwuteaka-Philipsen BD, van de Watering M, Jansen WJ, Vissers KC, Deliens L: What is case management in palliative care? An expert panel study. BMC Health Serv Res 2012, 12:163. 21. Kuhn U, Düsterdiek A, Galushko M, Dose C, Montag T, Ostgathe C, Voltz R: Identifying patients suitable for palliative care - a descriptive analysis of enquiries using a Case Management Process Model approach. BMC Res Notes 2012, 5(1):611.

Learning Activity:

LEARNI NG OBJECTI VES	EXPAN DED CONTE NT OUTLIN E	TIME ALLOT TED	FACULTY/SPE AKER	TEACHING/LEA RNING METHOD	EVALUATION/FE EDBACK
Example	Example	Example	Example	Example	Example
Critique selected definition of the term, "curriculu m"	Definitions of "curriculum" Course of study Arrange ments of instructional materials The subject matter that is taught Cultural "training" Planned engagement of learners	20 minutes	Name, Credentials	Lecture PowerPoint presentation Participant feedback	Group discussion: What does cultural training mean to you?
Introductio n the nurse case		5 minutes	Yu-Chu Pai	Lecture, Powerpoint presentation	Group discussion: Share the circumstances of applying the nurse

manageme nt model	managem ent				case management in different setting
nurse case manageme nt model	Nurse case managem ent in Taiwan	10minute s	Yu-Chu Pai	Lecture, Powerpoint presentation	Group discussion: Share the circumstances of how the nurse case management could be better?

Abstract Text:

Purpose:

In order to improve treatment and care quality for cancer patients, nurse case management model has applied generally in the clinical practice. However there were only few evidence-based studies on the relative benefits in Taiwan. Further analysis and feedback application are needed. The aim of this study is to evaluate the effectiveness of care quality in cancer patients with nurse case management.

Methods:

This study was conducted with a quasi-experimental design in a national medical center in Northern Taiwan. Patients diagnosed as lung, liver, breast, colon, buccal or cervical cancers were eligible for inclusion. A total number of 600 subjects randomly selected from the cancer case management system enrolled in the case managed group, and 600 patients who received usual care were randomly selected from cancer registry and enrolled in the control group. The study instrument was developed to measure care effectiveness, including the rates of patient continuing treatment, non-adherence to treatment, prolonged hospitalization, unplanned readmission, and planned admission for active treatment. The content validity of expert was assessed as 0.9.

Results:

The nurse case management significantly decreased the unplanned readmission rate caused by infection (1.5% vs. 4.7% in the control group, p = 0.002). The rate of patient continuing treatment in the institution significantly increased in the case managed group (93.8% vs. 84.8% in the control group, p < 0.001). The planned admission rates in 14 days and in 15–30 days for active treatment also significantly increased in the case managed group (18.4.% vs. 3.9% in the control group and 34.5% vs. 10.4% in the control group, respectively, p < 0.001). The results indicated that nurse case management provided better control in timeliness and continuity of patient treatment.

Conclusions:

This study demonstrated that cancer case management could improve the effectiveness of cancer care services and concretely illustrated a comprehensive model for oncology patients in Taiwan. In addition, the model could be optimized for further application and improvement of cancer care. Future investigations are needed to develop precise and rigorous evaluation to optimize the utilization of cancer case management.